RAO BULLETIN

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* DoD *

DFAS Fraud ► Retiree Direct Deposit Phone Change Policy

A military retiree whose pay was stolen wants the Defense Finance and Accounting Service to beef up its security to help prevent this from happening to others. He's also concerned this recent scam may have already happened to others who don't yet realize it. When retired Air Force Lt. Col. Bob West's retirement pay wasn't deposited into his bank account in Texas as it should have been 1 OCT, he called his bank, then DFAS. He found out a thief had called DFAS on Sept. 18 and diverted the pay to an account at a different financial institution in Utah. Within 24 hours after the money went into the fraudulent account, the thief had withdrawn $500. "So [the thief] knew the timing," West said. The financial institution agreed to freeze the account. "I want DFAS to implement a more secure system such as a [personal identification number] or access code that someone has to know before they can access their account by phone to change the location of where their pay goes, or take other actions," West said. "All [the thief] needed was my name, address, rank, Social Security number and date of birth. It's scary."

West, who retired from the Air Force in 2007, is senior aerospace science instructor for the Air Force Junior ROTC program at Denton High School in Denton, Texas. West said a DFAS employee told him that the agency will investigate the theft. His pay was returned to his account 7 OCT, he said. In cases of fraudulent diversion of pay, DFAS tries to retrieve the money from the account established by the criminal, spokesman Steve Burghardt said. Where fraud is suspected, the information is turned over to a DoD-affiliated criminal investigation service, he said. DFAS does not discuss individual cases because of privacy concerns,

but officials have been in contact with the retiree in question to ensure his account information is correct and implement added protections against future pay theft attempts, Burghardt said. Information was not immediately available from DFAS at press time about whether there have been other similar thefts of retirees' or service members' pay.

Lt. Col. Bob West

The accounts of active-duty members can't be accessed simply by a phone call if someone wanted to change bank accounts. The military services require all active-duty members to use online myPay accounts for transactions such as changing the electronic funds transfer account information, Burghardt said. But retirees are not subject to the same requirements; they can make certain changes by phone to their accounts once their identity has been verified, he said. However, they also can use myPay, or send a change request form by mail. Customers are asked randomly selected questions to verify their identity before any discussion of specific pay issues can begin, Burghardt said, and incorrect answers will result in termination of the requested change. Burghardt said that when a customer is changing the financial institution where the retired pay is being deposited, the customer service representative asks questions about the old account where the money was being deposited, as well as where the money will be going. Any change made will generate a notification to the retiree, either by email or postal service, depending on their preferred communication choice. West said he had not yet received such a notification.

Meanwhile, West has been puzzling over how a thief could have gotten this personal information and is concerned that it may have happened to others. "Who would be responsible for the money not being there if my utilities and other bills are being paid from that account?" he said. Burghardt said that if the customer is a service member and it is determined that he or she should be compensated for any lost funds, DFAS will issue payment for deposit in the verified bank account. For retirees, he said, DFAS works with them to resolve any pay issues and prevent financial hardship. West has placed fraud alerts with all the credit bureaus and has been checking his accounts often. "DFAS is aware that some criminals intent on committing fraud can obtain personal information through a variety of sources," Burghardt said." Our security protocols are established to minimize unauthorized access or changes to customer pay information." [Source: MilitaryTimes | Karen Jowers | Oct. 11, 2014 ++]

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Military Retirement System Update 16 ► Redux a Rotten Deal

Would an E-6 careerist nearing retirement accept a $30,000 car loan if forced to pay back a total of $390,000 in principal and interest? Would an E-7 accept a $30,000 loan to make a down payment on a home or to wipe out credit card debt if the lifetime cost of that decision were $386,000 in lost retired pay? The answer to both

questions, regrettably, is: You bet. Hundreds of career servicemembers every month make a comparable choice while in their 15th year of service. That's when, in return for an immediate cash bonus of $30,000, they make an irrevocable decision to opt out of "High-3" retirement and accept the less generous "Redux" plan. The loan shark here is the federal government, the same Congress and Department of Defense that like to get tough with payday lenders outside of military bases who prey on young or naïve enlisted members. Meanwhile, they offer their own rotten deal, which every year gets a little worse, say economists at the defense think tank CNA.

Under contract to the Marine Corps, CNA in late September sounded anew its periodic alarm over the Redux retirement option and its onerous $30,000 Career Status Bonus, in a report titled "Retirement Choice 2014." Applying current military pay tables and fresh assumptions about the lifetime value of military retirement options, CNA spells out in blunt terms the penalties careerists impose on themselves when they take the $30,000 bonus while five years from initial retirement eligibility. For those who elect Redux, retire at 20 years and live until age 79, which is average life expectancy for their generation, E-6s among them will reduce lifetime retired pay by $335,529. E-7s will lose $391,600. CWO-3s will lose $451,303. An O-4, who presumably retires at age 44 rather than 38 for enlisted, would see lifetime pay cut by $382,522, CNA says.

"The best way to think about this is to consider Redux's $30,000 Career Status Bonus as an early cash-out" of part of a member's retirement. "We can calculate how much this cash-out costs…by thinking of it as a 'loan' to be paid back later in the form of lower retirement checks," CNA says. While car loans and mortgages have fixed loan periods, often five years for cars and 30 for mortgages, the Redux bonus "has a rather peculiar payback scheme." The member "pays nothing until retirement, pays quite a bit from the beginning of retirement until age 62, and then continues to pay back smaller amounts over the rest of his or her lifetime." To fully grasp the impact, careerists eyeing the bonus must consider how retired pay is calculated under High-3 versus Redux. Both plans provide an immediate annuity after 20 or more years of service computed on a base amount of their highest three years of basic pay. But rather than 50 percent base pay after 20 under High-3, retirees under Redux receive 40 percent. That disparity narrows gradually for every year served beyond 20 so that after 30 years of service both the Redux and the High-3 retiree will draw 75 percent of their base amount.

What never disappears is the disparity in plan with inflation protection. High-3 retirees get annual cost-of-living adjustments or COLAs to match inflation. Redux COLAs are set a percentage point below inflation. There is a one-time catch under Redux to restore lost purchasing power temporarily at age 62 but then the COLA-minus-one formula resumes. Redux retirees feel the impact for a lifetime and so do their surviving spouses if they are covered under the military's Survivor Benefit Plan. Unless Redux retirees elect to pay a higher SBP premium, survivor payments too are impacted by COLA-minus-one. Congress first approved Redux for new entrants in 1986 in hopes of saving billions of dollars in retirement costs. It repealed it in

2000 on worries that it was compromising career retention rates. But to hold down some pension costs, Congress voted for a scheme that entices some members back into Redux voluntarily with the $30,000 bonus at the 15-year mark.

Anita Hattiangadi, director of the Marine Corps Manpower Team at CNA and co-author of the retirement choice report, said in a phone interview that comparing the Redux bonus to a loan retirees must "pay back forever" helps careerists conceptualize the full effect of their decision. "Another thing we do is to talk about the very high break-even interest rate you would have to earn" for the bonus to make any sense, she said. Two main reasons given for taking Redux and the bonus is members want or need the money now, or they think they can do better than under High-3 retirement if they invest that $30,000 wisely and watch it grow. "Neither of these reasons should justify the Redux/bonus choice," the report concludes. "Servicemembers who want or need the money now should look into other ways to obtain the required funds." Even members who draw their Redux bonus tax free while serving in a combat area, or who shelter the money in their federal Thrift Savings Plan accounts, would almost certainly be better off financially in the long run by sticking with High-3 retirement, the reports argue in considerable detail.

Congress hasn't raised the bonus since it first was offered in 2001. Aline Quester, another co-author and principal research scientist at CNA, said military folks should be grateful because fewer careerists every year are being enticed to accept Redux. Marine Corps "take rate" has fallen from 56 percent in 2001 to 12 percent today. That's still too high, the report argues. "My big worry," said Quester in an interview, "is that Congress will decide that instead of $30,000 we should give them $50,000 or $60,000 which would still be a terrible deal but more people would take it. So I'm very content to have it get to be a worse and worse and worse deal because, I think, the take rates are going to keep falling." CNA has briefing slides and an online calculator for careerists to use to compare lifetime values of Redux and High-3 for them. These along with the full report are available at http://www.cna.org/news/releases/2014-09-29. [Source: Stars & Stripes | Tom Philpott | Sept. 29, 2014 ++]

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DoD Pay and Benefits Update 03 ► Pentagon Trim Proposals to Continue

Deputy Defense Secretary Bob Work, a retired Marine colonel and former Navy undersecretary, said 30 SEP that the Pentagon will continue pressing to trim military pay, pensions, and housing allowances despite rejections by Congress. The Pentagon will also try again to reform the Tricare health care system and kill the A-10 attack aircraft despite nearly universal opposition from veterans service organizations, Work said at a Council on Foreign Relations forum. "This whole idea of compensation is absolutely critical. Compensation (reform) is a really big deal" in DoD's efforts to maintain readiness, fight wars in Afghanistan and the Mideast and rebalance forces to the Pacific while working under the budgetary restrictions of the Congressional sequester process, Work said. Matters will come to a head in February when DoD presents its next budget and the Military Compensation and Retirement Modernization Commission presents its long-awaited reform recommendations.

He said he expected that Congress will still be working under a continuing resolution on DoD's budget in February. "This is truly the last chance for us to make any moves in this space" on pay, pensions and other cost-cutting measures, said Work. Without the proposed cuts, the Pentagon will be left with a $70 billion hole in its budget, Work said, but Congress has opposed "what we consider to be reasonable approaches. It's been no, no, no, no, no, no, no" to nearly every suggestion. "This is la-la land," Work said. The Military Officers Association of America and other veterans groups were bracing for the upcoming fight with DoD

on pay and benefits. "I don't expect that the Department is going to ease off on any of these next year," said retired Col. Mike Hayden, MOAA's director of government relations. He said that DoD was "looking at any way to try to offset readiness costs by shifting them onto servicemembers and their families and retirees."

Over the Labor Day weekend, President Obama sent notice to Congress limiting pay increases for the military and federal civilian workers to one percent. The House has passed a bill for a military pay increase of 1.8 percent while the Senate has yet to act on an amendment offered by Sen. Marco Rubio, R-Tex.,for a similar 1.8 percent military pay raise. Work made the comments on pay and benefits in response to questions at the CFR forum. His main topic was the Obama administration's push to rebalance forces to the Asia-Pacific region, with 60 percent of military assets and personnel focused on Asia and 40 percent elsewhere. Work said that Asian allies constantly point to the turmoil in the Mideast and Russian aggression in eastern Europe to ask him about the Pacific pivot: "Is this rebalance really real?" However, the U.S. had the resources to "stay committed to Europe and the Mideast" while carrying out the rebalance, Work said, but budget constraints could mean that "we might not be able to go as fast as we like."

To underline the administration's commitment to the rebalance, Work said that the F-35 Joint Strike Fighters, when they come on line, would go first to the Pacific along with the new P-8 Poseidon surveillance aircraft. Work said that there also were plans to have the new Zumwalt class destroyer go first to the Pacific – "we hope." [Source: MilitaryTimes | Richard Sisk | Sept. 30, 2014 ++]

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DoD Mobilized Reserve 30 SEP 2014 ► Decrease of 708

The Army National Guard, Army Reserve and Navy Reserve announced this week a decrease in activated National Guard and reserve members, while the Marine Corps Reserve, Air National Guard and Air Force Reserve announced an increase of activated National Guard and reserve members. The Coast Guard Reserve announced a decrease of 708 in the number of activated National Guard than last reported in the 1 SEP Bulletin. At any given time, services may activate some units and individuals while deactivating others, making it possible for these figures to either increase or decrease. The total number currently on active duty from the Army National Guard and Army Reserve is 21,294; Navy Reserve, 3,292; Marine Corps Reserve, 1,088; Air National Guard and Air Force Reserve, 6,749; and the Coast Guard Reserve, 295. This brings the total National Guard and reserve personnel who have been activated to 32,718, including both units and individual augmentees. A cumulative roster of all National Guard and reserve personnel at http://www.defense.gov/pubs/Mobilization-Weekly-Report-140930.pdf lists those currently activated. [Source: DoD News Release No. NR-502-14 dtd Oct. 01, 2014 ++]

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DoD MAVNI Program ► Illegal Immigrant Recruitment Policy

A small number of immigrants living in the U.S. illegally will have an opportunity to join the military for the first time in decades under a new Defense Department policy unveiled 26 SEP. The new rules will expand an existing program allowing recruiters to target foreign nationals with high-demand skills, mostly rare foreign language expertise or specialized health care training. For the first time, the program — known as **Military Accessions Vital to National Interest**, or MAVNI — will be open to immigrants without a proper visa if they came to the U.S. with their parents before age 16. More specifically, they must be approved under

a 2012 Obama administration policy known as Deferred Action for Child Arrivals, or DACA. The new DoD policy may be the first phase of a broader government wide effort to ease pressure on immigrants and create new paths to citizenship. President Obama, frustrated with the failure of Congress to pass any substantial immigration reform, has vowed to aggressively use his presidential authority to change the way immigration policies are carried out.

The Pentagon program is capped at 1,500 recruits per year. Officials say it's unclear how many of those might be unlawful DACA status immigrants as opposed to others who are also eligible for military service under MAVNI, including those with legal, nonpermanent visas such as students or tourists. Estimates suggest between 1.2 million and 2.1 million children, teenagers and young adults in the U.S. have no legal immigration status but meet the criteria for the DACA program. Those targeted by recruiters under the MAVNI program likely will be immigrants with language skills critical to national security, such as Arabic, Chinese, Pashto or Persian. But Pentagon officials don't know how many of those immigrants have actually learned their ancestral language to the proficiency required by the military. "We're just not sure how many within that existing population of DACA would have the linguistic skills to qualify," said one defense official familiar with the policy change. "These are kids who entered the country at a fairly young age and have basically grown up in the United States, so the limit of their language talents would probably be the language that they received at home." DACA status is granted by the Homeland Security Department and includes a background check.

On average, the military recruits about 5,000 noncitizens each year, nearly all of them permanent U.S. residents, or so-called "green card" holders. Starting in 2006, DoD began accepting some foreigners with nonpermanent visas, such as students or tourists, if they had special skills that are highly valued. After entering military service, foreigners are eligible for expedited U.S. citizenship. Since 2001, more than 92,000 foreign-born service members have become citizens while serving in uniform. The MAVNI program began in 2008 and remains a pilot program. DoD notified Congress on Thursday that the program, which was due to expire at the end of this fiscal year, will be extended for another two years and will for the first time include DACA-status immigrants. The military services are not required to accept recruits under MAVNI. In recent years, the Army has been the only service to accept a significant number of recruits under the program. The Air Force has accepted only a few and the Navy and Marine Corps have not sought MAVNI recruits in recent years. [Source: MilitaryTimes | Andrew Tilghman | Sept. 25, 2014 ++]

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DoD Fraud, Waste, & Abuse ► **Reported 1 thru 15 Oct 2014**

Afghanistan -- The Army and Marine Corps may have wasted more than $100 million returning vehicles from Afghanistan that they don't need over just a one-year period, according to a Government Accountability Office report released 29 SEP. The services could have saved the money by blowing up the trucks or turning them over to allies, the report says. Over a one-year period, the Army and Marines returned 1,000 vehicles to the United States that the service didn't need, at a cost of as much as $107,400 per vehicle. The Pentagon has made some progress in reining in its costs, GAO notes, but not enough. "However, due to ineffective internal controls, the Army and Marine Corps may be incurring unnecessary costs by returning equipment that potentially exceeds service needs or is not economical to return and repair," the report says.

"This report is a troubling reminder that the Department of Defense has more work do in managing taxpayer dollars," said Sen. Tom Carper, a Delaware Democrat and chairman of the Homeland Security and Government Affairs Committee. "The Government Accountability Office underscores that the DOD can and should do a much better job in preventing unnecessary costs by taking some common sense steps in managing its surplus military vehicles. We simply cannot afford this type of waste and ineffectiveness." The military's effort to return gear from Afghanistan is on time and budget, Mark Wright, a Pentagon spokesman, said in response to the GAO findings. The Pentagon expects to spend about $6 billion to retrieve gear from Afghanistan, Wright said.

The Army and Marines may have shipped home some of the vehicles because they did not take transportation costs into account. They made that decision despite Pentagon guidance that requires it, the GAO report says. From October 2012 to October 2013, the Pentagon returned from Afghanistan or destroyed 14,664 vehicles, or an average of 1,128 vehicles per month, the report says. The report notes the difficulty facing the Pentagon in returning gear from landlocked Afghanistan. Urgently needed supplies, including Mine Resistant Ambush Protected (MRAP) trucks had been flown to Afghanistan at high cost. Flying vehicles from Afghanistan to Jordan, for example, and shipping them from a port there has the highest cost at $107,400 per truck. It is far cheaper to ship gear from Afghanistan by rail, truck and sea. Out of 9,000 vehicles returned by the Army and Marines, 1,034 were unneeded, according to the GAO analysis. Transportation costs alone ranged from $5.9 million to $111 million, depending the size of the vehicle and mode of shipping it home. The GAO urged the Pentagon to ensure that it consider all costs before shipping home gear.

The report appears to miss one potential cost of giving vehicles to allies, said Todd Harrison, a military budget expert at the non-partisan Center for Strategic and Budgetary Analysis. U.S. and allied warplanes have been destroying Humvees given or sold to the Iraqi military that have been captured by fighters from the Islamic State, which is also known as ISIL "The flip side of this is when we leave vehicles with our partners we run the risk of those vehicles falling into the wrong hands, as they have in Iraq," Harrison said in an email. "Now we are spending money to drop bombs on some of the Humvees and MRAPs ISIL stole from the Iraqi military."

The Pentagon's efforts to supply troops in Iraq and Afghanistan has had other major cost overruns. For instance, the Pentagon spent $620 million on late fees for shipping containers it failed to return on time from Iraq and Afghanistan. It wasn't until this year that the Pentagon got a handle on its inventory of metal shipping containers and didn't have to pay late fees. [Source: USA TODAY | Tom Vanden Brook | Oct. 01, 2014 ++]

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Army National Guard -- Two retired Army National Guard officials and a civilian have pleaded guilty in a bribery scheme involving millions of dollars in contracts for marketing and recruiting, the Justice Department announced Wednesday. The Guard's recruiting and marketing programs have been rocked by scandal and allegations of waste this year, including an $88 million contract sponsoring a NASCAR driver that netted the service few, if any, recruits. Another Guard program, which paid bonuses for signing up recruits, was shot through with fraud, resulting in the investigation of 800 soldiers for taking as much as $100 million in kickbacks. The latest scandal, according to the Justice Department, involves Guard officials who allegedly bypassed the competitive-bidding process to steer contracts to cronies in exchange for bribes. In addition to those who have pleaded guilty, two more Guard officials have been indicted. "As captured by its motto, the Army National Guard is 'always ready, always there' for the American people," Assistant Attorney General Leslie Caldwell said in a statement. "Unfortunately, today's charges expose National Guard officials who were 'always ready' to pocket bribes and 'always there' to take kickbacks." A Guard spokesman did not respond immediately to a request for comment.

Sen. Claire McCaskill has held hearings on the Guard's troubled recruiting efforts.

In one scheme, a retired Army National Guard colonel founded a minority-owned company that could receive contracts without competing for bids. The retired colonel then paid an active-duty colonel a percentage of the $4.5 million in contracts that were awarded to the company, the Justice Department said in a news release. Sen. Claire McCaskill (D-MO), who chairs an oversight panel on financial and contracting, has held hearings on the Guard's troubled recruiting efforts and said the indictments fit into the pattern of wasteful spending by the Guard. In August, the Guard announced that it cutting back its spending on sponsoring race cars. "This kind of betrayal of the public trust is outrageous, and dishonors the uniform of our brave National Guardsmen," McCaskill said. "We've already uncovered the wasteful spending of millions of taxpayer dollars on an ineffective NASCAR recruitment program that yielded zero recruits, and millions of dollars in fraud in the Guard's Recruiting Assistance Program. But bribery by top Guard leadership who administered these programs should result in jail time, and I'm pleased the Justice Department has taken action to bring these corrupt officials to justice." [Source: USA TODAY | Tom Vanden Brook | Oct. 01, 2014 ++]

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Afghanistan -- After spending nearly half a billion dollars on 20 planes to outfit the Afghan Air Force, the Defense Department turned around and scrapped 16 of the aircraft for 6 cents on the pound—just $32,000, the Special Inspector General for Afghanistan Reconstruction has learned. The Defense Logistics Agency

carried out the planes' destruction at Kabul International Airport as the SIGAR was investigating the Defense Department's failed program to outfit the Afghans with a fleet of twin propeller military transport aircraft. The G222 aircraft, manufactured in Italy, proved impossible for the Afghan military to maintain and the Pentagon terminated the program in March 2013, three months after the SIGAR initiated its investigation. By then, the department had spent at least $486 million on the aircraft. SIGAR determined that the aircraft flew only 234 hours out of 4,500 required from January through September 2012.

In a pointed letter to Air Force Secretary Deborah James, John Sopko requested all documentation surrounding the decision to scrap the planes along with an explanation. Specifically, he wants to know why the planes weren't flown out of the country to be sold elsewhere and what steps the department took to obtain a refund. What's more, Sopko wants to know the end use of the scrap metal sold to an Afghan company and the ultimate fate of parts that weren't scrapped, such as engines and brass components. In a country where such materials often end up as components in weapons used against U.S. troops, the answers could prove deeply troubling to U.S. and Afghan officials. The remaining four aircraft of the original 20 are at Ramstein Air Force Base in Germany. In a separate letter to Defense Secretary Chuck Hagel, Sopko requested advance notice before the remaining planes are moved or destroyed. [Source: GovExec.com | Katherine McIntire Peters | Oct. 09, 2014 ++]

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DoD MHS Review ► Performance On Par with Private Sector Care

A comprehensive review of the military health care system (MHS) which cares for 9.6 million beneficiaries -- service members, families and military retirees and their families, finds that overall the military health system is functioning on a par with private-sector care. However, patients face broad disparities in appointment wait times and quality of care — and have little way of finding out how their Defense Department hospital or clinic measures up regarding safety or potential harm to their health. The review, ordered in May by Defense Secretary Chuck Hagel to determine whether the Pentagon provides safe, effective care to active-duty beneficiaries, retirees and family members, found that by and large, the system provides "good quality care that is safe and timely" and is comparable to civilian care. But the military system has several notable discrepancies across its 56 hospitals and 361 clinics, with wide variability in timely access to care, patient safety and quality. "The review found pockets of excellence — significant excellence we are very proud of," Hagel said at a Pentagon briefing 1 OCT. "It also found gaps and facilities that must improve."

Defense Secretary Chuck Hagel ordered a comprehensive MHS review that revealed it was compatible with private-sector care. In response Hagel said, 'I believe our service members, retirees and their families deserve better than average'.

According to the report, at least three of the 17 hospitals surveyed failed to meet national standards for surgical complications and the system as a whole measured poorly on some standards for obstetrics care. The review, led by Deputy Defense Secretary Bob Work, also found that the Defense Health Agency — the Pentagon's new administrative entity for its health system — as well as the medical departments of the Army, Navy and Air Force, lacked consistent data and statistics on patient access, care and safety, making it difficult to draw conclusions or even measure facilities against one another or against the civilian health system. "Our external experts point out that the MHS generally performs as well as the private sector in the delivery of safe, quality care. I believe our service members, retirees and their families deserve better than average," Hagel wrote in a memo accompanying the Military Health System Review-Final Report.

Hagel ordered the review partially in response to the scandal over patient appointment wait lists and data manipulation at Veterans Affairs Department hospitals and clinics, a system run by the federal government but separate from the DoD medical system. But the New York Times also has published two articles on patient safety at military hospitals following a yearlong investigation into deaths and severe injuries related to poor care. Earlier this year, the commander of Womack Army Medical Center at Fort Bragg, North Carolina, was fired after several misdiagnoses and mishaps that ended in patient deaths. More recently, Brig. Gen. John Cho, the Western Regional Medical Command chief in charge of 11 hospitals in the Western U.S., was suspended for unspecified causes, becoming the eighth Army medical commander to be relieved or suspended in the past two years. The current DoD review addressed three major areas: access to care, quality of care and patient safety.

- **In terms of access**: The medical experts conducting the review found that on average, "access to care meets the defined standards." But it added that because patients reported extreme dissatisfaction with their ability to get timely appointments, further investigation is needed. The reviewers found that while most hospitals meet the access standards for specialty care, they failed in providing timely primary care for acute conditions, with 11 percent of the 17 hospitals reviewed not meeting the 24-hour standard for an appointment. In "town hall" meetings with patients, the reviewers received an earful on patient wait times. "Every time ... I go to make an appointment, it's, 'No, I'm sorry we

don't have anything for 4-6 weeks. I could go to the emergency room but I would like to have my appointment before 4-6 weeks," one patient said, according to the report. The report also noted that data on access was unavailable for those who get their care at private facilities through the Tricare program.

- **Regarding quality of care**: The review showed "mixed results" with "considerable variation across the system." While all medical hospitals and clinics are accredited or certified by external agencies, the review found variances in meeting standards and said that while the system in general meets or exceeds targets, it needs improvement. For example, while most military hospitals exceed national standards for infant mortality and maternal trauma, the system was statistically below standards for postpartum hemorrhage and neonatal trauma. Surgical complication rates also were all over the map, according to the report. Of the 17 hospitals reviewed, one in two had higher than acceptable surgical complication rates. Three ranked in the top tier nationally on that particular issue, while three others had persistent poor performance.

- **In terms of patient safety**: The review also found that some military hospitals and clinics failed to provide required reports on patient complications and preventable deaths. "The self-reporting of events related to patient safety is a key concern for all health systems," noted the report, speaking of the Army, Navy and Air Force medical systems as well as the National Capital Region, which encompasses the Walter Reed National Military Medical Center and Fort Belvoir Community Hospital.

The review was conducted by outside experts collecting and analyzing data provided by DoD, the services' medical departments, military hospitals and clinics and outside reports and sources. The 17 facilities selected represent a range of DoD facilities — large, small, rural, urban, domestic and international. The reviewers recommend that the Pentagon take steps to improve underperformance, establish clear performance goals and institute changes systemwide. Secretary Hagel has accepted these recommendations and has established milestones for their implementation. Hagel has ordered:

- All military treatment facilities that don't meet access standards to develop action plans to improve timely appointments at both military facilities and through Tricare in 30 days.
- A yearlong study to review appointment access for all Tricare beneficiaries.
- All military hospitals failing to meet quality and safety standards to develop a plan for fixing their problems in 45 days.
- The Defense Health Agency to provide a plan in 90 days for better assessment of quality and safety in private care and to establish a performance management system that will monitor measures.
- DHA to develop a plan to make available all statistics on quality and safety for each military treatment facility.

Hagel said the Defense Health Agency would work swiftly to resolve discrepancies and focus on quality and care, emphasizing the importance of patient safety across the system. "Even small lapses in care can lead to devastating, heartbreaking losses and injuries, so today I'm directing that the military health system take steps to ensure that the system is not 'just average,' " Hagel said. Deputy Secretary Work pledged to "share DoD's performance and progress with the people they serve, with Congress, and with the American public." Refer to http://www.defense.gov/homepagephotos/leadphotoimage.aspx?id=98966 and click on the word "Report" on bottom of that page to access the 700 page report. [Source: MilitaryTimes | Patricia Kime | Oct. 01, 2014 ++]

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POW/MIA Update 38 ► Ongoing Reorganization SITREP | ++

ONGOING REORGANIZATION: The work that is ongoing is led by Senior DoD civilian, Alisa Stack, who is the head of a transition team, the Personnel Accounting Consolidation Taskforce (PACT). The PACT reportedly includes government specialists in each area to be addressed, from structure of the new agency, to the number of personnel, budget requirements, interface with other departments and agencies, archival research, strategy and integration and communication with the families. Secretary of Defense Chuck Hagel and Assistant Secretary of Defense for Special Operations & Low Intensity Conflict (ASD/SOLIC) Michael Lumpkin both stated that communication with the families must be a very high priority consideration in how the new agency performs. Since her appointment, Ms. Stack and other PACT members, aided by The Clearing (see below) have been interviewing people, in and out of government, and appear to be focused on ensuring that a wide variety of voices are heard, responsible and irresponsible, rational and irrational, so the outcome could be interesting.

The Clearing, an outside firm, was initially contracted for a reported $2,000,000, and more recently, an added $6,689,586 (yes, millions) to obtain input from family members from all wars on their experiences in dealing with various accounting community organizations. In addition to DPMO, JPAC and LSEL (specifically named in Secretary Hagel's restructure directive and by Congress), these include the Service Casualty Offices, AFDIL and DIA's Stony Beach POW/MIA team. The Clearing is reportedly also interviewing and receiving input from all US officials who wish to provide it concerning the overall mission and their own specific agency/organization. Apparently, the number of people willing to talk with The Clearing personnel is significant, and continuing; thus, the need for additional funding to keep them engaged.

The Clearing can be reached by emailing voiceofthefamilies@theclearing.com and is seeking views from all who are willing. Family members from all wars are urged to provide their views and, in light of the comparatively small number of Vietnam War family members, the League is hopeful that ALL Vietnam War families take this opportunity to remind members of PACT, The Clearing and senior DoD officials that uncertainty about Vietnam War missing men remains a significant factor for the families. The greatest uncertainty surrounds Vietnam War missing personnel, though the same can be said of a relatively small number of Vietnam War servicemen who were last known alive or in POW camps, but never returned; therefore, the need for concrete answers is paramount, more so than identifications from remains recoveries of known dead from earlier wars and conflicts. This is particularly relevant to disinterments of personnel buried as "unknowns" in American cemeteries. Their families know they perished, sadly. The League supports accounting for losses in WWII, Korean War and Cold War, as an important, though vastly different mission than ending uncertainty with answers.

Following review and approval by newly confirmed Undersecretary of Defense for Policy (USD-P) Christine Wormuth, PACT recommendations on implementation were provided to recently appointed and confirmed Deputy Secretary of Defense (DepSecDef) Robert Work. With his approval, implementation began and several timelines were announced. Incremental steps were set to begin, including naming of an Interim Director for the new Defense Personnel Accounting Agency sometime this fall. The first of many adjustments applies to the budget and to communications, with instructions to begin acting now as one agency, with the Interim Operational Capability (IOC) set for January 15, 2015. Full Operational Capability (FOC) is set to occur on January 15, 2016. Until the start-up date early next year, DPMO, JPAC and LSEL, plus all other active elements of the accounting community, have been directed to continue work uninterrupted by plans and implementation for reorganization, transformation, and consolidation

Since SecDef Hagel personally directed the "complete reorganization" of the accounting community and offered assurance to the League of his personal engagement, it is to him the League will look for confirmation that he is satisfied with the prospects for success of the reorganized community. Several interim briefings have been given, though without details or specifics in which we have keen interest. Another conference call briefing is scheduled for September 26th with recently confirmed Under Secretary of Defense for Policy Christine Wormuth. Hopefully, the briefing from USD(P) Wormuth will provide specifics. Also, hopefully, the PACT will become more transparent and consult knowledgeable, responsible current and former officials, as well as the League and the major national veteran organizations, before plans are finalized. Valid input into the process can help assure acceptance by those most directly impacted, the Vietnam War POW/MIA families and family members of US personnel lost in earlier wars and conflicts.

AMERICANS ACCOUNTED FOR: There are still 1,641 personnel listed by the Department of Defense as missing and unaccounted-for from the Vietnam War, a number that has not changed for several months. The number of Americans announced by DoD as returned and identified since the end of the Vietnam War in 1975 is now 942. Another 63 US personnel, recovered by the US and ID'd before the end of the war, bring the official total of US personnel accounted for from the Vietnam War to 1,005. Of the 1,641 total, 90% were lost in Vietnam or in areas of Cambodia and Laos under Vietnam's wartime control: Vietnam-1,275 (VN-469, VS-806); Laos-306; Cambodia-53; PRC territorial waters-7. Over-water losses on DoD's list of No Further Pursuit cases number well over 600.

SECRETARY OF DEFENSE ON NATIONAL POW/MIA RECOGNITION DAY: At the national ceremony held at the Pentagon on September 19th, Secretary of Defense Chuck Hagel stated in part: "The United States appreciates the ongoing support of many allies and partners across the globe – many represented here today – and on behalf of the men and women of our military, I thank you. You have helped us in recovering our missing. A good example of many of these efforts is Vietnam. Vietnam has been providing an increasing amount of archival documents to support our pursuit of our missing Americans. We appreciate these efforts and will continue to build on this partnership going forward…..As many of you know, earlier this year I directed the Defense Department to organize this effort into a single, accountable operation that has the responsibility for personnel accounting resources, research, and operations….resolving issues of duplication and inefficiency, while also making that organization stronger, more effective, more transparent, and more responsive….DoD has been working closely with everyone who has a stake in this mission – including families, the veterans' service organizations that are represented here today, and I thank them, Congress, and the agencies' workforce. We've made progress in this transformation, and the new Defense Personnel Accounting Agency will achieve initial operating capability this January."

JPAC OPERATIONS: On 26 AUG, JPAC hosted POW/MIA Consultations with the Lao that were underwhelming in terms of results achieved, but important in that views were exchanged, and the US request for renewed cooperation by Laos on archival documents was not rejected. Little progress was made on other requests by both governments. The lack of positive Lao responsiveness was somewhat predictable, based on uncertainty within the Lao leadership brought about by the recent untimely death of the Lao Ministers of Defense and Public Security. Another probable reason was the lack of US dependability with on-again, off-again field operations due to budget fluctuations, sequestration and revised JPAC operational plans. Field operations are now ongoing with a larger team, but not yet the full number allowed of 53 US personnel operating in-country at the same time.

Operations in Cambodia have been sporadic at best, and only one field operation occurred in 2014, postponed twice in 2013. The Stony Beach Cambodia specialist is permanently in-country and conducts investigations when and where needed. There are no identified sites currently awaiting recovery; therefore, no JFAs are scheduled in Cambodia until early 2015. For the first time in over 20 years, technical level talks

are not being held with Cambodia in FY2014, but plans are being considered for senior level discussions with Cambodia's POW/MIA Committee leadership before the end of the calendar year.

Another series of field operations took place in Vietnam from August 5th to September 7th that included a Joint Forensic Review (JFR), and it was a busy year in Vietnam with regularly scheduled, implemented joint operations. DIA's Stony Beach is still engaged, but on a rotating TDY schedule that is unacceptable and needs to be made permanent, especially with the ever-increasing, broadening military-to-military cooperation. On September 23rd, JPAC hosted annual Technical Talks with Vietnamese counterparts.

Note: To keep current on POW/MIA issues check the POW/MIA Facebook page at
https://www.facebook.com/pages/National-League-of-POWMIA-Families/136564939586

[Source: National League of POW/MIA Families Sept. 25, 2014 ++]

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POW/MIA Update 39 ► 1st Leadership Change in JPAC Shakeup

The longtime scientific director of the problem-ridden Pentagon agency charged with identifying the remains of service members missing from past wars is out of a job. At a recent Korean War family update meeting in Washington, Dr. Tom Holland announced he would soon be leaving as head of the laboratory at the Joint POW/MIA Accounting Command, or J-PAC. "You've heard about the reorganization, and I found out last week that I'm not a part of the reorganization," Holland told the group in August. Holland's impending departure is the first leadership change to come to light as part of the major overhaul of the mission announced by Secretary of Defense Chuck Hagel last spring in response to increasing criticism. J-PAC and a second agency involved in the effort will be consolidated starting Jan. 1 in an effort to streamline the inefficient process. An investigation by ProPublica and NPR in March found the agency's efforts to be rife with outdated science, duplicative bureaucracy and poor leadership.

Dr. Thomas D. Holland, Scientific Director & Deputy to the Commander for Central Identification Laboratory Operations

Holland, who led the lab for nearly 20 years, was the focus of ProPublica's story, which found he served as an arbiter of identifications and established procedures that set an exceedingly slow pace at the lab. With 9,400 service members still buried as unknowns around the world, his restrictive policies were seen as overly cautious. Under his leadership, only one out of every 10 cases considered was ever approved for disinterment to attempt identification. Pentagon spokeswoman Cmdr. Amy Derrick-Frost wouldn't comment on personnel

moves. Under the new organization, a medical examiner will oversee identifications and scientific operations, but that person has not yet been named. Derrick-Frost said they expect someone to be in place by late 2014 or early 2015. The appointment of a medical examiner to the lab's top leadership position has been met with protest by some of the scientific staff, who claimed in a letter to the Pentagon that a medical examiner isn't qualified to oversee their work.

The MIA effort will be in flux until January 2016 when the new, as-yet-unnamed agency is fully operational. Some advocates, families of MIAs and politicians are concerned the reorganization will be little more than reshuffling of bureaucracy and are watching carefully to see what meaningful change is enacted. At the August meeting, Holland said that the last identification he thinks he'll make will be of remains from the Korean War, leaving recently unearthed remains from WWII to likely be identified by the medical examiner— including one who could possibly be Arthur "Bud" Kelder, whose family never gave up trying to find and identify his remains. In August, the Pentagon completed the disinterment of 10 unknown prisoners of war from an American World War II cemetery in Manila, where Kelder's family believed him to be buried. The crucial step of exhuming the men, who had buried anonymously for nearly 70 years after dying on the same day at a POW camp, came only after Kelder's family fought for years to force the government to act [Source: ProPublica | Megan McCloskey | Oct. 3, 2014++]

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POW/MIA Recoveries ► 141001 thru 141015

"Keeping the Promise", "Fulfill their Trust" and "No one left behind" are several of many mottos that refer to the efforts of the Department of Defense to recover those who became missing while serving our nation. The number of Americans who remain missing from conflicts in this century are: World War II (73,539) Korean War (7,822) Cold War (126), Vietnam War (1,642), 1991 Gulf War (0), and OEF/OIF (6). Over 600 Defense Department men and women -- both military and civilian -- work in organizations around the world as part of DoD's personnel recovery and personnel accounting communities. They are all dedicated to the single mission of finding and bringing our missing personnel home. For a listing of all personnel accounted for since 2007 refer to http: //www.dtic.mil/dpmo/accounted_for . For additional information on the Defense Department's mission to account for missing Americans, visit the Department of Defense POW/Missing Personnel Office (DPMO) web site at http: //www.dtic.mil/dpmo or call or call (703) 699-1169. The remains of the following MIA/POW's have been recovered, identified, and scheduled for burial since the publication of the last RAO Bulletin:

Family members seeking more information about missing loved ones may call the following Service Casualty Offices: U.S. Air Force (800) 531-5501, U.S. Army (800) 892-2490, U.S. Marine Corps (800) 847-1597, U.S. Navy (800) 443-9298, or U.S. Department of State (202) 647-5470. The remains of the following

MIA/POW's have been recovered, identified, and scheduled for burial since the publication of the last RAO Bulletin:

Vietnam - None

Korea - None

World War II

- The Department of Defense POW/Missing Personnel Office announced 6 OCT that the remains of U.S. servicemen, missing in action from World War II, have been accounted for and are being returned to their families for burial with full military honors. Army Air Forces 1st Lts. **William D. Bernier**, 28, of Augusta, Mont., **Bryant E. Poulsen**, 22, of Salt Lake City, Utah, and **Herbert V. Young** Jr., 23, of Clarkdale, Ariz., and Tech Sgts. **Charles L. Johnston**, 20, of Pittsburgh, Penn., and **Hugh F. Moore**, 36, of Elkton, Md., Staff Sgt. **John E. Copeland,** 21, of Dearing, Kan., and Sgt. **Charles A. Gardner**, 32, of San Francisco, Calif., have been accounted for and will be buried with full military honors. Bernier was buried on Sept. 19 in his hometown. Young will be buried Oct. 15 in Prescott, Ariz. The other service members will be buried at dates and locations still to be determined. On April 10, 1944, Bernier, along with 11 other B-24D Liberator crew members took off from Texter Strip, Nazdab Air Field, New Guinea, on a mission to attack an anti-aircraft site at Hansa Bay. The aircraft was shot down by enemy anti-aircraft fire over the Madang Province, New Guinea. Four of the crewmen were able to parachute from the aircraft, but were reported to have died in captivity. Following World War II, the Army Graves Registration Service (AGRS) conducted investigations and recovered the remains of three of the missing airmen. In May 1949, AGRS concluded the remaining nine crew members were unrecoverable. In 2001, a U.S.-led team located wreckage of a B-24D that bore the tail number of this aircraft. After several surveys, the Joint POW/MIA Accounting Command (JPAC) teams excavated the site and recovered human remains and non-biological material evidence. To identify Young's remains, scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools, including, mitochondrial DNA, which matched Young's sister.

- The Department of Defense POW/Missing Personnel Office announced 10 OCT that three U.S. servicemen, missing from World War II, have been accounted for and their remains are being returned to their families for burial with full military honors. Army Air Forces 1st Lt. **William P. Cook**, 27, of Alameda, Calif., Staff Sgt. **Maurice J. Fevold**, 21, of Chicago, and Sgt. **Eric M. Honeyman**, 21, of Alameda, Calif., have been accounted for and will be buried with full military honors. Fevold will be buried Oct. 20 in Badger, Iowa and Cook will be buried Oct. 25 in Oakland, Calif. Honeyman will be buried at a future date still to be determined. On Dec. 23, 1944, Cook along with five other B-26G Marauder crew members took off from Saint Quentin, France, on a mission to bomb an enemy-held bridge in Eller, Germany. The aircraft was shot down by enemy anti-aircraft fire near Seffern, Germany, near the border with Belgium. Following World War II, the Army Graves Registration Command (AGRC) conducted extensive field investigations and was unable to locate the aircraft and the crew. In May 1949, AGRC concluded the crew members were unrecoverable. In 2006, a group of aviation researchers located the wreckage of a B-26G near Allmuthen, Belgium and notified the U.S. Army Mortuary Affairs Activity – Europe. In 2007, a Joint POW/MIA Accounting Command (JPAC) team investigated the site and recommended it for excavation. In 2012 and 2013, JPAC teams excavated the crash site and recovered human remains and non-biological material evidence. To identify Cook's remains, scientists from JPAC and the

Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools, including, mitochondrial DNA, which matched Cook's maternal-line cousins. To identify Fevold's remains scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools, including, mitochondrial DNA, which matched Fevold's maternal-line niece. To identify Honeyman's remains, scientists from JPAC and the Armed Forces DNA Identification Laboratory (AFDIL) used circumstantial evidence and forensic identification tools

[Source: http://www.dtic.mil/dpmo/news/news_releases/ Oct. 13, 2014 ++]

*** VA ***

VA Staph Infections ► Initiatives Substantially Reduce MRSA

A Department of Veterans Affairs (VA) initiative targeting potentially life-threatening staph infections in hospitalized patients has produced significant positive results, according to recent statistics released by VA. VA's success in substantially reducing rates of health care-associated infection with methicillin-resistant Staphylococcus aureus (MRSA) serves as important confirmation that multifaceted intervention strategies can achieve effective and sustained control of MRSA in U.S. hospitals. "VA has a well-earned reputation in successful prevention of MRSA," said VA Secretary Robert McDonald. "Delivering high-quality care to our Veterans when they are in our hospitals is a responsibility that we do not take lightly. The drop in MRSA rates shows that we are pursuing the right course for prevention and treatment. The results that we have achieved mean better health care for our Veterans and that care ultimately benefits all Americans."

Among VA patients in intensive care units (ICU) between 2007 and 2012, healthcare-associated MRSA infection rates dropped 72 percent—from 1.64 to 0.46 per 1,000 patient days. Infection rates dropped 66 percent—from 0.47 to 0.16 per 1,000 patient days—for patients treated in non-ICU hospital units. "These results are striking," said Dr. Carolyn Clancy, VA's Interim Under Secretary for Health. "Health care-associated infections are a major challenge throughout the health care industry, but we have found in VA that consistently applying some simple preventive strategies can make a very big difference, and that difference is being recognized."

VA's prevention practices consist of patient screening programs for MRSA, contact precautions for hospitalized patients found to have MRSA, and hand hygiene reminders with readily available hand sanitizer stations placed strategically in common areas, patient wards, and specialty clinics throughout medical centers. Computerized reminders, online training, frequent measurement, and continual feedback to medical staff reinforce such practices. VA has created a culture that promotes infection prevention and control as everyone's responsibility. A major part of that commitment is a dedicated employee at each VA medical

center exclusively for the purpose of monitoring compliance with MRSA protection procedures, training staff, and working with Veteran patients and families.

MRSA infections are a serious global health care issue and are difficult to treat because the bacterium is resistant to many antibiotics. In a Centers for Disease Control and Prevention 2012 MRSA surveillance report from its Active Bacterial Core surveillance (ABCs), the CDC cites that there were 75,309 cases of invasive MRSA infections and 9,670 deaths due to invasive MRSA in 2012. "The VA health care system is able to implement and assess these prevention strategies," said Dr. Martin Evans, director of VA's MRSA control program. "What we've learned translates into better health care for the Veterans we serve." With over 8 million Veterans enrolled, VA operates the largest integrated health care delivery system in the United States conducting this type of large-scale, organized prevention program and documenting its impact. [Source: VA News Release Oct. 07, 2014 ++]

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VA Telehealth Update 06 ► **Programs Served 690,000+ in 2014**

The Department of Veterans Affairs (VA) announced 10 OCT that its national telehealth programs served more than 690,000 Veterans during fiscal year 2014. That total represents approximately 12 percent of the overall Veteran population enrolled for VA healthcare, and accounted for more than 2 million telehealth visits. Of that number, approximately 55 percent were Veterans living in rural areas with limited access to VA healthcare. With more Veterans seeking health care, telehealth is rapidly becoming an attractive option, especially for those Veterans who don't have a VA health care facility close to home. "We have to adapt to meet Veterans wherever their needs are," said VA Secretary Robert A. McDonald. "A brick-and-mortar facility is not the only option for health care. We are exploring how we can more efficiently and effectively deliver health care services to better serve our Veterans and improve their lives. Telehealth is one of those areas we have identified for growth."

Currently, there are more than 44 clinical specialties offered to Veterans through VA's telehealth programs. One program at the Miami VA schedules close to 90 clinic connections every week for dermatology, eye exams, the women Veterans program, podiatry, mental health and other clinical specialties. One tangible example of the success of VA's telehealth program is its burgeoning TeleAudiology program because of large population of Veterans living with hearing loss. The TeleAudiology program has grown from 1,016 Veterans in fiscal year 2011 to more than 10,589 in fiscal year 2014. For more information about VA's telehealth program, visit http://www.telehealth.va.gov . [Source: VA News Release Oct. 10, 2014 ++]

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VA Claims Backlog Update 142 ► **60% Reduction since March 2013**

More than 1.3 million Veterans received decisions on their Department of Veterans Affairs (VA) disability compensation and pension claims in fiscal year (FY) 2014 – the highest number in VA's history, surpassing last year's record-breaking production by more than 150,000 claims. This second year of record-breaking production comes as VA continues to transform the way it provides benefits and services, to deliver faster and higher quality decisions, to Veterans, their families and survivors. At the end of the year, the disability claims backlog (defined as any disability claim pending longer than 125 days) was reduced by 60-percent from the peak backlog in March 2013 and is at its lowest number in nearly 4 years. Veterans waited, on

average, 119 fewer days for a decision on their claim than Veterans did in FY 2013. VA is on target to hit its 2015 goal.

These improvements were not made at the expense of quality. The accuracy of VA's decisions continues to rise from an 83-percent accuracy level in 2011 to a 90-percent accuracy level today. When focusing specifically at the medical issue level, accuracy is at 96 percent. "I am so proud of our employees – more than half of whom are Veterans themselves – who continue to work tirelessly to deliver the benefits our Veterans have earned through their service to our Nation," said Under Secretary for Benefits Allison A. Hickey. "But we all also recognize there is still much more work to do to better serve Veterans."

VA's move to a web-based electronic claims processing system has enabled a quicker, more accurate and integrated benefits delivery. VA once processed 5,000 tons of paper annually – today it processes 93 percent of Veterans' disability claims electronically. One in seven Veterans who submit a claim to change the status of a family member now does so online and more than half of those are paid in one to two days. VA's progress would not have been possible without the support of its strong partners. Veterans Service Organizations (VSO) and State and County Veterans Service Officers embraced the Fully Developed Claim (FDC) program, which enables VA to make faster claim decisions when Veterans submit their claims with all available evidence and certify they have no more evidence to submit. Now, 37 percent of the claims receives from VSOs are FDCs. In FY 2014, more than 4.5 million Veterans and survivors received more than $72.7 billion in VA compensation and pension benefits. For more information on VA's Transformation, benefits and programs visit: www.benefits.va.gov , www.ebenefits.va.gov and www.benefits.va.gov/fdc. [Source: VA News Release Oct. 09, 2014 ++]

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VA Hepatitis C Treatment Update 05 ► **$1,000 Pill Budget Impact**

The Department of Veterans Affairs has a new problem on its hands. While struggling to beef up its medical staff and sharply reduce the time it takes veterans to get appointments at health facilities, the staggering cost of Sovaldi, a specialty drug to treat Hepatitis C, is threatening to blow a $1.3 billion hole in the agency's budget in the next two years. It's a fiscal crisis that could force deep agency cutbacks in other areas. The issue first surfaced in July when the embattled VA gave the Senate Veterans Affairs Committee a $17.6 billion wish list of resources to begin delivering high quality and timely health care to veterans. VA officials complained that the unexpectedly high cost of using Sovaldi was eating away at their budget. The VA is the largest provider of care in the U.S. for chronic Hepatitis C virus infections, which can destroy the liver and require a liver transplant or result in death. The VA has 174,000 veterans under its care with documented HCV; another 42,000 could be added once they're properly tested.

Congress subsequently approved $17.5 billion of new funding as part of VA reform legislation, but none of those funds was earmarked for the Sovaldi treatments. Made by Gilead Sciences of California and approved by the Food and Drug Administration a year ago, the drug offers huge advances in the treatment of Hepatitis C and related liver problems – and guarantees a cure rate of 90 percent. Yet the medicine costs $1,000 per pill – or $84,000 for the obligatory 12-week treatment. The 3.2 million Americans who are infected by Hepatitis C could benefit greatly from the treatment. Still, the total cost of covering those people with the new drug would exceed the $300 billion the U.S. is spending annually on pharmaceuticals. Sovaldi is just the leading edge of a surge in specialty drugs that offer important advances in treating cancer, multiple sclerosis and other serious illnesses but that threaten to saddle government, health insurers and consumers with huge unsustainable costs.

The VA spent about $220 million on the new drug in the fiscal year that ended 30 SEP, according to agency figures. Other HCV treatments will be coming on the market soon; the VA intends to use those as well. Although Gilead and the VA negotiated down the price of a tablet from $1,000 to $543, according to one source, the long-term cost of Sovaldi to the VA could be staggering – and will eclipse the treatment costs of most other diseases, including cancer. A spokesperson for Gilead declined to respond to questions from The Fiscal Times about the pricing controversy. In late July, Gilead was informed it is under investigation by the Senate Finance Committee, whose members became interested in learning why Gilead had decided to more than double the price of the medication before it was put on the market, as The Fiscal Times reported. Gilead claims the cost of developing Sovaldi was $11 billion. The Senate in an inquiry says the company's cost between 2009 and 2011 was merely $62.4 million. [Source: 25CNBC | Eric Pianin | Oct. 08, 2014 ++]

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VA Patient Comms Update 01 ► **Quarterly Town Hall Meeting Policy**

Secretary of Veterans Affairs Robert A. McDonald has directed all Veterans Affairs (VA) healthcare and benefits facilities to continue to hold quarterly town-hall events to improve communication with, and hear directly from, Veterans nationwide. This follows the recent completion of town-halls at these facilities held between August and the end of September of this year. "Every one of our medical centers and regional benefits offices held town hall meetings around the country in August and September, but we have more listening to do to better serve Veterans and their families," said Secretary McDonald. "As part of our Road to Veterans Day, VA is taking a hard look at everything we do in order to reorganize the Department around the needs of Veterans. Direct feedback from Veterans, employees and stakeholders is an important component of that Roadmap, and key to improving our services and operations," Secretary McDonald added. Details of events at each location will be forthcoming from local facilities. Additionally, VA is looking to continue to improve the town hall notification process, making sure we have the benefit of extensive local input. In addition to Veterans and their families, the quarterly meetings are open to Congressional stakeholders, Veterans Service Organizations, Non-Governmental Organizations and other community partners. [Source: VA News Release Oct. 08. 2014 ++]

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VA Gulf War Advisory Committee Update 06 ► **Nominations Sought**

The Department of Veterans Affairs (VA) is seeking nominations of qualified candidates to be considered for appointment to serve as a member of the Research Advisory Committee on Gulf War Veterans' Illnesses (RAC). The RAC was established pursuant to section 104 of Public Law 105-368 to provide advice to the

Department of Veterans Affairs (VA) on proposed research studies, research plans, or research strategies relating to the health consequences of military service in the Southwest Asia theater of operations during the Persian Gulf War. The Committee periodically releases reports that summarize and make recommendations regarding research on the health of Gulf War Veterans.

"VA recognizes and respects the service, dedication and many challenges faced by Veterans of the 1990-1991 Gulf War, and is committed to improving the health and well-being of these Veterans. Through its recommendations regarding relevant research, members of the RAC play an integral part in helping us achieve this goal," said VA Secretary Robert A. McDonald. "Widening our search for committee members to fill the upcoming vacancies will provide better diversity, and enable us to bring in new, well-qualified members with fresh perspectives and input."

The Committee is composed of approximately 12 members, appointed by the VA Secretary for either a 2- or 3-year term of service; members may be reappointed for additional 1- or 2-year terms. The Chair of the Committee is appointed for an initial 2-year term and may be reappointed for an additional 1- or 2-year term. By law, the RAC membership must include members of the general public, including Gulf War Veterans and representatives of such Veterans. The RAC's charter also provides that the membership will include members of the medical and scientific communities representing appropriate disciplines such as, but not limited to, epidemiology, immunology, environmental health, neurology and toxicology. "VA continues to provide health care and benefits to these Veterans and to invest in research to understand and treat Gulf War Veterans' Illnesses. We agree that there are health issues associated with service in the Gulf War, and are clear in our commitment to treating these health issues," said Carolyn M. Clancy, M.D., Interim Under Secretary for Health. Nominations for membership on the Committee must be received no later than 5:00 p.m. EDT on October 24, 2014. More info on RAC is available at http://www.va.gov/rac-gwvi, The Federal Register Notice can be found at https://federalregister.gov/a/2014-23661 [Source: VA News Release Oct. 07, 2014 ++]

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VA HUD-VASH Update 04 ► More SSVF Grants Awarded | $207M

In addition to the $300 million in Supportive Services for Veteran Families (SSVF) program grant awards announced on August 11, 2014 serving 115,000 Veterans and their family members, Secretary of Veterans Affairs Robert A. McDonald announced 30 SEP the award of $207 million in SSVF grants that will help an additional 70,000 homeless and at-risk Veterans and their families. The grants will be distributed to 82 non-profit agencies and include "surge" funding for 56 high need communities. During the brief history of this program, VA has helped tens of thousands of Veterans exit homelessness and prevented just as many from becoming homeless. The "surge" funding will enable VA to strategically target resources to high need communities where there are significant numbers of Veterans who are homeless or at-risk of homelessness.

Under the SSVF program, the Department of Veterans Affairs (VA) is awarding grants to private non-profit organizations and consumer cooperatives that provide services to very low-income Veteran families living in – or transitioning to – permanent housing. Those community organizations provide a range of services that promote housing stability among eligible very low income Veteran families (those making less than 50 percent of the area median income). The grants announced today will fund the fourth year of the SSVF program. "The Department of Veterans Affairs is committed to using evidence based approaches such as SSVF to prevent homelessness and produce successful outcomes for Veterans and their families," McDonald said. "This is a program that works, because it allows VA staff and local homeless service

providers to work together to address the unique challenges that make it difficult for some Veterans and their families to remain stably housed."

Under the terms of the SSVF grants, homeless providers offer Veterans and their family members outreach, case management, assistance in obtaining VA benefits and assistance in receiving other public benefits. Community-based groups can offer temporary financial assistance on behalf of Veterans for rent payments, utility payments, security deposits and moving costs. In the first 2 years of SSVF operations (through FY 2013), nearly 100,000 Veterans and their family members received direct assistance to exit homelessness or maintain permanent housing, including over 25,000 children. "With the addition of these crucial resources, communities across the country continue a historic drive to prevent and end homelessness among Veterans," said Laura Green Zeilinger, Executive Director of the U.S. Interagency Council on Homelessness. "The SSVF program gives Veterans and their families the rapid assistance they need to remain in permanent housing or get back into permanent housing as quickly as possible."

In 2009, President Obama announced the federal government's goal of ending Veteran homelessness by the end of 2015. The SSVF grants are intended to help accomplish that goal. According to the 2014 Point-in-Time Estimates of Homelessness, homelessness among Veterans has declined 33 percent since 2010. Through the homeless Veterans initiative, VA committed more than $1 billion in FY 2014 to strengthen programs that prevent and end homelessness among Veterans. VA provides a range of services to homeless Veterans, including health care, housing, job training, and education. More information about VA's homeless programs is available at http://www.va.gov/homeless. Details about the Supportive Services for Veteran Families program are online at http://www.va.gov/homeless/ssvf.asp. [Source: VA News Release Sept. 30, 2014 ++]

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VA Credibility Update 21 ► Lawmakers Continue to Scrutinize Operations

Congress is out of town in preparation for the November elections, but that hasn't stopped lawmakers' scrutiny of the Veterans Affairs operations in Washington, D.C. The department continues to take near daily criticism from elected officials and outside advocates over access and accountability issues. As re-election campaigns heat up, many are giving a national platform to local VA headaches, and promising changes throughout the system.

- Earlier this week, House Veterans Affairs oversight subcommittee chairman Rep. Mike Coffman (R-CO) demanded immediate action from top VA officials after reports that the department's deputy chief procurement officer gave unfair financial advantages to an outside federal contractor with whom she was having an affair. In a letter to VA Secretary Bob McDonald, Coffman said the incident is just the latest example of "the morally bankrupt and ethically impaired culture that exists within the department."
- Fellow committee member Rep. Jackie Walorski (R-IN) petitioned the same federal officials this week to intervene in the case of an Indiana veteran who suffered a life-threatening blood clot after waiting months for a thorough medical appointment.
- Rep. Doug Lamborn (R-CO) has stated that VA leadership promises for an independent audit of health care operations is taking too long.
- House Veterans Affairs Chairman Rep. Jeff Miller (R-FL) has said he wants investigators looking into data manipulation and fraud cases at VA regional facilities to also focus their attention on the department's leadership, to see whether other top officials covered up systemic problems. Nearly all of the most senior VA officials have left since former VA Secretary Eric Shinseki resigned from

his post in May. But Miller and others have complained that those resignations may not have gone far enough to root out problem employees at the agency.

Also this week, officials from Concerned Veterans of America launched their newest oversight effort, a "Fixing Veterans Health Care" task force designed to scrutinize not just current care problems but also examine alternative plans to overhaul the VA's operations. The effort will be led by former Republican Senate Majority Leader William Frist, former Georgia Democratic congressman Jim Marshall, and former Undersecretary of Veterans Affairs for Health Mike Kussman. In a statement, Frist said VA's "current inefficiencies and lack of transparency" are stopping veterans from getting the care they deserve. Pete Hegseth, chief executive officer for CVA, said the effort isn't tied to any pre-election campaigning, but is designed to keep focus on reforming the department. He's also hopeful the final report to be released in December can help influence next year's incoming Congress. "We're not excluding any ideas," he said. "Our only litmus test is whether it improves veteran's access to quality and timely care." McDonald has promised a host of reforms and retaining throughout the department by Veterans Day in November, but has also publicly pledged to work with critics on find ways to fix operations and rebuild the department's reputation. [Source: NavyTimes | Leo Shane | Oct. 3, 2014 ++]

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VA Credibility Update 22 ► First Firings Under New Law

The Veterans Affairs Department said it is firing four senior executives as officials move to crack down on wrongdoing following a nationwide scandal over long wait times for veterans seeking medical care, and falsified records covering up the delays. The dismissals are the first since Congress passed a law this summer making it easier for veterans who experience delays to get care outside VA's nationwide network of hospitals and clinics. The law also made it easier for the agency to fire senior officials suspected of wrongdoing, shortening their appeals process to 28 days. Among those being fired were a top purchasing official at the Veterans Health Administration, directors of VA hospitals in Pittsburgh and Dublin, Georgia, and a regional hospital director in central Alabama, the VA said. "VA will actively and aggressively pursue disciplinary action against those who violate our values," Deputy VA Secretary Sloan Gibson said Monday. "There should be no doubt that when we discover evidence of wrongdoing, we will hold employees accountable."

But a Republican congressman challenged the VA, saying that at least one of the employees being fired has already announced his retirement. **John Goldman**, director of the Carl Vinson VA Medical Center in Dublin, Georgia, said last month he was stepping down. Employees at the hospital have admitted to keeping false records to hide long wait times for veterans. "Bragging about the proposed removal of someone who has already announced his retirement can only be described as disingenuous," said Rep. Jeff Miller (R-FL) chairman of the House Veterans Affairs Committee. Miller called the VA's announcement of Goldman's dismissal a "***semantic sleight of hand***" that is insulting to veterans and their families hurt by the VA scandal. Gibson and other VA leaders "must not tolerate this instance of what appears to be blatant deceit," Miller said.

A VA spokeswoman said the VA prepared papers ordering Goldman's removal independent of his retirement announcement. Miller and other lawmakers said they hoped the VA followed the intent of Congress in firing failing executives. "What I don't want to see happen is for (senior employees) to retire, resign or find another government job outside of VA without consequence — a pattern that has been emerging in recent weeks," Miller said.

- One of the employees being fired is **Susan Taylor**, the deputy chief procurement officer with the VHA who oversees $15 billion a year in federal contracts. A report by the VA's Office of Inspector General found that Taylor helped steer contracts to a private company that championed so-called reverse auctions, in which sellers compete with each other to offer the lowest bids. Taylor advocated for the company, Virginia-based FedBid, and worked to discredit a senior VA official who had declared a moratorium on reverse auctions while the government studied them, the report said. She also "misused her position and VA resources" for FedBid's private gain and interfered with the inspector general's investigation, the report said. Taylor had been offered a job with the Energy Department, but that was rescinded after the DOE learned of the IG's report, officials said.
- **Terry Gerigk Wolf**, director of the Pittsburgh VA Healthcare System, is being fired for unspecified "conduct unbecoming a senior executive." Wolf has been on paid leave since June after a VA review of a Legionnaire's disease outbreak between February 2011 and November 2012. At least six Pittsburgh VA patients died and 16 were sickened by the bacterial disease that was traced to water treatment problems at the Pittsburgh-area hospitals, which also prompted congressional hearings.
- **James Talton**, director of the Central Alabama VA Healthcare System, is being fired after an investigation by the VA's Office of Accountability Review substantiated allegations of neglect of duty. Rep. Martha Roby (R-AL) called Talton's dismissal "a positive sign that the new VA leadership is committed to removing bad actors and improving the health care system." Talton was placed on administrative leave in August after reports that hundreds of X-rays went unread, patients experienced long delays in getting appointments, patient records were manipulated and one employee took a patient to buy illegal drugs.

Neither Talton nor the other employees could be reached for comment late Monday. The employees have seven days following their dismissal to appeal, with a decision by an administrative judge due 21 days after that. [Source: USA Today | Phillip Rawls | ct. 06, 2014 ++]

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VA Credibility Update 23 ► BVA Mismanagement Alleged

A House panel says the head of the VA's Board of Veterans' Appeals continues to mismanage the legal office and may have been "untruthful" in her sworn congressional testimony claiming improvements in processing vet appeals last month. Despite reassurances to lawmakers, Board Vice Chairman Laura Eskenazi appears to have still promoted unqualified attorneys, not properly advertised open job positions and created new employee positions that will not decrease the board's growing backlog, according to Rep. Mike Coffman (R-CO). Coffman, the chairman of the House Veterans Affairs oversight and investigations subcommittee, questioned whether Eskenazi could perform her job in a letter sent to VA Secretary Bob McDonald on 1 OCT, weeks after a department whistleblower also testified before the House about records manipulation and improperly delayed appeals cases by her and other board employees. The board is a relatively small legal department within the Department of Veterans Affairs that reviews vet appeals over benefits decisions.

"These actions call into question the credibility of Ms. Eskenazi's leadership and whether she is taking the BVA down the right [path]," Coffman wrote. "I question her decision-making process, knowledge of the current backlog situation, foresight to [move] the BVA forward, and commitment to veterans to get cases decided in a timely manner. I simply question her abilities." The complaints over job performance come as the VA announced 7 OCT that it is firing four top executives to root out misconduct and corruption in the wake of a national scandal over records manipulation and long wait times in its health care system. Over the

summer, Congress passed a comprehensive reform bill that streamlines the firing and appeals process. Among Coffman's claims against Eskenazi's leadership:

- The board's 300,000-case backlog is increasing.
- Board attorneys were promoted to positions they are not qualified for and positions were not advertised as required by law
- Three part-time administrative law judge positions were created, but will be part-time and not be required to meet a quota of resolving 700 cases per year as part of the effort to decrease the backlog.
- Eskenazi also added two chief judge positions to the board, though the judges are not required to meet the quota and so represent "1,400 appeals that will go undecided in a year."

Rep. Mike Coffman **Laura Eskenazi**

Coffman asked the VA to explain the criteria for promoting attorneys and for Eskenazi to give a detailed description of her plans to reduce the large number of appeals yet to be decided. "Ms. Eskenazi testified that morale at the BVA had increased, and she was working with all of the attorneys to discover new ways to process cases more efficiently," Coffman wrote. "However, it appears that Ms. Eskenazi's statements may not be wholly truthful and in fact actions are occurring that would effectively hurt veterans, as resources are not being fully utilized to make determinations in veterans' appeals." Coffman issued a statement to Stars and Stripes Tuesday saying "the testimony offered by Ms. Eskenazi before my subcommittee on 10 SEP does not conform with the facts as we know them. My concerns are predicated on what seems to be a pattern of misleading testimony and public statements from VA officials in the past." The VA did not respond to questions Tuesday morning. A spokeswoman said the department is working on a response to Coffman.

Last month, a whistleblower from the appeals board, Kelli Kordich, testified before the House subcommittee, saying Eskenazi and others manipulated records to hide overly long delays in deciding cases. Kordich testified that the vice chairman and head office staff shifted cases in a tracking system in 2012 to wipe evidence it had held some for months or longer. At least one case was held for over a year and Eskenazi personally delayed five appeals cases, she said. In response, Eskenazi told lawmakers that some appeals languished due to specific issues preventing a decision or because VA attorneys were overloaded with work. On Tuesday, Kordich, who remains on the BVA, told Stars and Stripes that Eskenazi has continued to deny dysfunction in the VA appeals process following the congressional hearing and the VA "secretary has done nothing to rectify the situation at the board, which I assume prompted Congressman Coffman to compose this letter." [Source: Stars and Stripes | Travis J. Tritten | Oct 07, 2014 ++]

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VA Caregiver Program Update 26 ► **Program Expansion Unlikely**

For older generations of spouses, mothers and other family caregivers of severely disabled veterans, the startling feature of the Family Caregiver Program that Congress enacted in 2010 was its exclusivity. The unprecedented package of caregiver benefits includes training to help to ensure patient safety; cash stipends to partially compensate for caregiver time and effort; caregiver health coverage if they have none, and guaranteed periods of respite to protect against burn out. The comprehensive package, however, isn't available to most family members who are primary caregivers to severely ill and injured veterans. To control costs, Congress opened the program only to caregivers of veterans severely "injured," either physically or mentally, in the line of duty on or after Sept. 11, 2001. It is not open to families of severely disabled vets injured before 9/11. It also is not open to post-9/11 veterans who have severe service-connected illnesses, rather than injuries.

Advocates for these forgotten families had hoped a successful launch of a limited program would spur Congress to expand eligibility and end the obvious inequity it created. That hope is set back by a new Government Accountability Office report on the three-year-old Family Caregiver Program, which finds its under resourced and, for the most part, in disarray. For starters, officials woefully underestimated the number of veterans eligible for the program, for which Congress set aside $1.5 billion to fund it through fiscal 2015. VA forecast 4000 approved caregivers by September this year. Instead, by last May, 15,600 had been approved out of an applicant pool of 30,400. Roughly 500 more are being approved monthly, GAO said, with no slowdown in sight. Eight of every 10 approved caregivers are spouses of veterans. Ninety-two percent of them care for veterans with mental health diagnoses, mostly post-traumatic stress disorder (63 percent) or traumatic brain injury (26 percent). Stipends, based on local hourly caregiver wages, are set at three levels.

Caregivers providing a maximum of 40 hours of care per week receive an average of $2320 a month, or $27,830 annually. About 6000 caregivers qualify for this level. An equal number provide a maximum of 25 hours' care per week and draw an average $1470 a month. And 3,600 caregivers provide 10 hours of care weekly and receive on average $600 a month or $7200 a year. Because VA "significantly underestimated caregivers' demand for services," GAO reports, VA medical centers were unprepared to meet program demands, particularly the work load on primary care physicians and nurses who must form into teams and visit homes of applicants to assess health needs and determine appropriate levels of caregiver support. GAO also found that the computer system hastily adopted to track caregivers and workloads is inadequate and must be replaced if officials are to have data needed to monitor and resource the program effectively.

As the program now operates, a mandate to complete application reviews within 45 days is routinely missed. Also, some physicians and nurses have rebelled against the extra work, declining to visit homes to assess caregiver skills, veterans' eligibility and proper level of support. VA regional health officials told GAO, the report says, "that their facilities do not have sufficient medical staff to effectively manage the additional workload" from the program, "which they view as collateral duty." There are funds for medical centers to hire more Caregiver Support Coordinators who run the program locally by providing stipends and support services, and arranging CHAMPVA medical coverage for eligible caregivers. But GAO found some medical centers reluctant to hire enough CSCs for fear that funds available now to support caregivers will dry up in time, forcing medical centers to pinch spending on more critical priorities.

As a result, GAO reports, the ratio of coordinators to caregivers varies widely across the VA medical system. For example, there is one coordinator for six caregivers in Fayetteville, Ark., and also only one to support 251 caregivers at the Atlanta VA medical center in Decatur, Ga. The workload on some CSCs is so heavy that caregivers can't get their phone calls returned. One caregiver said she became desperate to learn

how to manage a veteran with increasingly severe symptoms of traumatic brain injury. Her coordinator finally said her request was one of many and the program was too taxed to provide counseling. So the caregiver had to turn to an outside non-profit organization for help. "There are just not enough people to run the program," said Adrian Atizado, assistant legislative director for Disabled American Veterans, who has monitored the caregiver program since its start. "There are not enough support coordinators, not enough interdisciplinary providers and nurses to do the home visits. Also, keep in mind this program doesn't exist anywhere else. This is the first of its kind so it's going to have problems." All of the research and the studies that Congress relied to shape the program, Atizado added, had focused on caregiver needs for the elderly, not for a younger generation of veterans struggling to reengage with society.

Atizado noted that most caregivers of severely disabled veterans, including most represented by DAV, aren't eligible for the comprehensive caregiver benefit, although they want to be and should be. "We have always asked that eligibility include illness so if you come down with multiple sclerosis or ALS, a prevalent disease for the veteran population that served in Southwest Asia for whatever reason," Atizado said, "that should be covered. Now, it is not allowed." Caregivers of older vets also should be covered, he said. Most caregivers of severely disabled Vietnam and Korean War veterans "are spending their estates to support their veterans at home. They haven't worked in 20 to 30 years. They have no Social Security or retirement. These are the veterans and caregivers we're fighting to get expansion for." Problems with the current program don't help, he agreed. VA concurred with GAO recommendations to fix the program so eligible caregivers get the services they need. How long it will take is not yet clear. [Source: Military.com | Tom Philpott | Sept. 25, 2014 ++]

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VA Vaccination Program ► New Partnership with Walgreens

In a first-of-its-kind partnership, the Department of Veterans Affairs (VA) announced 2 OCT that it will join forces with retailer Walgreens to provide greater access to Centers for Disease Control and Prevention-recommended vaccinations to Veterans across the country. This partnership grew out of a successful pilot program that began in Florida to provide flu vaccines to Veterans throughout the state. Based on those results, VA is expanding the pilot nationwide. Through its nearly 8,200 locations nationwide, Walgreens will offer flu and other recommended vaccinations to Veterans. Pharmacists can administer vaccinations to Veterans and will leverage eHealth Exchange, through its Walgreens Cloud Electronic Health Records platform, to securely share immunization records with VA to help ensure complete patient medical records. Vaccinations are available daily during all pharmacy hours with no appointment necessary and are subject to availability.

"VA is proud to partner with Walgreens to provide needed vaccines to our nation's Veterans," said VA Secretary Robert A. McDonald. "This partnership is a great example of how government and the private sector can work together to effectively and efficiently provide Veterans the care and benefits that they've earned." Walgreens President and Chief Executive Officer Greg Wasson said, "Walgreens is committed to supporting our Veterans, and we are proud to work with the Department of Veterans Affairs to provide convenient access to vaccines," said "This is an excellent opportunity for our pharmacists to help VA educate Veterans about the importance of vaccinations, to improve immunization rates through greater access and to contribute to helping veterans get, stay and live well." Interim Under Secretary for Health, Dr. Carolyn Clancy said, "The VA-Walgreens partnership gives Veterans greater choice in time and location for getting their flu shots without having to complete any other VA forms," said "With this program, the Veteran patient's record is integrated, and VA maintains a complete immunization record that allows us to more effectively provide patient-centered care."

Vaccines are subject to availability. Age, state and health related restrictions may apply. Many immunizations may be covered by commercial insurance plans, Medicare Part B or Medicare Part D. As part of this launch and under the agreement, VA funding can provide approximately 75,000 flu shots for enrolled veterans. Patients are encouraged to check with their health plan for specific coverage details. To find the nearest Walgreens, veterans can call 1-800-WALGREENS or visit http://www.walgreens.com. For more information about VA's immunization program, visit http://www.ehealth.va.gov/Immunization.asp. [Source: VA News Release Oct. 02, 2014 ++]

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VA Health Care Assessment ► 3rd Party Evaluation Contract

The Department of Veterans Affairs (VA) today announced that the MITRE Corporation, a not-for-profit company that operates multiple federally funded research and development centers, has been awarded a contract to support the Independent Assessment of VA health care processes, as required by the Veterans Access, Choice and Accountability Act of 2014 ("Choice Act"). MITRE Corporation will serve as program integrator. Section 201 of the Choice Act directs VA to enter into one or more independent, third-party contracts for an assessment of the hospital care, medical services and other health care processes in VA medical facilities. The program integrator will be responsible for coordinating the outcomes of the assessments conducted by the third-party entities according to the scope of the contracts. The program integrator is required to report the independent assessment results to Congress within 60 days of the assessment's conclusion.

"This independent assessment is a key element in our effort to rebuild trust with Veterans and our other stakeholders," said Secretary of Veterans Affairs Robert A. McDonald. "It will provide the Department a way to transparently review our vital programs, organizations, and business practices to make us a better and more accountable VA for the Veterans we serve." Working with Congress, Veterans Service Organizations, and other stakeholders, VA has taken steps to implement Choice Act legislation, including:

- Establishing a Program Management office to oversee planning and implementation of the legislation across the Department.
- Putting in place the mechanisms to execute the outlined facilities with the authorization provided to carry out major medical facility leases.
- Working through the contracting process to extend the pilot program called Project ARCH to ensure the continued expanded access for Veterans in rural areas provided by that program.

[Source: VA News Release Oct. 01, 2014 ++]

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VA Health Care Stories ► Vet's Lifesaving Procedure Canceled

A Navy veteran in need of a life-saving transplant says she found out 24 hours before she was supposed to begin treatment, that the VA won't cover the $350,000 procedure in Georgia. Instead, Tammy Baggett, of Winder, said she was told that she would have to travel to a Department of Veteran's Affairs facility in Nashville, Tennessee. "I have no trust whatsoever in the VA health care system," said Tammy Baggett, who lives in Winder, Georgia, "We were supposed to start tomorrow with a bone marrow transplant." Her brother is a match, for the transplant. Baggett says she was informed 29 SEP, that she would not be covered by the

VA at Emory. She says the VA told her to instead travel to one of its facilities in Nashville to get the transplant. Baggett has acute myeloid leukemia, and needs the transplant to survive.

Tammy Baggett

Her friends have setup a GoFundMe account at http://www.gofundme.com/f7pd70 to help her "get back to the business of being a mom." So far, 38 people have raised $3,485 for her in a single day, the page says. "I am from Georgia, I want to stay in Georgia, I need to stay in Georgia and I need a bone marrow transplant to live," Baggett says. Baggett is a single mother, and says she is concerned about leaving her son during the three-month duration, it might take. In August, a bill was signed into law, allowing veterans to seek treatment from private facilities if the VA can't offer services within 40 miles of a veterans' location. It is not clear, at this point, if this would also cover transplant services. "Every day that goes by is jeopardizing my life," Baggett said.

"The Veterans Access, Choice, and Accountability Act of 2014 (H.R.3230) was signed into law on August 7, 2014, and sets a 90-day deadline for the Department of Veterans Affairs to start the Veterans Choice program included in the law. The Veterans Choice Program is focused on the provision of health care outside the VA system, and will occur in early November of this year. The Department's focus and priority is on timely and effective implementation of this highly complex piece of legislation. As this process continues to move forward, VA will work with other Departments, Congress, Veterans Service Organizations and other stakeholders to ensure that provisions are implemented as quickly and efficiently as possible. Veterans who were enrolled in VA health care as of Aug. 1, 2014 or are eligible combat Veterans and meet certain other criteria regarding distance or wait times will be eligible for the Choice program," said James Hutton, the director of media relations for the Department of Veterans Affairs in an email. Video Story at http://www.wsbtv.com/news/news/veterans-lifesaving-procedure-canceled-because-va-/nhYHR/. [Source: WSB-TV 2 Atlanta | Rachel Stockman | Sept. 29, 2014 ++]

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VA Whistleblowers Update 10 ► Augusta Nurse Files Retaliation Complaint

A whistleblower from the Augusta area has filed a retaliation complaint against the Department of Veterans Affairs over management in North Carolina allegedly using "ongoing human resources irregularities" to punish her for reporting understaffing concerns. Laura Frantz, a former associate chief nurse at the W.G. (Bill) Hefner VA Medical Center in Salisbury, N.C., submitted a prohibited personnel practice complaint with the U.S. Office of Special Counsel last week, asking the federal watchdog to intervene and require VA officials to "cease and desist retaliation." Frantz, now a Columbia County real estate agent, says in her complaint that Daniel Hoffman, the director of the VA's Mid-Atlantic Health Care Network, is the main person behind eight years of "harassment and improper processing of employee compensation and benefits."

Laura Frantz

According to documentation included in her complaint, Frantz's removal notice lists her as "absent without official leave," a personnel action that typically results in discipline and possible removal. Her VA retirement savings plan, however, says she is still employed under approved leave-without-pay status. The conflicting information, Frantz said, has left her service record in limbo and prevented her from returning to health care as a registered nurse. She requested the special counsel's help to correct her VA service record, reinstate her employment with back pay, and get reimbursement for more than $200,000 in attorney costs and a reassignment to a "position that avoids the continuing hostile work environment." "The agency's reasoning for terminating me was pretext for retaliation," Frantz said of her claim Tuesday. "I believe it is evidence that the real reason for my termination was reprisal and retaliation."

The special counsel said in a news release 29 SEP that Frantz's retaliation complaint is one of more than 125 it continues to investigate at the VA for employees blowing the whistle on improper patient scheduling, understaffing of medical facilities and other dangers to patient health and safety within Veterans Affairs facilities nationwide. "VA leadership is sending a clear message: whistleblowing should be encouraged, not punished," Carolyn N. Lerner, head of the U.S. Office of Special Counsel, said in the statement, in which she applauded the VA for taking steps to change its culture of retaliation, including overhauling its Medical Inspector office, establishing an expedited complaint process for whistleblowers and creating an Office of Accountability Review.

Frantz said she has been regarded as a whistleblower since 2006. Not long after the VA promoted her to Salisbury's associate chief nurse for acute care in December 2005, she said she requested outside nurses be added to her staff to stabilize the hospital's surgery wing, which had been linked to 12 suspicious deaths in six months. Although executives at the VA said all problems associated with the deaths had been addressed, just half of Frantz's request was approved. She said the VA's funding of her request reflected poorly on leadership. Though Steve Wilkins, a spokesman for the VA's Mid-Atlantic Health Care Network, said Tuesday it "would be inappropriate to comment" on Frantz's complaint, federal court records show her removal started taking shape a year after her arrival in North Carolina.

In December 2006, the Salisbury VA began investigating her staff on accusations that it failed to properly run the facility's Bar Code Medication Administration computer program, which tracks patient prescriptions and documents missed medications. The VA's investigation alleged that nurses in Frantz's unit failed to administer approximately 300 medications over a six-month period. Though internal reports stated "no missed medications were found" and that further review was needed, the VA proposed to remove Frantz on March 26, 2007, on charges of negligent performance and patient endangerment. The removal remains open, pending a "final agency decision," Frantz said. [Source: The Augusta Chronicle | Wesley Brown | Oct. 01, 2014 ++]

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VA Whistleblowers Update 11 ► Three Accept Retaliation Settlements

Three Veterans Affairs Department employees who blew the whistle on patient scheduling problems and financial mismanagement at the VA's Phoenix medical center have won settlements for their claims of management retaliation. The Office of Special Counsel on 29 SEP announced it had obtained "full and fair" relief for Katherine Mitchell, Paula Pedene and Damian Reese, though details of the settlements were not disclosed. Since VA was hit by scandal this spring, lawmakers from both parties have called for a criminal investigation into whether VA officials potentially committed fraud by lying about patient wait times so they could meet performance measures that would-win them bonuses. Whistleblowers played a key role in the exposing the issues, which resulted in reform legislation signed by President Obama in August. "Dr. Mitchell, Ms. Pedene, and Mr. Reese followed their consciences and reported wrongdoing, and their efforts have improved care and accountability at the VA," Special Counsel Carolyn Lerner said. "I applaud the VA's leadership for taking actions to quickly resolve these cases and [take] concrete steps to change the VA's culture. The settlements allow these courageous employees to return to successful careers at the VA. VA leadership is sending a clear message: whistleblowing should be encouraged, not punished."

The three cases are the first since VA's post-scandal reforms, which include overhauling the department's Office of Medical Inspector, setting up an expedited review process for whistleblowers and creating an Office of Accountability Review. The three whistleblowers who won settlements had received demotions and poor performance ratings for speaking out.

- Dr. Mitchell, a 16-year veteran, was removed as director of the Phoenix facility's emergency room after reporting understaffing and poor triage training. She is now in a new position overseeing quality of patient care.
- Pedene, with two decades' experience as spokeswoman at the facility, disclosed numerous instances of financial mismanagement by former leaders in Phoenix. She was then investigated by VA management on "unsubstantiated charges," the OSC said, relieved of her job duties and assigned to an office in the basement library. She is now a national program specialist in the Veterans Health Administration's Office of Communications.
- Reese, a program analyst, raised concerns about the waiting times imposed on veterans seeking primary care. He then saw his annual performance rating downgraded by a senior official who had read his email.

The Special Counsel continues to process 125 other complaints related to the VA scandal from around the country. Though a separate secure reporting channel, the office also has 89 pending whistleblower disclosures, 51 of which have been referred to VA for investigation. [Source: GovExec.com | Charles S. Clark | Sept. 29, 2014 ++]

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VA Whistleblowers Update 12 ► Protection Achieves OSC Certification

The Department of Veterans Affairs (VA) on 7 OCT announced that the Office of Special Counsel (OSC) certified VA under OSC's 2302(c) Whistleblower Protection Certification Program on October 3, 2014. Following through on recent recommendations from the OSC, VA worked to achieve compliance and protect employees who identify or report problems from unlawful retaliation. "VA takes whistleblower complaints

seriously and will not tolerate retaliation against those who raise issues which may enable VA to better serve Veterans," said VA Secretary Robert McDonald. "We depend on VA employees and leaders to put the needs of Veterans first and honor VA's core values of 'Integrity, Commitment, Advocacy, Respect and Excellence.'"

Certification under OSC's 2302(c) Certification Program is just one of several steps VA has taken to enhance accountability within the organization and ensure its employees have a safe channel for disclosing whistleblower information. Most recently, VA worked closely with OSC to successfully resolve whistleblower retaliation complaints filed by three individuals from the VA Phoenix Health Care System. VA leadership sent a message to all VA employees regarding the importance of whistleblower protection emphasizing that managers and supervisors bear a special responsibility for enforcing whistleblower protection laws, and meets with employees at VA facilities across the country to reemphasize that message. Additionally, VA has established the Office of Accountability Review (OAR) to ensure leadership accountability for improprieties related to patient scheduling and access to care, whistleblower retaliation and related matters that impact public trust in VA. Since 26 SEP, VA has announced the proposed removal of four senior executives following investigations by the OAR and the VA Office of Inspector General.

Prior to this OSC certification, VA leadership recognized the importance of whistleblower disclosures. On 2 JUL, then-Acting Secretary Sloan Gibson met with Carolyn Lerner, Special Counsel of the U.S. Office of Special Counsel, to discuss actions underway to better protect whistleblowers, including the commitment to achieve compliance with the OSC 2302 (c) Certification Program. Under the OSC certification process, VA:

- Placed informational posters regarding prohibited personnel practices (PPP), whistleblowing, and whistleblower retaliation in a public setting at VA facilities and VA personnel and equal employment opportunity offices;
- Provided and will continue to provide new hires with written materials on PPP, whistleblowing, and whistleblower retaliation;
- Developed a website on PPP and whistleblower rights and protections; and
- Developed, in cooperation with the OSC, supervisory training on PPP and whistleblower rights and protections. VA executives, managers, and supervisors must complete this training on a biennial basis.

OSC is an independent Federal agency enforcing whistleblower protections, safeguarding the merit system, and providing a secure channel for whistleblower disclosures. [Source: VA News Release Oct. 07, 2014 ++]

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VA Loans ► Bankruptcy-Foreclosure Impact on Approval

Bankruptcy and foreclosure can take a toll on your financial profile. These are difficult events that leave veterans and military families reeling, often due to circumstances beyond their control. But neither has to keep you from using your hard-earned VA home loan benefits. To be sure, a bankruptcy or foreclosure complicates the picture. They can damage your credit score and delay your home buying time line. But prospective borrowers who focus on repairing their credit can still look to tap into this historic no-down payment program.

Bankruptcy. The two common forms of consumer bankruptcy are Chapter 7 and Chapter 13. Chapter 7 bankruptcy involves the liquidation of assets to repay debt. Consumers can also erase unsecured debts like credit cards and medical bills. This is typically a path for people with lower to middle incomes and minimal assets. Chapter 13 bankruptcy focuses on repayment of debt. Consumers propose a repayment plan that's typically completed in three to five years. You'll generally need a steady income and a desire to make up missed payments on things like a mortgage or car loan. Consumers who file for bankruptcy protection can see their credit score drop anywhere from 130 to 240 points, according to credit scoring firm FICO. VA lenders are typically looking for a credit score of at least 620, and that kind of decrease knocks many borrowers out of qualifying range. In addition, lenders will often require a "seasoning period" following a bankruptcy filing or discharge. Generally, prospective homebuyers with a bankruptcy will need to wait two years from the date a Chapter 7 bankruptcy is discharged or one year from the date a Chapter 13 bankruptcy is filed.

Foreclosure. There are several different types of foreclosure — a standard foreclosure, a deed-in-lieu of foreclosure and a short sale. They're all bad news for homeowners. A standard foreclosure involves the bank taking back the house through formal foreclosure proceedings. A deed-in-lieu allows the homeowner to give back the house without the foreclosure formalities. With a short sale, the lender allows the homeowner to sell the home for less than they owe on the mortgage. Lenders and the credit bureaus typically view these as the same general outcome. A foreclosure can knock anywhere from 85 to 160 points from your credit score. VA lenders will also typically require a two-year seasoning period following a foreclosure. Homeowners who lose an FHA loan to foreclosure may need to wait three years before securing a VA home loan. Many veterans are under the impression that having a VA loan foreclosed on means they've automatically lost access to their benefits. That's simply not the case. VA borrowers may be able to obtain another VA loan despite a default.

Foreclosure Following a Bankruptcy. It's not uncommon for homeowners to experience foreclosure in the wake of a bankruptcy, sometimes years down the road. The worry for prospective homebuyers is getting with another two-year seasoning period because of a later foreclosure. Lenders may have different polices for handling cases like this. It's often a question of when the borrower ceases to be legally responsible for the debt. If that's with the bankruptcy discharge, then a foreclosure months or years later won't typically kick off another two-year waiting period.

Repairing Credit. Getting your credit back in shape will be key following a bankruptcy or foreclosure. Veterans and service members can contact the Lighthouse Program at Veterans United for help. Many loan companies employ credit consultants to work with veterans and service members for free to craft a plan to improve their credit scores. One of these, Veterans United Home Loans, offers their Lighthouse Program which can provide veterans with free tools and information to help them boost their credit profile and get on the road to loan prequalification. This free, no-obligation program has helped more than 2,000 veterans and military families improve their financial and credit profiles and purchase their dream homes. [Source: Military.com | Buying a Home | Sept. 2014 ++]

At the VA official site, there is a frequently asked questions section with a very important question many VA loan applicants or refinance loan applicants want to know. The answer to, "How do I obtain a VA Home Loan Certificate of Eligibility or a duplicate of a certificate?" is fairly simple, but that answer depends on whether or not you are a military member or the surviving spouse of a military member.

[Source: Military.com | Chris Birk | Sept. 20, 2014 ++]

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VA Fraud, Waste, and Abuse ► 141001 thru 141015

Houston VAMC – A Houston Veterans Affairs employee falsified documents affecting the claims of more than 100 veterans, according to a report published 30 SEP by the Inspector General of the Veterans Affairs Administration. According to the report, an employee working in Houston's regional Veterans Benefits Administration in July warned officials in the administration's headquarters in Washington that a fellow employee had been inappropriately changing or removing system controls for benefits claims, but not doing the work associated with those changes and removals. From March to June of this year the employee made unfinished claims look like they had been completed in 136 out of 308 cases, the report said.

The news of the allegations caused VBA officials to take away the employee's system access, task an independent group to review the employee's work and to contact the VA's Office of Inspector General. Auditors then found the employee incorrectly changed or cancelled system controls in 38 of 51 additional claims they looked at. "If the VBA team had not identified the cases needing corrective actions, the claimants may never have received decisions on their claims," the report noted. The accused and unnamed employee manipulated the claims intentionally but did not personally profit from the fraud, according to the report, which also did not say how much money was tied up in the falsified claims. The employee accused of incorrectly manipulating the claims told investigators that the actions were the result of bad judgments and had occurred in a period of "immense stress" but also that he or she thought the actions taken were appropriate and would improve production.

After reviewing the allegations and a sampling of additional cases officials with the inspector general's office recommended that the regional director review and correct all actions the employee incorrectly made and to determine appropriate administrative actions against the employee. The Houston office agreed to both those recommendations, according to the report. "The Department of Veterans Affairs (VA) and the Houston Regional Office take any allegation of misconduct seriously," VA spokeswoman Jessica Jacobsen said in an email discussing the report. "This incident represents the actions of one employee and is not representative of the overall work being done at the Houston Regional Office. When local leadership discovered this issue, they took immediate and decisive action to notify the appropriate authorities including VA's Office of Inspector General (OIG)." Jacobsen stressed that no veteran's claims were negatively impacted by the actions, but declined to discuss what actions were taken against the employee accused of manipulating the claims. [Source: Houston Chronicle | St. John Barned-Smith | Oct. 01, 2014 ++]

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VHA Procurement – As the Department of Veterans Affairs tries to extricate itself from the multi-layered health care scandal, which the White House blamed on a corrosive culture, a new report from the VA Office of Inspector General (VA OIG) reveals yet another affair. Only this time, it's a contracting Veterans Health Administration (VHA) scandal dealing with VHA procurement. The VA OIG report, issued 29 SEP, centers on Susan Taylor, deputy chief procurement officer at the Department of Veterans Affairs. The report notes, Taylor allowed her subordinate, to award a purchase order with an annual value of $80,000 to William Dobryzkowski's private business. The report further discloses that Taylor and Dobrzykowski were lovers, and the contract enabled him to work directly with Taylor as a consultant, and travel with her on government related trips. The report said that she had a relationship with Dobrzykowski since 1994 when both worked for the Department of Housing and Urban Affairs.

When Jan Frye, the VA official responsible for VA acquisition and logical policy stepped in and tried to end the contract, Dobrzykowski, who once had applied for a top job at FedBid, according to the IG, wrote to

company officials asking them to work with Taylor. "She is your champion," he said in the email, according to the IG report. Glen Richardson, listed as a former FedBid president and currently its senior advisor to the chairman, responded, the IG report said, with an email to his FedBid colleagues: "Worst fears realized -- Frye doesn't want to shut us out of VA, he wants to shut us down completely. Therefore we need to show this is a malicious and arbitrary attack on us, filled with false statements, innuendo, and absurdities. Need to assassinate his character and discredit him." Frye told the VA inspector general, "They made it look like I had performed a criminal act by protecting the public's interest … I know that it was VHA that fed this information to FedBid within hours or minutes" after taking action to end the contract.

The VA Inspector General has sent its findings to the Department of Justice for potential criminal prosecution. No news yet available on the employment status of Susan Taylor or Bill Dobryzkowski or any of the other miscreants who brought on the VA scandal. [Source: NAUS Weeklu Update Oct. 03, 2014 ++]

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VAMC Hines IL Update 02 ► Director Richard's to Retire 31 OCT

The director of Edward Hines, Jr. VA Hospital will retire at the end of this month, the hospital announced 7 OCT. Joan Ricard is leaving after nearly 40 years of service in the Department of Veterans Affairs, including two years as director of the hospital. "The 37 years I've spent in the VA, and particularly my past two years at Hines VAH, have been incredibly rewarding," Ricard said in a press release. "I am honored to have worked with so many dedicated staff members, Veteran advocates and community leaders here and all across the country. I will miss the camaraderie dearly; however, I am excited about spending more time with my family and exploring new interests." She declined to speak to the Chicago Sun-Times Tuesday. A replacement for Ricard has not yet been named.

Joan Ricard, shown at a town hall meeting with veterans airing their complaints in September

During her tenure, Ricard managed one of the largest VA campuses and was responsible for providing quality care to more than 56,000 veterans annually, the hospital noted. Her resignation comes amid a slew of allegations about poor treatment at veterans' hospitals across the country — and after the dismissal 6 OCT of four high-ranking VA officials. At Hines, it is alleged that Hines patients were being kept on secret waiting lists; the publicized waiting lists showed much faster treatment than had actually occurred, allowing hospital executives to collect bonuses linked to meeting standards for speedy treatment — part of an alleged scam that is now believed to be a nationwide problem for Veteran Affairs hospitals. U.S. Sen. Mark Kirk (R-IL) has repeatedly called for Ricard to step down because he accused her of being part of the problem at Hines, calling her "drunk with power." On Tuesday, he called her resignation "a welcome return to accountability in the Hines VA."

In response to earlier allegations, a spokeswoman for Hines has said: “The Director and all employees at Hines VA Hospital remain committed to leading this organization with integrity and providing the best care our Veterans have earned and deserve.” And on 7 OCT, that spokeswoman again denied that Ricard’s stepping down had anything to do with the current events pertaining to the VA, though Kirk said he suspected that was “another lie.” [Source: Chicago Sun-Times | Monifa Thomas | Oct. 07, 2014 ++]

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VAMC Tampa FL Update 03 ► Answer the Phone

The director of the James A. Haley VA Medical Center has a message for every one of the Tampa hospital's more than 4,800 employees: Answer the phone. Veterans calling the medical center often endure long wait times in their struggle to reach someone, hospital director Kathleen R. Fogarty wrote in an email 6 OCT to the employees. That, she said, has to change. "The most basic thing you can do is answer the phone and call veterans back in a timely manner," said Haley spokeswoman Karen Collins. "That's the No. 1 rule of customer service." The reminder comes at a time when the beleaguered U.S. Department of Veterans Affairs is working to rebuild after a series of major crises. Veterans here have complained about many of the issues plaguing the VA nationwide, such as long waits for medical care and claims decisions. Whistle-blowers have accused a clinic at the C.W. Bill Young VA Medical Center of canceling more than 1,000 consultation referrals last year without checking the patients' needs.

Although the Young VA has not sent out such an email, a spokesman said 6 OCT it's working on phone service improvements. Collins said veterans had complained in focus groups and town hall meetings about long waits on the phone at Haley. Every employee is responsible for keeping contact information up to date and answering veterans' calls, Fogarty wrote. "They wait to get through and once they do, the phone just rings on the other end — sometimes for 20 minutes or more! — or they never get a return call if they leave voicemail," she wrote. Her email does not signify a change in policy or procedure, Collins said; rather, "it's just bringing it to the forefront of the staff's mind that everybody has this responsibility."

Fogarty's email follows a visit to the Haley VA on Wednesday by Secretary of Veterans Affairs Robert A. McDonald. The secretary urges people to call him Bob, freely distributes his cellphone number and said

he fields calls from veterans at all hours. Reached at that number on the first try Monday evening, McDonald said the Haley system's renewed commitment to access is a good thing. "The VA is all about customer service. It's about caring for our veterans who have done so much for us," he said. "They're the customer. They're the boss." He added: "While your ability to call me on my cellphone may appear hokey, it's representative of the kind of open culture that I think we want."

Improvements to phone service are under way at the Bay Pines VA Healthcare System, which includes Young VA as its main facility, spokesman Jason Dangel said. Though some veterans occasionally have problems with the system, he said, steps such as adding voicemail boxes, studying call metrics and streamlining call options will help. "With an organization this large, you're going to have minor problems, so our stance on that is to identify those . . . so we can look at it and try to correct it as soon as possible," Dangel said. Vietnam War veteran Andy Marshall, who uses the Young VA center, said he has experienced long phone wait times but that those on the other end are simply helping others at the moment. "The phone does ring for a while sometimes without anybody answering it," said Marshall, a national area supervisor for the Disabled American Veterans advocacy group. "But they're not just looking at the phone and watching it ring and not doing anything. That's not what happens. . . . They do the best with what they've got." [Source: Tapa Bay Times | Claire McNeill | Oct. 06, 2014 ++]

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VAMC Orlando FL Update 06 ► Legionnaires Disease at Lake Nona

Three elderly veterans contracted a dangerous bacteria after moving in to a new Veterans Affairs facility in Lake Nona. The veterans were diagnosed with Legionnaires' disease in July, and Health Department officials believe the bacteria was likely lingering in the water. One of the victims died after contracting the disease, but it was not the cause of death, officials said. The Orlando Veterans Affairs Community Center opened in December, and it's the only part of the behind-schedule hospital project that's finished. "It's isolated to this facility. Good news of it is two patients did recover. Unfortunately one person did pass away, but that person had underlying health conditions," said Dain Weister, with the Orange County Health Department.

Orlando VA Medical Center 3-D model of the new Lake Nona campus

A Veterans Affairs spokesperson said the Health Department found traces of the bacteria that cause Legionnaires' disease in the water. The disease is a severe form of pneumonia. "It has to be breathed in through water vapor, the steam, those kinds of things. Typically, this is known to be a problem with hot tubs,

showers, those sorts of things," said Weister. While changes are made to the water system, showers at the facility are off limits, and there's restricted access to the bathrooms and sinks. "For patients who feel uncomfortable being there, we would offer them a similar level of care at another facility until we get this worked out," said chief of staff at the facility, Dr. Kenneth Goldberg. A VA spokesperson said they're flushing the water lines on a daily basis and are monitoring the chlorine levels at the center. [Source: Orlando WFTV 9 | Julie Salomone | Sept. 29, 2014 ++]

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VAMC Iowa City IA ► Legionella Bacteria Found in Water Pipes

Leaders of the Veterans Affairs hospital here plan to spend $6.5 million to combat a potentially deadly bacteria that has been found in the facility's water pipes, but they have not informed patients about the problem. Legionella bacteria can cause Legionnaires' disease, a dangerous type of pneumonia. VA administrators confirmed to the Register that they've found the bacteria in several sinks and other water outlets in the past few years. But they said they've been able to control the problem, and they have not seen the need to cause alarm by telling patients. "There's a very, very low risk involved at these levels," said VA pathologist Stacy Klutts, who is helping oversee the effort to resolve the problem. Klutts stressed that VA doctors have closely monitored patients for signs of the disease, and they have not found any infections.

Such assurances don't satisfy Dick Allison, a Vietnam War veteran who uses the hospital and is a former employee. Allison learned about the Legionella bacteria from friends who remain on staff. He's upset that administrators aren't being upfront with the public and letting patients decide for themselves whether they want to drink the hospital's water or take showers in it. Dick Allison, a Vietnam War veteran who used to work at the Iowa City VA hospital and still goes there as a patient, was upset to learn that the administration wasn't notifying patients of Legionella bacteria in the facility's water. The bacteria can cause the potentially deadly Legionnaires' disease. "I'm not looking to blame anybody, and I don't want to hurt the VA. They've saved my life a couple of times," he said. "I really think they're making an effort to fix this. I only fault them for not telling people about it." The agency plans to replace all the plumbing in patient-care areas of the 600,000-square-foot hospital, starting next year. Several other VA hospitals nationally are undertaking similar projects, said Ed Ruppenkamp, chief engineer for the Iowa City VA hospital.

Allison, 65, who lives in the town of Washington, said VA employees who know about the issue have been quietly warning others. For example, he said, co-workers advised a pregnant nurse to drink only bottled water. Allison said he recently went to another hospital for a heart procedure because he didn't want to risk infection. He said he called the Iowa City VA a few months ago to inquire about the issue. Someone in administration called him back and said the bacteria had been found in just two spots — a patient room and an ice machine. Allison said he knew the problem was more widespread than that. Now he's not sure what to

think. "That's the whole problem," he said. "When somebody lies to you once, you wonder if they're lying to you about everything else." [Source: The des Moines Register | Tony Leys | Sept. 29, 2014 ++]

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VAMC Fayetteville NC Update 01 ► Unfair/Unsafe Practices Alleged

Investigators are reviewing allegations of "unfair and unsafe practices" in the Fayetteville VA Medical Center's Department of Surgery. The allegations, outlined in a copy of a letter that was sent to The Fayetteville Observer by "concerned surgical staff" at the Fayetteville VA, detail practices the anonymous writers said are "discriminatory and have placed our veterans at risk for delayed care and increased surgical complications." The Department of Veterans Affairs' Office of the Inspector General is reviewing the allegations, a spokeswoman for the office said. There is no timetable for a final report. Fayetteville VA officials said the complaints are being taken seriously, but the allegations are likely related to a recent change of leadership. The chief of surgery is new to the facility, officials said. "As is often the case with new leadership, change for the staff can be difficult and push back may occur or a desire to not change even when changes are needed," Fayetteville VA officials said.

The letter sent to the Observer was a copy of one that also was sent to the VA Office of the Inspector General and Sen. Kay Hagan (D-NC), according to an introduction included with the complaint. Hagan's office confirmed he had received the anonymous letter. Her office has contacted the Office of the Inspector General, and Hagan will monitor the situation, officials said. The letter alleges that personnel changes at the medical center were made in a push to increase the number of surgeries, but that input from nursing and anesthesia staff is now ignored. While surgeries have increased, there also have been increased complications and increased staff overtime and fatigue, the letter alleges. The letter also alleges that four surgical deaths were not properly reviewed between late 2013 and early 2014 and that, recently, two gynecology patients were fully anesthetized, only for staff to learn there were no available instruments and both procedures were aborted. In a separate incident, a patient in the operating room suffered a cardiac arrest because employees were rushing at the end of the day and were not properly staffed, according to the letter.

Lack of staffing and the push for more surgeries means some patients in the operating room are not being properly evaluated by medicine and anesthesia providers before surgery, causing unnecessary delays, occasional cancellations and increased complications, the letter states. The anonymous accusations also accuse the chief of surgery of pushing for lucrative contracts for University of North Carolina physicians, including his wife, and has hosted UNC officials for expensive dinners to promise contracts, all while employees have not seen raises since 2009. The chief of surgery previously worked for UNC, according to the letter, which also accuses the chief of surgery of taking discriminatory actions against staff. A formal discrimination case was filed against him, according to the letter, but no action has been taken by management to protect employees. After counseling, some employees were advised to move to other departments or quit.

Two nurses also have complained about being harassed by two surgeons, only to have those complaints ignored, according to the letter.

Fayetteville VA officials said surgical staff are encouraged to share their concerns, ideas and solutions at a weekly staff meeting and that the program is monitored for complications, cancellations and staff overtime. "Fayetteville is not an outlier in any of these areas and in fact are well below the national averages," officials said. "Any surgery complication is reviewed locally using national guidelines as well as in the National Surgery Office of VA. Again Fayetteville is not an outlier. Appropriate patient assessments, prior planning, and staying within our complexity level for surgery has contributed to these positive outcomes for both staff surgeons and surgery residents." Officials also said the chief of surgery could have no impact on contracts, which are processed through a central VA office. "Any staff concerns about the work environment, if brought forward to surgery or medical center leadership, are taken seriously and reviewed to determine circumstances and actions needed," officials said.

The Fayetteville VA has one of the fastest growing patient populations in the nation and has been struggling to keep up with that growth, officials have said. The local VA has some of the longest wait times in the nation for veterans, according to VA data. Last month, the Fayetteville VA Medical Center announced it was temporarily converting its emergency department into an urgent care clinic because of inadequate staffing. The change took place 20 SEP and will be in effect until a new contractor is on board and can resolve staffing problems that have plagued the department, officials said. Veterans who received care in the emergency department in the weeks before the announcement reported there was no medical officer on duty and that the hospital has been short-staffed. Others reported long waits caused in part by delays elsewhere in the medical center. Veterans have been told to go to other hospitals in case of an emergency.

The decision will not affect the hospital's accreditation, according to the Joint Commission, which reviews the Fayetteville VA Medical Center under its Hospital Accreditation Program. A spokeswoman for the Joint Commission said the Fayetteville VA was required to communicate the changes to its patients. While the emergency room will be downgraded, other functions at the medical center are unaffected, and those services will not be interrupted, officials said. [Source: Fayetteville Observer | Drew Brooks | Oct. 08, 2014 ++]

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GI Bill Update 184 ► Rates | 2014-2015 Monthly Payments

Each year the VA reassesses the cost of tuition and updates the benefits paid to GI Bill recipients. In most cases the value of the Montgomery GI Bill increases each year. If you want to know how much you can earn in MGIB benefits, then check out the following GI Bill Rates tables to find the corresponding monthly payments based on your GI Bill program and the educational program you are attending. Note that each person has a unique case the charts chart should be used as a reference only. You should contact the VA and your educational institution to determine your eligibility and the status of your benefits. Remember – Montgomery GI Bill benefits expire 10 years after your last separation from active duty, so be sure to use them before they do (it is possible to get a GI Bill refund, but only under limited circumstances)!

The Montgomery GI Bill (MGIB-AD/Chapter 30) is probably the most common GI Bill plan. It offers eligible recipients a monthly stipend while they are attending classes at a qualified training institution. The checks are sent on a monthly basis and are made payable to the student. Payments to trainees on active duty status are limited to the reimbursement of tuition and fees. If the trainee uses military tuition assistance, the payments are limited to the difference between the tuition assistance and the remaining tuition and fees. The

following payment rates for the Montgomery GI Bill are good for the period October 1, 2014 through September 30, 2015:

Using the MGIB for Institutional Training Time

- Full Time $1,717.00
- ¾ Time $1,287.75
- ½ Time $858.50
- Less than ½ time more than ¼ time $858.50**
- ¼ Time or less $429.25**

Using the MGIB for Apprenticeships and On-Job Training

- First six months of training $1,287.75
- Second six months of training $944.35
- Remaining pursuit of training $600.95

MGIB Rates, Less Than 3 Years Service - Institutional Training Time

- Full Time $1,395.00
- ¾ Time $1,046.25
- ½ Time $697.50
- Less than ½ time more than ¼ time $697.50**
- ¼ Time or less $348.75**

MGIB Rates, Less Than 3 Years Service - Apprenticeship and On-Job Training

- First six months of training $1,046.25
- Second six months of training $767.25
- Remaining pursuit of training $488.25

Note:
Flight Training — Students pursuing courses which consist solely of flight training will be paid at 60% of the approved rates.
** Tuition and Fees only. Payment cannot exceed listed amount.

[Source: http://www.benefits.va.gov/GIBILL/resources/benefits_resources/rate_tables.asp Oct 2014 ++]

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GI Bill Update 185 ► VA Unable to Implement New Law H.R.3230

When Congress passed the Veterans, Access, Choice and Accountability Act of 2014 (H.R.3230) to hopefully improve veterans access to healthcare through the VA it they included 2 important educational benefits in the bill. First it required all states to apply in-state tuition rates to veterans using the Post 9/11 GI Bill. Secondly, it made widows and widowers of service members who died in the line of duty after 9/11 qualified to receive the Fry Scholarship. The Fry Scholarship previously applied only to children of those who died in the line of duty. These were not incidental parts of the bill. When signing it into law President Obama said: "This bill covers a lot of ground, from expanding survivors' benefits and educational opportunities to improving care for veterans struggling with traumatic brain injury and victims of sexual assault." (Emphasis added)

At multiple meetings 9 SEP TREA's Deputy Legislative Director Michael Saunders and Washington Executive Director Deirdre Parke Holleman were told by different VA employees that VA was having great difficulty planning for the implementation of the 2 programs within the time requirements specified by the law. The in-state tuition provision is supposed be in effect by July 1st 2015. VA Under Secretary for Benefits Allison Hickey said that no money had been appropriated to reprogram the automated computer system for the 100,000 potentially affected students. She said that with full funding it would take 2 years to make the changes necessary, not the one provided. The expansion of the Fry Scholarship program is supposed to go into effect by January 1st 2015. Applications, which include an irrevocable waiver of Chapter 35 education benefits, are to be available on November 3rd but will have to be submitted by paper instead of electronically, as they are now. They do not know the computer application will be up and running. According to DEERS there are only 9,000 beneficiaries but the VA has certainly not worked out how the program will be implemented. When repeatedly questioned about the details the VA official could only answer ,"That is a very good question… I will need to look into that."

It will be very interesting to see what Congress' reaction will be when they return after the election. When they left they were very unhappy with the VA. At the moment, however, it is VA that is unhappy with Congress. VA Deputy Under Secretary for Economic Opportunity Curtis Coy testified about this very subject to Congress over a year ago. At that hearing he told them explicitly that if they passed the bill granting in-state tuition to all Post 9/11 GI Bill and Fry Scholarship beneficiaries that money would have to be appropriated to update VA's education payment processing system. If they did not, the Veterans' Benefits Administration would have to stop using a system on which they had spent roughly half a billion dollars. If you are a widow/widower who is thinking about applying of the Fry Scholarship in the next 2 ½ months and need help please do not hesitate to call TREA's Washington Office at 703-684-1981 • 800-554-8732 and ask for Deirdre Parke Holleman. [Source: TREA News for the Enlisted October 13, 2014 ++]

* Vets *

Veterans Voters Guide | 2014 ► Quizzing Issues for Congressional Hopefuls

Any sensible candidates on the campaign trail this fall will say they support veterans. Officials at Iraq and Afghanistan Veterans of America (IAVA) want voters to double-check that pledge. On 6 OCT, the advocacy group released its 2014 voters' guide, offering a checklist of six issues for veterans and military supporters for use in quizzing their congressional hopefuls: suicide prevention, the veterans claims backlog, female veterans support, burn-pit illnesses, veterans education benefits and post-military employment opportunities. "We thought about a scorecard, but instead we wanted this to be a call to action, arming veterans with information and specific questions to ask of their candidates," said Bill Rausch, political director for the group.

The six issues in the guide — out one month before the midterm election and available online at http://iava.org/2014voterguide — reflect the group's own legislative priorities for the year. Officials hope it not only keeps veterans issues in the forefront of campaigns across the country but also starts a more in-depth conversation about each one. IAVA Legislative Director Alex Nicholson said the Veterans Affairs Department's medical appointment delay crisis — which forced the resignation of former VA Secretary Eric Shinseki in May — has pressured lawmakers to educate themselves on a host of veterans issues. "So I think folks do get it now," he said. "But they're still legislating from crisis to crisis. We'd love to see VA and Congress working together, proactively working on these issues before the next crisis occurs."

For months, veterans groups including IAVA have been pushing lawmakers to pass a comprehensive suicide prevention bill, adopt new legislation to continue to reduce the disability claims backlog, and better monitor the long-term health effects on troops of exposure to open-air burn pits in the Iraq and Afghanistan combat zones. The voters' guide contains specifics on those efforts, and follow-up questions for candidates on the other issues: Will you support increasing the number of female-specific health care providers in VA? Will you protect Post-9/11 GI Bill benefits? Will you support programs to transfer military skills into civilian jobs? IAVA's internal surveys show that 94 percent of its members are registered to vote, and 93 percent intend to vote in the November election. Nicholson said the guide will help give those voters the information they need to make the right decisions. [Source: MilitaryTimes | Leo Shane | Oct. 06, 2014 ++]

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American Veterans Disabled For Life Memorial Update 01 ► Dedication

The row of wheelchairs near the memorial dedication stage wasn't part of the new tribute site, but it did help underscore its goal. On 5 OCT, hundreds of wounded veterans, military advocates and government officials gathered in Washington, D.C., for the dedication of the American Veterans Disabled for Life Memorial. The event was the culmination of 16 years of work and $80 million in private donations, and drew praise as a long-overdue thank you for those whose wounds extended past the battlefield. "This memorial is a challenge to all of us, and a reminder of the obligations we are under," President Obama told the crowd. "Let us never rush into war, because it's America's sons and daughters that bear the scars." There are about 4 million disabled veterans in America, with almost a quarter of that total from the conflicts in Iraq and Afghanistan. The new site is unusual in its dedication to both deceased and living veterans, setting aside much of its commemoration for individuals still able to visit the site and talk about its personal meaning.

President Obama speaks Oct. 5 during the dedication ceremony for the American Veterans Disabled for Life

Unlike the six other war tributes on the National Mall located about a mile west, this memorial sits in the shadow of the Capitol building, a reminder from its designers that costs of armed conflict linger far beyond the battlefield. Lois Pope, chairwoman of the memorial foundation, said the idea grew from her visit to the Vietnam War Memorial to see her fallen cousin's name, and seeing the disabled Vietnam veterans visiting there. "I asked the park ranger where the memorial was to pay tribute to those men," she said. "He said there was none. I said, 'We have to fix that.'" She refers to the Vietnam wall as "the saddest place on Earth" and said the goal for the disabled veterans memorial all along was to provide a much more uplifting — if still sober — message. "I really hope this is a call to action," said Pope, a former Broadway star and prominent philanthropist. "We need to always make sure these veterans get the care they need and deserve and have earned."

Veterans Affairs Secretary Bob McDonald echoed that sentiment at Sunday's ceremony, calling the new site a powerful reminder of both the sacrifices made and his agency's work to be done. "VA exists to serve them," he said of disabled veterans. "They are they lifeblood of democracy ... and our most important focus." Obama also praised the continued service of many wounded veterans in their post military life, some in the civilian workforce, some as role models for the next generation of Americans. "Here we see your resolve, and your refusal to give in to despair and cynicism," he said. "Disabled veterans are defined not by what you can't do, but what you can do. "If you want to see what real strength is, look at these men and women."

A disabled veteran takes in the quotes and pictures on glass panels at the new American Veterans Disabled for Life Memorial

The 2.4-acre site is wedged between several federal buildings, offering a space of calm among the rush of Capitol Hill, according to designers. Memorial walls are filled with quotes from statesmen and disabled veterans, and imagery of the survivors of of both visible and invisible combat wounds. Actor Gary Sinise, the public face of the memorial project for the last several years, said organizers hope that will be the start of a national conversation on those veterans continuing role in American history. "We can't give these wounded veterans back their arms and legs," he told the crowd. "But we can give them our respect, our everlasting thanks, and our support." [Source: MilitaryTimes | Leo Shane | Oct. 05, 2014 ++]

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Stolen Valor Update 94 ► **Reported 141001 thru 141015**

Joseph Teti -- Discovery Channel's "Dual Survival" reality star Joseph Teti, a former Army and Marine Corps special operator, has been disavowed by the Special Forces Association and stripped of his membership with the group. "He is no longer a member and cannot rejoin," retired Army Col. Jack Tobin, president of the association, told Military Times. The association's National Board made the decision after some two dozen current and former Special Forces soldiers came forward with allegations of misconduct against Teti. In the group's 50-year history, only 10 members have gotten the boot. Although Tobin declined to discuss the specifics of Teti's removal, the group's bylaws allow for membership to be revoked for lying about their Special Forces credentials or any "actions, deeds, or behavior by a member which brings discredit, humiliation, or embarrassment upon the Association." Teti and Discovery Channel did not respond to several requests for comment.

Former Marine Joe Teti, shown in Sri Lanka filming an episode of the Discovery Channel's popular 'Dual Survival' show

Teti, however, was clearly proud of his membership with the group. Until recently, it was the first entry listed under "professional affiliations" in the biography section of his personal website. Teti has been at the center of a growing storm over his military and combat duty claims since joining Dual Survival last year. He replaced David Canterbury, another Army veteran on the popular survival show, after allegations surfaced that Canterbury lied about sniper and airborne qualifications. Teti has faced far more controversy, however, including allegations that he misrepresents himself as a "combat veteran" despite never serving in combat while in the military.

In an April interview with Military Times, Teti defended his claims to combat experience, saying he served as a contractor in a highly classified special operations unit. He said he served in Force Recon as a Marine and later served as an enlisted Green Beret in the Army National Guard, leaving military service shortly after the 9/11 attacks to pursue work as a private contractor. "Never have I said that I served in the military in Iraq or Afghanistan," he said at the time. "I want to clear the record right now. I was in a government counterterrorism unit doing direct action missions right alongside Tier 1 assets." He insisted the government unit in which he served was so secret that he was barred from even discussing it. "Don't even guess about it because that will get you in big trouble. Don't even take liberties at guessing because you're

actually crossing a legal line right there. ... I am not at liberty to discuss — ethically, legally, morally — who I worked for," he said.

Special Forces Association members are applauding the move to take Teti off the group's rolls. "He's an embarrassment to the Regiment, because of the falsehoods, lies and embellishments he's used in association with his Special Forces qualifications," says retired Army Sgt. Maj. George Davenport, a "life member" of the organization. Among his lies, says Davenport, are claims that he was a graduate of the Special Forces Combat Diver and Special Forces Sniper courses. "I personally checked with the Special Forces schools and he did not go to those courses. There is no record of him attending," says Davenport, founder of the "Special Forces Poser Patrol" Facebook page, which added Teti to the group's "Wall of Shame" Sept. 30 in the wake of the SFA's decision. [Source: ArmyTimes | Jon R. Anderson | Oct. 01, 2014 ++]

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Richard Arthur Rahn -- In public, Rahn was a Ranger-tabbed command sergeant major who attended American Legion gatherings and other ceremonies, swapped tales of combat with veterans and pressed the flesh with civic leaders. In private, he offered comfort to a Gold Star family — visiting their Minnesota home, shedding tears with them over their fallen son, even offering a small statue of a praying soldier as a token of appreciation for their sacrifice. In reality, he was a faker and a felon. Rahn, 54, spent the summer attending various events while posing as a high-ranking noncommissioned officer, but when he donned his dress uniform at an Olivia, Minnesota, Legion post to greet participants in a motorcycle ride paying tribute to six fallen soldiers, the ruse was up.

The toothpick and sunglasses were two red flags for veterans that Richard Rahn was faking military service. A Ranger tab was sewed on his uniform, and he wore a Combat Infantryman Badge with two stars — an award given out only 325 times.

Veterans spotted multiple problems with the uniform, everything from an out-of-whack ribbon rack to a Combat Infantryman Badge that would've required Korean War service. Tips came in to local law enforcement, and it soon became clear that unearned medals were the least of Rahn's problems. Police in

Willmar discovered Rahn was a convicted felon in two other states, found guilty on drug and burglary charges. They also got a tip that he'd come into possession of a firearm — an illegal act for a convicted felon in Minnesota. On Sept. 9, a month after his in-uniform appearance in Olivia and subsequent trip to the home of Greg and Kim Schmit, police entered Rahn's Willmar home with a search warrant, found a firearm and arrested him. The next day, a search of a storage unit outside town uncovered two more firearms and "a U.S. Army dress uniform, with medals and insignia.

Army personnel officials confirmed to Army Times there's no record of Rahn serving in the Army, much less as a decorated NCO. That was news to Gold Star parent Kim Schmit, who had believed the man she'd offered dessert to and discussed religion with — the one who spoke of the 90 men lost under his command and spent an hour discussing her son, Joshua, who died in Iraq in 2007 — was who he said he was. Or, at least, that he had been. Unless investigators can show Rahn benefited financially — or in some other measurable fashion beyond ego boost — from wearing a uniform he didn't earn, charges related to stolen valor aren't likely, Police Chief Felt said. The chief said his men "are beating the bushes" to find such evidence, but that any charges would come at the federal level. Rahn pleaded not guilty to the firearms charges 1 OCT, He's scheduled for a pre-trial hearing in January and remains in Kandiyohi County Jail. [Source: ArmyTimes | Kevin Lilley | Oct. 04, 2014 ++]

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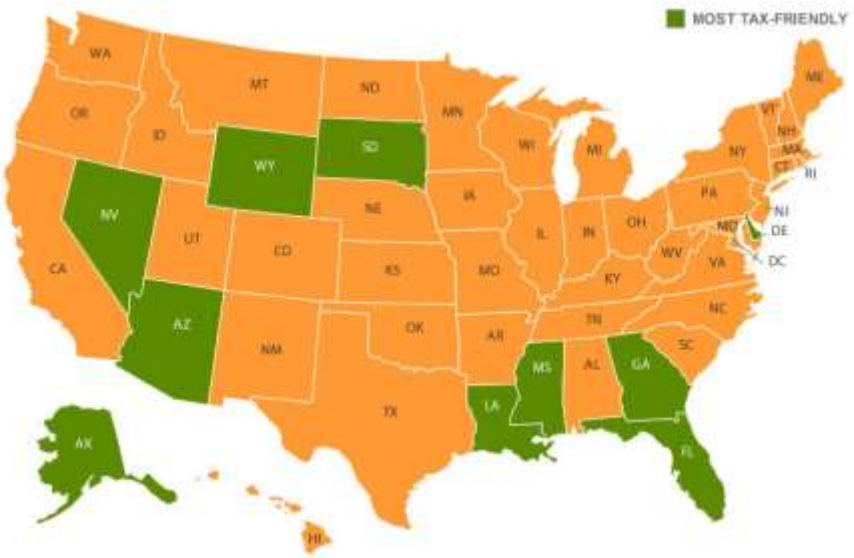
Tax Friendly States for Retirees ► **The 10 Best**



The green states above impose the lowest taxes on retirees, according to Kiplinger's 2014 analysis of state taxes. All of them exempt Social Security benefits from state taxes. Most also exempt at least a portion of other retirement income, such as pensions and withdrawals from tax-deferred retirement plans. (Go to http://content.kiplinger.com/tool/retirement/T055-S001-state-by-state-guide-to-taxes-on-retirees/index.php to see how retirement income is taxed by state). This year states' capital gains tax rates were also looked at because the six-year-long bull market has left many seniors with sizable gains in their taxable portfolios. Unlike the federal government, which applies lower rates to long-term gains (the profit from the sale of assets owned over one year), most states tax both short- and long-term gains at ordinary income tax rates. That adds

to the appeal of states with no income tax, which are attractive to seniors with sizable nest eggs. They can take profits without having to worry about a big state tax bill although they may still have to fork over federal taxes. Adding the state tax on profits to the criteria led Kiplinger to drop otherwise retiree-friendly South Carolina from their top ten list. Its top income tax rate of 7% kicks in once income exceeds $14,400. South Dakota, which has no income tax, takes its place on their list of the most tax-friendly states for retirees. Nevada, another no-income-tax state that also has relatively low property taxes, moves up to No. 3 on the list. [Source: http://www.kiplinger.com Sep 2014 ++]

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Incarcerated Vet Facilities ► New San Diego Unit

It's a tidy cellblock. You might even say shipshape. Patriotic murals decorate clean, white walls. The blue Navy flag hangs next to the red Marine Corps banner. And inmates at the veterans unit of the Vista Detention Facility — a Sn Diego county jail — sit politely to hear a message that just might change their lives. "We don't want to see you come back here. You can do it. Each one of you is smart enough and disciplined enough. You're veterans, and you're something special," said Albert Slater, a retired Marine lieutenant colonel and volunteer with the nonprofit group American Combat Veterans of War. Then Slater asked each of the 32 incarcerated veterans to raise a hand. "When you came into the military, you vowed to put your life on the line to protect the United States," he said. "I want a vow from you today that you're not going to come back to this f—kin' place."A cheer — "Oo-rah!" — came back from the inmates.

A patriotic artwork is displayed on the wall near the telephones in the Vista Jail housing module for military veterans.

San Diego County's veterans-only jail unit is a fairly new experiment in harnessing the memory of military service to put convicts back on the crime-free path. Launched in November, the unit's success has prompted the sheriff's department to open a second one later this fall at the Vista jail. The San Diego Association of Governments is gearing up to study the unit's track record, thanks to a $334,000 grant from the National Institute of Justice. Inmates in the Veterans Moving Forward Program get an intense slate of county-provided classes on substance-abuse prevention, career planning and anger and stress management. But sheriff's officials said community volunteers, such as the Oceanside-based American Combat Veterans of War, play a key role in why the veterans unit appears to be working. "An important piece for anyone in custody is for it to be recognized that you have self-worth and what you do with your life matters," said Christine Brown-

Taylor, re-entry services manager for the sheriff's department. "All the groups that come in, they don't treat them like inmates. They are treating them like another human being," she said. "That's very powerful."

Law-enforcement and justice programs focused on veterans are on the ascent nationally, a response to the 2.2 million service members who took part in the post-9/11 wars. Iraq and Afghanistan war veterans diagnosed with post-traumatic stress disorder are twice as likely as other veterans to be arrested for crimes, according to research cited by SANDAG. However, other factors, such as growing up in a violent home and a history of substance abuse, also play a role in that equation. San Diego County launched a veterans court, one of a handful in the state, in February 2011. It allows first-time and nonviolent offenders with military-related mental-health problems to get treatment instead of certain incarceration, along with the possibility of eventually having their records cleared. The first vets court opened in Buffalo, N.Y., in 2008. The all-vets jail unit is a more recent addition to the national scene. [Source: U~T San Diego | Jeanette Steele | Sept. 26, 2014 ++]

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Vet Jobs Update 160 ► Post-Military Initial Job Satisfaction Survey

Roughly two-thirds of veterans are likely to leave their first post-military job within two years because of problems like low job satisfaction and limited opportunities for advancement, according to a new survey by employment specialists. The report, from VetAdvisor and Syracuse University's Institute for Veterans and Military Families, confirms concerns from many veterans groups that post-military employment problems don't end when troops land their first civilian job. According to the research, roughly 44 percent of veterans who responded to the survey left their first civilian job within a year of employment. Another 21 percent left after one to two years on the job. Veterans blamed the quick job changes on a lack of advancement opportunity in their offices, tedious work requirements and finding that the job is a poor match with their military skills. But on a more positive note, more than 43 percent of veterans surveyed said they left their job for another, better position.

VetAdvisor officials said the results underscore the need for employers to focus not only on veteran recruiting but also on ways to hold onto those employees. The company provides support services for both veteran employees and corporate human resources officials dealing with military/veterans issues. "A lot of people just haven't really thought about retention for veterans they hire," said Jennifer Roseman, vice president at the company. "Once you have them on board, there are things you could and should do ... to help them have a meaningful career." Roseman said researchers weren't surprised by the results, but believe the information solidifies the need for educating businesses on understanding military culture and adapting to veterans' unique skills. "The cost of turnover is very high, and it's frustrating for veterans not to succeed in that first job after the military," she said. "So we hope these findings can help change that discussion and help veterans find quality and meaningful jobs right from the start."

IVMF officials said results of the survey, conducted earlier this year, also show the need for hiring managers to better match job requirements with veterans' qualifications, to ensure they aren't bored or underutilized in their civilian posts. Officers were more likely than enlisted troops to stay in their first post-military position, but more than half of officers also had moved on within two years, according to the survey, which included responses from nearly 1,500 veterans earlier this year. [Source: NavyTimes | Leo Shane | Oct. 01, 2014 ++]

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Vet Jobs Update 161 ► Seasonal Work | 800,000+ Jobs

Retailers across the country are gearing up for the holidays, and that means making sure they have enough employees to handle the surge in holiday shoppers. According to Challenger, Gray & Christmas, a global outplacement consulting firm, for the first time since 1999, retailers are expected to hire more than 800,000 seasonal workers this year. This suggests that retailers could see huge holiday sales numbers. John Challenger, chief executive officer of Challenger, Gray & Christmas, said:

The last two years saw holiday hiring return to pre-recession levels. This year, we could see hiring return to levels not seen since the height of the dot.com boom. Holiday spending will undoubtedly benefit from the fact that payrolls are increasing by an average of 215,000 new workers per month, so far this year. That translates into more people with jobs, which means more holiday spending money.

According to 24/7 Wall St., (http://247wallst.com/special-report/2014/10/01/retailers-hiring-the-most-employees-for-the-holidays-2/) a recent study from Deloitte said that U.S. job growth should boost holiday spending by more than 4 percent this year, compared to 2012. 24/7 Wall St. said these seven retailers are hiring the most employees this holiday season:

- **Macy's.** Hiring 86,000 workers. Unlike many retailers, Macy's has actually grown its profits in recent years and expects a big holiday season, according to 24/7 Wall St.
- **Target.** Hiring 70,000 workers. Last year's data breach made for a difficult holiday season for Target, so the company is hoping for a better season this year.
- **Kohl's.** Hiring 67,000. The retailer is substantially ramping up its seasonal hiring compared to last year, despite a 1.3 percent drop in sales this year.
- **Walmart.** Hiring 60,000 workers. This is a 10 percent increase from last year's holiday hiring.
- **Toys R' Us.** Hiring 45,000 workers. "The surge will more than double the company's U.S. workforce and offer seasonal workers opportunities for non-seasonal employment," according to 24/7 Wall St.
- **J.C. Penney.** Hiring 35,000 workers. This holiday season is important in the struggling retailer's turnaround plans.
- **GameStop.** Hiring 25,000 workers. Holiday sales are huge for the video game retailer. "Its fourth quarter, which coincides with the holidays, accounted for more than 40 percent of sales and for nearly two-thirds of its operating profit excluding non-recurring items in the last two years," noted 24/7 Wall St.

Challenger said job seekers need to look beyond retail store fronts for jobs this holiday season, as companies such as Amazon, UPS and FedEx also look to fill positions: Some of the best opportunities could be in the backroom, handling incoming and outgoing shipments. Job seekers should also look for positions at warehouses and shipping facilities associated with retailers and/or transportation companies. [Source: MoneyTalksNews | Krystal Steinmetz | Oct. 07, 2014 ++]

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Eisenhower Memorial Update 02 ► Moving Forward With Revised Design

The Eisenhower Memorial Commission will move forward with a revised design of a memorial in Washington, D.C. to honor the nation's 34th president, scrapping an alternate proposal that would have involved the loss of its famed architect. The commission voted privately to present a design to the National

Capital Planning Commission on 2 OCT that keeps the controversial, steel mesh tapestry strung across massive 80-foot columns that depicts the rural landscape of Abilene, Kansas, where President Dwight D. Eisenhower grew up. The tapestry and columns have been panned by critics and Eisenhower's granddaughters as industrial, massive and too focused on the president's childhood and not his accomplishments. Rep. Darrell Issa (R-CA), a member of the National Capital Planning Commission, had requested an alternate design that eliminated the tapestry and columns and would keep statues of Eisenhower as president and World War II general as the focal points of the four-acre urban park within view of the U.S. Capitol. But the architect, Frank Gehry, designer of the Walt Disney Concert Hall in Los Angeles and the Guggenheim Museum in Spain, would pull out of the project if that design was approved, citing a lack of architectural elements. [Source: Stars and Stripes | C.J. Lin | Sept. 25, 2014 ++]

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Vet Charity Watch Update 50 ► Wounded Warrior Project Under Fire

Over the past decade, the Wounded Warrior Project has emerged to become one of the celebrated charities in the country—but with its prominence comes deeper scrutiny and criticism. It's a broad but closely held sentiment within the veterans' advocacy community: grumbling and critiques about the fundraising behemoth WWP has become, and whether it has been as effective as it could be. In interviews, critical veterans' advocates and veterans charged that the Wounded Warrior Project cares more about its image than it does about helping veterans; that it makes public splashes by taking vets on dramatic skydiving trips but doesn't do enough to help the long-term wellbeing of those injured in combat. These criticisms come from a broad cross-section of veterans and their advocates, the vast majority of whom refused to speak on the record due to the sway the Wounded Warrior Project carries.

"They are such a big name within the veterans' community. I don't need to start a war in my backyard," a double-amputee veteran who served in Iraq told The Daily Beast. But granted anonymity, the vet gave

voice to what is at the very least a perception problem for the WWP: “They’re more worried about putting their label on everything than getting down to brass tacks. It’s really frustrating.” The same veteran spoke of waking up in the hospital after an IED hit his supply truck—WWP, he said, had given him only trivial merchandise: a backpack, a shaving kit and socks. “Everything they do is a dog-and-pony show, and I haven’t talked to one of my fellow veterans that were injured… actually getting any help from the Wounded Warrior Project. I’m not just talking about financial assistance; I'm talking about help, period,” he said.

Some gripe in interviews with the Beast about how the charity has become more of a self-perpetuating fundraising machine than a service organization. WWP certainly is successful at fundraising: It had revenues of more than $300 million, according to its most recent audited report, up from approximately $200 million the year before. “In the beginning, with Wounded Warrior, it started as a small organization and evolved into a beast,” said Sam, an active-duty Army soldier who works with Special Forces. It's “become so large and such a massive money-maker,” he says, that he worries the organization cares about nothing more than raising money and “keeping up an appearance” for the public with superficial displays like wounded warrior parking spots at the Walmart. Sam said he’s not interested in becoming involved with the Wounded Warrior Project after he leaves active-duty service—he prefers small nonprofits that are “just trying to survive” with a smaller budget and narrower mission. “They’re laser-focused on making money to help vets, but forgetting to help vets,” said one veterans’ advocate. “It’s becoming one of the best known charities in America—and they’re not spending their money very well.”

The organization also engages in branded partnerships for everything from ketchup to paper towels to playing cards—something that rubs other veterans’ groups the wrong way. “It’s more about the Wounded Warrior Project and less about the wounded warrior,” said a second veterans’ advocate. “You have an organization that is spending God knows how many millions of dollars saying that they’re helping people, but they’re not,” said Davis, an Iraq War veteran. Here are the charity’s self-reported results: As of September, the Wounded Warrior Project said it was serving more than 56,000 wounded vets and nearly 8,000 family members. To date, the WWP's benefits team has helped 6,600 veterans submit benefit claims, and their Warriors to Work program helped place 1,900 veterans in jobs. The organization offers peer mentoring, employment assistance services, physical health and wellness activities, and long-term support initiatives.

But of the more than 56,000 veterans the group counts as “alumni,” meaning that they have been registered with the organization, many don’t directly engage with WWP. Less than two-thirds (62 percent) of alumni participated in at least one WWP activity or service in the past year, according to a survey of alumni the group shared with the Beast. But according to their internal database, 78.9 percent of alumni have been involved with “engagements and interactions” with WWP this year. The Wounded Warrior Project has also gotten mixed results from charity watchdogs: Charity Watch gave Wounded Warrior a C+ in 2013, up from a D two years prior. Charity Navigator gave it three out of four stars. WWP claims to currently spend 80 percent of its budget on programs for veterans. But their formulation includes some solicitations with educational material on it as money spent on programs. A 2013 collaboration between the Tampa Bay Times and the Center for Investigative Reporting reported that the charity spent just 58 percent of donations directly on veterans’ programs. That year, the figure WWP self-reported was 73 percent. In contrast, a veterans’ charity like Fisher House, which received four stars from Charity Navigator and an A+ from Charity Watch, spent close to 95 percent of its budget on its programs.

There is also a distinct bitterness, especially from smaller advocacy groups, about the level of executive compensation doled out to the group’s leadership: For example, CEO Steven Nardizzi makes an annual salary of $375,000, according to their most recent tax report. WWP counters that its volunteer Board of Director studies similar organization to determine executive compensation, and that their CEO’s compensation is

approximately one-tenth of 1 percent of its budget. Nardizzi himself has dismissed charity ratings as unhelpful in the past. Ken Davis, a veteran who served in Iraq before being injured, is considered among the "alumni" of the Wounded Warrior Project—even though he said he no longer wants to be associated with it. "I receive more marketing stuff from them, [and see more of that] than the money they've put into the community here in Arizona," he told the Beast. "It's just about numbers and money to them. Never once did I get the feeling that it's about veterans." He could have used a ride to a VA facility for health care, he said. But rather than receive practical assistance from the WWP, he got a branded fleece beanie. "They're marketing, they're spending money—but on what?" Davis asked.

Outside defenders of the Wounded Warrior Project, in interviews with the Beast, suggested that critics were merely jealous of the charity's success, and that the disapproving criticisms were merely a function of fear that WWP was eating up their donor dollars. "There's a certain level of jealousy, that [WWP] have such cachet, and on a daily basis people will associate [other prominent veterans' groups] as Wounded Warrior. That rubs people the wrong way," said one such defender in the nonprofit sphere. As for the administrative costs of the charity, the nonprofit worker continued, "There is a fundamental misunderstanding in the public sphere about what it really costs to run an effective nonprofit." For its part, the Wounded Warrior Project dismisses much of the criticism. The branding of products will "help to create awareness of the challenges and needs of this generation of veteran... help fund the 20 free programs and services we provide to injured veterans, their families and caregivers, and inform veterans of the programs and services we provide so that they can register as Alumni to take part in them," their spokeswoman said.

As for the comfort packages and merchandise, Roberts notes that it reflects the group's origins: WWP started with just six friends packing backpacks to provide items to wounded services warriors at Walter Reed Medical Center. And the group also says employees are empowered to provide direct assistance to veterans such as rent, utilities, food, and emergency repairs. The Wounded Warrior Project is certainly not a scam, nor an ill-meaning charity. Even its fiercest detractors admit that WWP has the right motives, even if they believe WWP can be a lot more effective. But as the Wounded Warrior Project has grown to become one of the nation's most prominent veterans' groups, it still has room for improvement. Can it claim to serve 56,000 vets when at least one-third haven't engaged with the group in the past year? Or claim to be maximally effective if it spends more of its budget on administrative costs than the top-ranked charities in the field do? At the very least, the Wounded Warrior Project has a perception problem among a broad group of fellow veterans advocates and vets themselves. "You have an organization that is spending God knows how many millions of dollars saying that they're helping people, but they're not," said Davis, an Iraq veteran. [Source: The Daily Beast | Tim Mak | Sept. 26, 2014 ++]

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Vet Toxic Exposure~Lejeune Update 49 ► **Deadline Extended**

The Veterans Affairs Department has extended its deadline for veterans to receive reimbursement for medical costs related to exposure to contaminated water at Camp Lejeune, North Carolina, and announced it will start paying out-of-pocket health costs for family members with certain health conditions related to drinking toxic water at the military base. Complying with a law passed in 2012 — the Honoring America's Veterans and Caring for Camp Lejeune Families Act — VA has released two announcements clarifying its health care coverage and reimbursement policies for illnesses in veterans and family members who lived at Camp Lejeune from 1957 to 1987. More than 750,000 people may have been exposed to polluted drinking water at Camp Lejeune that contained volatile organic compounds and other chemicals like benzene and vinyl chloride.

The 15 illnesses covered under the law include certain cancers, such as breast, lung, esophageal and bladder cancer, as well as other medical conditions like kidney and liver problems, infertility, miscarriage and birth defects. VA began providing care to affected veterans for these diseases after the Camp Lejeune water law passed in 2012. But VA did not announce its plans to pay for family members' care until 24 SEP — and even those procedures have not been finalized. Under the new rules, veterans have until Sept. 24, 2016, to request status as a Camp Lejeune veteran and be eligible for retroactive reimbursement of out-of-pocket medical costs back to Aug. 6, 2012 — the day the legislation authorized VA to begin providing benefits for Camp Lejeune veterans. Veterans can apply for Camp Lejeune status at any time, even after the 2016 date, but will not be eligible for reimbursement. Under the new rules, VA will reimburse family members diagnosed with one of the 15 contaminant-related illnesses back to March 26, 2013, the date Congress provided funding for the law. Family members also must apply for status using the Camp Lejeune Family Member Heath Care Program Application form. VA will not provide any direct medical care to affected family members.

Sens. Richard Burr (R-NC) and Kay Hagan (D-NC) said after the VA announcement that they were pleased the Obama administration is moving toward helping affected veterans and families but expressed disappointment with how long the process has taken. "*Unfortunately, many who were exposed to the contaminated water have already died as a result of their exposures and will not be able to receive the help this law provides. I fully expect VA will now move swiftly to implement all the regulations and extend a helping hand to the victims of this tragic episode in our nation's history,"* said Burr, a Republican. "Our veterans and their families exposed to toxic water contamination have waited too long for answers, and I am pleased they will now begin to receive the critical health care benefits they deserve," said Hagan. The senators also are pressing for additional legislation to expand the date of eligibility back to 1953 based on evidence that the drinking water contained cancer-causing contaminants years before the current accepted dates.

Jerry Ensminger spends hours every day researching the contamination of drinking water at Camp Lejeune

Retired Marine Master Sgt. Jerome Ensminger has helped lead the fight to uncover the problems and push for legislation to help affected families. His 9-year-old daughter Janey died in 1987 of leukemia, and he knows many service members, family and friends who either are sick or have died from exposure-related diseases. Ensminger says his fight also isn't over; he plans to push for a law requiring VA to deem the 15 illnesses and diseases related to military service and therefore, eligible for VA disability compensation

benefits. While some Camp Lejeune veterans receive disability payments for their service-related exposure at the installation, the benefit is not automatic. It should be, said Ensminger, who added that he is healthy and would not benefit financially from any change. "The law we have right now is an admission of guilt. Why do you rate health care but have to jump through hoops to get service-connected disability? We were poisoned," Ensminger said. The water contamination at Camp Lejeune is the largest environmental hazards incident on a Defense Department facility in the United States. [Source: MilitaryTimes | Patricia Kime | Oct. 07, 2014 ++]

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Retiree Appreciation Days ► As of 12 Oct 2014

Retiree Appreciation Days (RADs) are designed with you in mind. They're a great source of the latest information for retirees and Family members in your area. RADs vary from installation to installation, but, in general, they provide an opportunity to renew acquaintances, listen to guest speakers, renew ID Cards, get medical checkups, and various other services. Some RADs include special events such as dinners or golf tournaments. Due to budget constraints, some RADs may be cancelled or rescheduled. Also, scheduled appearances of DFAS representatives may not be possible. If you plan to travel long distances to attend a RAD, before traveling, you should call the sponsoring RSO to ensure the RAD will held as scheduled and, if applicable, whether or not DFAS reps will be available. The current schedule is provided in the attachment to this Bulletin titled, **"Retiree Activity\Appreciation Days (RAD) Schedule".** For more information call the phone numbers of the Retirement Services Officer (RSO) sponsoring the RAD as indicated in the attachment. An up-to-date Retiree Appreciation Days list is always available online at http://www.hostmtb.org/RADLIST-2014.html. [Source: RAD List Manager | Milton Bell | Oct. 13, 2014 ++]

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Vet Hiring Fairs ► 25 Oct thru 14 Nov 2014

The U.S. Chamber of Commerce's (USCC) Hiring Our Heroes program employment workshops are available in conjunction with hundreds of their hiring fairs. These workshops are designed to help veterans and military spouses and include resume writing, interview skills, and one-on-one mentoring. For details of each you should click on the city next to the date in the below list. To participate, sign up for the workshop in addition to registering (if indicated) for the hiring fairs which are shown below for the next 4 weeks. For more information about the USCC Hiring Our Heroes Program, Military Spouse Program, Transition Assistance, GE Employment Workshops, Resume Engine, etc. visit the U.S. Chamber of Commerce's website at http://www.hiringourheroes.org/hiringourheroes/events.

McAllen/Mission, TX
October 15 @ 10:00 am to @ 1:00 pm Details | Register
Baton Rouge/Lafayette, LA
October 16 @ 10:00 am to @ 1:00 pm Details | Register
Joint Base Lewis-McChord, WA - Washington State Service Member for Life Transition Summit
October 21 @ 8:00 am to October 23 @ 5:00 pm Details | Register
Houston, TX
October 22 @ 10:00 am Details | Register
Toms River, NJ

October 22 @ 10:00 am Details
MCAS Miramar, CA - Military Spouse Networking Reception
October 22 @ 7:00 pm to @ 9:00 pm Details | Register
MCAS Miramar, CA - Military Spouse Hiring Fair
October 23 @ 10:00 am to @ 1:00 pm Details | Register
Raleigh/Durham, NC
October 23 @ 10:00 am to @ 1:00 pm Details | Register
Ft. Worth, TX
October 29 @ 10:00 am to @ 1:00 pm Details | Register

Virtual Job Fair
October 29 @ 11:00 am to @ 3:00 pm Details | Register
Caregiver Summit
October 30 @ 8:15 am to @ 1:30 pm Details | Register
Macomb County, MI
November 1 @ 11:00 am to @ 3:00 pm Details | Register
Germany, AE European Theater Transition Summit
November 3 @ 9:00 am to November 6 @ 4:00 pm Details | Register
Ft. Bliss, TX Military Spouse Networking Reception
November 5 @ 7:00 pm Details | Register
Ft. Bliss, TX Military Spouse Hiring Fair
November 6 @ 10:00 am Details | Register
Pensacola, FL
November 6 @ 10:00 am to @ 1:00 pm Details | Register
Detroit, MI
November 8 @ 9:00 am to @ 3:00 pm Details | Register
Orlando, FL
November 11 @ 10:00 am to @ 1:00 pm Details | Register
Des Moines, IA
November 11 @ 10:00 am to @ 1:00 pm Details | Register
Joint Base Anacostia-Bolling, DC Washington, DC
November 12 @ 10:00 am to @ 1:00 pm Details | Register
Portland, ME
November 12 @ 10:00 am to @ 1:00 pm Details | Register
Los Angeles/Gardena, CA
November 13 @ 10:00 am to @ 1:00 pm Details | Register
Portland, OR
November 14 @ 10:00 am to @ 1:00 pm Details | Register

[Source: U.S. Chamber of Commerce Assn 28 Sep 2014 ++]

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WWII VETS 72 ► Maupin~Charles

With the observance of the 2014 Memorial Day, people throughout Fort Benning and the surrounding communities took time to recognize the sacrifices made by those who have fought and died while serving the United States. Among those pausing to reflect was Charles Maupin, a 94-year-old veteran of World War II,

who stood on the beaches of Normandy the day after Operation Neptune, better known as D-Day, on June 6, 1944. D-Day served as the beginning of the invasion of German-occupied western Europe and is widely recognized as one of the major turning points of the war. At the time, Maupin was a radio operator for the battalion commander of the 3rd Battalion, 175th Infantry Regiment, 29th Infantry Division. He said he followed the battalion commander everywhere he went, including the beaches of Normandy. While Maupin was not a part of the initial landings, he said standing on the beach the next day was overwhelming.

Charles Maupin, a veteran of World War II with the 29th Infantry Division, shows his memorabilia from World War II and D-Day. He has numerous medals and a display containing rocks and sand from Normandy's Omaha Beach.

"The Soldiers who landed on Omaha Beach on D-Day showed courage and determination that you can't imagine," Maupin said. "I can't imagine exactly how they felt. I landed on the second day when the beach area had just been cleared. "It was the most dramatic moment of my life. The whole operation was so overwhelming that it was hard to absorb everything that was going on. There were ships all over carrying thousands of troops toward Normandy, thousands of planes flying over and battleships firing their guns. It was all so awesome. It's indescribable, really. If you weren't there and didn't see it, you really can't describe the scope and immensity of it. It was the greatest amphibious operation in military history. It was something to be a part of." After landing at Normandy, Maupin said he was in a combat environment for the next 11 months, all the way until Victory in Europe Day on May 8, 1945. "There were a few days where I was on leave in Paris where I might have been out of danger, but other than that danger was constant," he said. "Even in the rest areas, we got shelled and had shells hit pretty close. Without being very fortunate, I wouldn't be here today to talk about this. ... You get to the point where you feel like the law of averages is going to catch up with you. That's the way I got to feeling near the end of the war."

Despite that prolonged danger, he said the Soldiers he served with were mostly able to control their emotions despite fear running rampant. "Fear breeds fear," Maupin said. "The more you let fear control you, the more afraid you're going to be. That's what happened to a lot of the Soldiers during the war. Fear got the best of them. Courage is not the absence of fear - it's overcoming fear and acting and doing your job in spite of your fear. Everybody was afraid. I doubt there was a Soldier during the war that wasn't afraid. That's inherent in human beings when your life is in danger." Maupin left the Army in October 1945 as a corporal after more than 34 months of service, all of which he said he spent away from home. "I spent 34 months and

eight days in service, with 28 months overseas," Maupin said. "In all those 34 months, I never went home. I left home on December 8, 1942, and I got home October 17, 1945. But, I got home. A lot of guys didn't." With the recent observance of Memorial Day, Maupin said he spends a lot of time reflecting on the sacrifices made by the Soldiers he served with 70 years ago and the events that occurred on D-Day.

His wall is adorned with certificates from World War II, and a display case in his apartment holds sand and rocks from Normandy's Omaha Beach. "D-Day is something we ought to always remember," Maupin said. "It was one of the greatest, most dramatic events in the history of the world. We should never forget it. If we forget history, we're bound to repeat it, and that's something we never want to repeat. We came very close to defeat on D-Day. If certain events had happened, our forces would have been pushed off and we couldn't have gained a foothold on the continent of Europe. "We should remember the veterans who were involved, the courage they showed and the fact that they preserved freedoms that people today are enjoying. We lost more than 400,000 young Americans during World War II. ... When you think about those people and what they could have contributed to this country in science, math, culture or arts, you realize what a terrible thing it was." And while he said he often thinks of World War II, he also said today's Soldiers deserve just as much gratitude as those of 1944. "I think they're the greatest Soldiers in the world," Maupin said. "There are none better anywhere. We owe a debt of gratitude and so much that we never can repay, especially to the wounded warriors. ... I have the utmost respect for them. We just need to support them and do all we can to take care of them." [Source: www.army.mil | Nick Duke | May 27, 2014 ++]

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America's Most Beloved Vets ► World War II (3)

George H.W. Bush

George Patton

Guy Gabaldon

Ira Hayes

Jimmy Doolittle

- Before a U.N. ambassadorship, the CIA and the presidency, Bush was the Navy's youngest aviator.
- His strong leadership, knowledge of tank warfare, and rapid advance across Europe put "Old Blood and Guts" George Patton in the pantheon of great military figures.
- Called "the Pied Piper of Saipan," the 18-year-old Marine private Guy Gabaldon singlehandedly captured more than 1,000 Japanese soldiers in battle.
- Immortalized as one of the flag-raisers at Iwo Jima, the Marine corporal Ira Hayes died young, having struggled with his sudden fame and survivor's guilt.
- The aviation pioneer Jimmy Doolittle is renowned for leading a daring bombing raid over Tokyo in 1942.

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Veteran State Benefits & Discounts ► New Jersey 2014

The state of New Jersey provides several benefits to veterans as indicated below. To obtain information on these plus discounts listed on the Military and Veterans Discount Center (MCVDC) website, refer to the attachment to this Bulletin titled, "**Vet State Benefits & Discounts – NJ**" for an overview of the below those benefits. Benefits are available to veterans who are residents of the state. For a more detailed explanation of each of the following refer to http://www.nj.gov/military & http://militaryandveteransdiscounts.com/location/new-jersey.html.

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

[Source: http://www.military.com/benefits/veteran-state-benefits/new-jersey-state-veterans-benefits.html Oct 2014 ++]

* Vet Legislation *

The Military Coalition Update 02 ► FY 2015 Legislative Priorities

On 8 OCT The Military Coalition (TMC), a consortium of military and veterans groups, outlined its legislative priorities in the FY 2015 defense authorization bill. The Coalition offered its analysis of the House and Senate versions of the defense bill to the Chairmen and Ranking Members of the Armed Services Committees. Copies of the letter were also sent to every member of Congress. The Coalition praised the House and the Senate Armed Services Committees for rejecting many of the proposals by the Pentagon and the administration in the FY 2015 budget to cut costs on the backs of those who serve, including a consolidation of TRICARE options and cuts to commissaries. The Senate was urged to follow the lead of the House and block proposed active duty pay caps, a reduction in housing allowance compensation, and an increase in TRICARE pharmacy fees. A number of other key priorities were included in only one version of the bill. The Coalition highlighted these issues in the hopes both chambers would adopt the fixes in conference committee.

- **Full Future COLAs:** The Senate version of the defense bill would provide full Cost-of-Living Adjustments (COLAs) to new entrants in the military through January 1, 2016. Thanks to MOAA's advocacy efforts, current servicemembers, retirees, and survivors were grandfathered from cuts to

COLA originally included in the Bipartisan Budget Act of 2013, but new recruits since January 1, 2014 were not protected.

- **Guard/Reserve Retirement Credit:** The Senate bill includes a provision to provide early retirement "rollover" credit for Guard/Reservists who serve 90 days on active duty during two fiscal years. Currently the 90 day clock resets at the start of a new fiscal year.
- **SBP Special Needs Trust:** The Senate bill also includes a provision to allow for Survivor Benefit Plan annuities to be paid into a Special Needs Trust for adult dependent children. Current law prohibits SBP from being paid into a trust. This can result in disabled dependent children being ruled ineligible for essential needs-based government aid because of their SBP income.

The letters also called for Congress to reach a bipartisan solution to repeal sequestration. The automatic, across-the-board cuts in government funding have had a disproportionate effect on DoD. The arbitrary cuts have led to a "benefits versus bullets" debate which is placing readiness and the future of the all-volunteer force at risk. [Source: MOAA Leg Up Oct. 10, 2014 ++]

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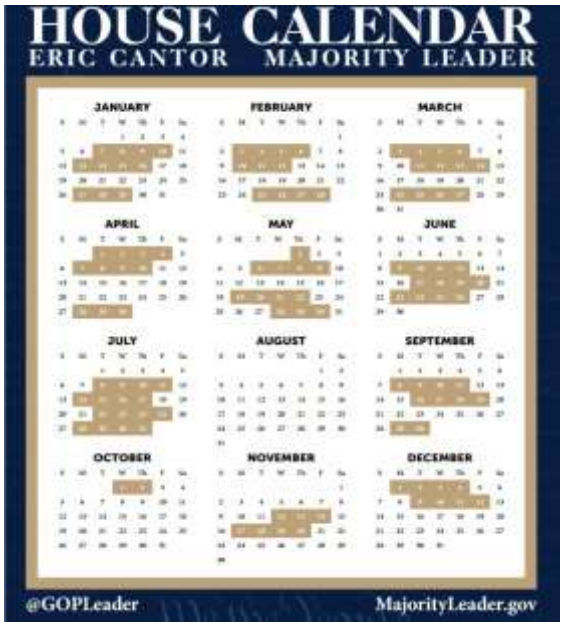
House Calendar ► 2014 Tentative Schedule

The House of Representatives has averaged 137 "legislative days" a year since 2001, according to records kept by the Library of Congress. That's about one day of work every three days, or fewer than three days a week. A legislative day is defined as any official meeting of the legislative body to do the people's business. Technically a legislative day can span more than 24 hours. A legislative day ends only when the session is adjourned. For example, Congress often holds business sessions only on Tuesday, Wednesday and Thursday, so that legislators can visit their constituents over a long weekend that includes a work day. At such times, Congress has not adjourned but is, instead, recessed. The Legislative Reorganization Act of 1970 stipulated a 30-day recess each August, except in time of war. Congress recesses the week of a federal holiday. The House will only be in session for 97 days prior to Election Day and 112 days through the end of 2014.



[Source: http://www.majorityleader.gov/Calendar/113thCongressSecondSession.pdf Jan 2014 ++]

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Senate Calendar ► 2014 Tentative Schedule

The Senate works a little differently. A legislative day often stretches beyond the boundaries of the 24-hour workday day and sometimes week. That doesn't mean the Senate is meeting around the clock. It just means that a legislative session merely recesses but doesn't adjourn after a day's work. When Congress has recessed, business has been put "on hold."

DICK DURBIN
Assistant Majority Leader

JOHN CORNYN
Republican Whip

UNITED STATES SENATE
113th Congress, 2nd Session

2014

TENTATIVE SCHEDULE

JANUARY	FEBRUARY	MARCH
S M T W T F S	S M T W T F S	S M T W T F S
1 2 3 4	1	1
5 6 7 8 9 10 11	2 3 4 5 6 7 8	2 3 4 5 6 7 8
12 13 14 15 16 17 18	9 10 11 12 13 14 15	9 10 11 12 13 14 15
19 20 21 22 23 24 25	16 17 18 19 20 21 22	16 17 18 19 20 21 22
26 27 28 29 30 31	23 24 25 26 27 28	23 24 25 26 27 28 29
		30 31

APRIL	MAY	JUNE
1 2 3 4 5	1 2 3	1 2 3 4 5 6 7
6 7 8 9 10 11 12	4 5 6 7 8 9 10	8 9 10 11 12 13 14
13 14 15 16 17 18 19	11 12 13 14 15 16 17	15 16 17 18 19 20 21
20 21 22 23 24 25 26	18 19 20 21 22 23 24	22 23 24 25 26 27 28
27 28 29 30	25 26 27 28 29 30 31	29 30

JULY	AUGUST	SEPTEMBER
1 2 3 4 5	1 2	1 2 3 4 5 6
6 7 8 9 10 11 12	3 4 5 6 7 8 9	7 8 9 10 11 12 13
13 14 15 16 17 18 19	10 11 12 13 14 15 16	14 15 16 17 18 19 20
20 21 22 23 24 25 26	17 18 19 20 21 22 23	21 22 23 24 25 26 27
27 28 29 30 31	24 25 26 27 28 29 30	28 29 30
	31	

OCTOBER	NOVEMBER	DECEMBER
1 2 3 4	1	1 2 3 4 5 6
5 6 7 8 9 10 11	2 3 4 5 6 7 8	7 8 9 10 11 12 13
12 13 14 15 16 17 18	9 10 11 12 13 14 15	14 15 16 17 18 19 20
19 20 21 22 23 24 25	16 17 18 19 20 21 22	21 22 23 24 25 26 27
26 27 28 29 30 31	23 24 25 26 27 28 29	28 29 30 31
	30	

(Red days = Senate not in session)

2ND SESSION CONVENES—JANUARY 6TH, 2014
TARGET ADJOURNMENT—TO BE DETERMINED

[Source: http://www.senate.gov/legislative/resources/pdf/2014_calendar.pdf | Jan 2014 ++]

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Vet Bills Submitted to 113th Congress ► As of 13 OCT 2014

For a listing of Congressional bills of interest to the veteran community introduced in the 113th Congress refer to this Bulletin's "**House & Senate Veteran Legislation**" attachment. Support of these bills through cosponsorship by other legislators is critical if they are ever going to move through the legislative process for a floor vote to become law. A good indication of that likelihood is the number of cosponsors who have

signed onto the bill. Any number of members may cosponsor a bill in the House or Senate. At https://beta.congress.gov you can review a copy of each bill's content, determine its current status, the committee it has been assigned to, and if your legislator is a sponsor or cosponsor of it by entering the bill number in the site's search engine. To determine what bills, amendments your representative/senator has sponsored, cosponsored, or dropped sponsorship on go to:

- https://beta.congress.gov/search?q=%7B%22source%22%3A%5B%22legislation%22%5D%7D
- Select the 'Sponsor' tab, and click on your congress person's name.
- You can also go to http://thomas.loc.gov/home/thomas.php

Grassroots lobbying is the most effective way to let your Congressional representatives know your wants and dislikes. If you are not sure who is your Congressman go to https://beta.congress.gov/members. Members of Congress are receptive and open to suggestions from their constituents. The key to increasing cosponsorship support on veteran related bills and subsequent passage into law is letting legislators know of veteran's feelings on issues. You can reach their Washington office via the Capital Operator direct at (866) 272-6622, (800) 828-0498, or (866) 340-9281 to express your views. Otherwise, you can locate their phone number, mailing address, or email/website to communicate with a message or letter of your own making at either:

- http://www.senate.gov/general/contact_information/senators_cfm.cfm
- http://www.house.gov/representatives

Tentative 2014 Legislative Schedule 113th Congress, 2nd Session: The below list identifies the remaining expected non-legislative periods (days that the Senate *will not* be in session)

Date	Action	Note
Target Adjournment Date	TBD	

FOLLOWING IS A SUMMARY OF VETERAN RELATED LEGISLATION INTRODUCED IN THE HOUSE AND SENATE SINCE THE LAST BULLETIN WAS PUBLISHED:

- None – House and Senate in recess.

[Source: https://beta.congress.gov & http: //www.govtrack.us/congress/bills Oct.13, 2014 ++]

* Military *

Military Holiday Mailing 2014 ► Deadlines

The Naval Supply Systems Command's (NAVSUP) mail-by dates for pre-Dec. 25 deliveries of holiday cards, letters, and packages were released 15 SEP.

For mail addressed to/from:
APO/FPO/DPO AE zips 090-098 (except 093); AA zips 340; AP zips 962-966

- Priority Express Mail Military Service: Dec. 17
- First-Class and Priority Mail (letters/cards and packages): Dec. 10
- Space Available Mail: Nov. 26
- Standard Post Mail: Nov. 8

APO/FPO/DPO AE ZIP 093

- Priority Express Mail Military Service: N/A
- First-Class and Priority Mail (letters/cards and packages): Dec. 3
- Space Available Mail: Nov. 26
- Standard Post Mail: Nov. 8

Domestic Mail (For Ships in Port and Personnel on Shore Duty in the U.S. mailing to U.S. destinations-not including APO/FPO)

- First-Class Mail: Dec. 20
- Priority Mail: Dec. 20
- Priority Express Mail: Dec. 23

International Africa, Central and South America First-Class Packages and Priority Mail addressed should be mailed no later than Dec. 2.

International Asia/Pacific Rim; Australia/New Zealand; Canada; Caribbean; Mexico, Europe; and Middle East. First-Class Packages and Priority Mail should be mailed no later than Dec. 9.

Priority Express Mail Military Service (PEMMS). Available from selected military post offices. If mailing to an APO/FPO/DPO address, check with your local post office to determine if PEMMS service is available and specific delivery service standards.

Space Available Mail (SAM). Refers to parcels mailed to APO/FPO addresses at parcel post rates first transported domestically by surface, then to overseas destinations by air on a space available basis. The maximum weight and size limits are 15 pounds and 60 inches in length and girth combined. From overseas locations, items mailed at Standard Post rates are sent to CONUS by air on a space available basis. The maximum weight and size limits are 70 pounds and 130 inches in length and girth combined.

All classes of mail addressed to FPO addresses must contain the proper nine-digit ZIP code or the New Navy Standardized Address format, which includes ship or mobile unit number, (or PSC number for ashore FPOs), virtual mail box number, and five-digit ZIP code to ensure delivery. Mail not addressed correctly could be returned to sender as undeliverable. It is recommended customers check with local civilian or military post offices for information regarding size restrictions and customs declaration form requirements. Customers are advised mailing restrictions apply and some items cannot be mailed. Examples of non-mailable items are: alcohol, switchblade knives, pornography, controlled substances, and explosive or incendiary devices. If in doubt, contact your local civilian or military post office. As a final note, customers

should ensure articles are packaged properly for mailing and packages do not display markings related to any type of hazardous material, such as bleach, alcohol, or cleaning fluids. Parcels found by U.S. Postal Service with such markings or labels on the outside of the box will not be processed.

The NAVSUP and Navy Supply Corps team share one mission-to deliver sustained global logistics capabilities to the Navy and Joint warfighter. NAVSUP/Navy Supply Corps' diverse team of more than 25,000 civilian and military personnel oversee a diverse portfolio including supply chain management for material support to Navy, Marine Corps, joint and coalition partners, supply operations, conventional ordnance, contracting, resale, fuel, transportation, security assistance, and quality of life issues for the naval forces, including food service, postal services, Navy Exchanges, and movement of household goods. The NAVSUP/Navy Supply Corps team forms a vast network of professionals who deliver unparalleled products and services to customers in the fleet and across the world. [Source: NAVSUP Office of Corporate Communications Sept. 15, 2014 ++]

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MXT135 Rifle ► Counter Defilade Target Engagement System

The MXT135 Counter Defilade Target Engagement System has a range of roughly 7,800 feet - and is to be deployed in Afghanistan soon. I would call it the "Equalizer." Some call it the "Punisher". The rifle's gun sight uses a laser range finder to determine the exact distance to the obstruction, after which the soldier can add or subtract up to 10 meters from that distance to enable the bullets to clear the barrier and explode above or beside the target. Soldiers will be able to use them to target snipers hidden in trenches rather than calling in air strikes. The 35-millimeter round contains a chip that receives a radio signal from the gun sight as to the precise distance to the target. Lt. Col. Christopher Lehner, project manager for the system, described the weapon as a 'game-changer' that other nations will try and copy. The Army plans to buy 42,500 of the MXT135 rifles this year, enough for every member of the infantry and Special Forces, at a cost of $11,900.00 each.

Lehner told Fox News: "With this weapon system, we take away cover from [enemy targets] forever. Tactics are going to have to be rewritten. The only thing we can see [enemies] being able to do is run away."

Experts say the rifle means that enemy troops will no longer be safe if they take cover. The MXT135 appears to be the perfect weapon for street-to-street fighting that troops in Afghanistan have to engage in, with enemy fighters hiding behind walls and only breaking cover to fire occasionally. The weapon's laser finder would work out how far away the enemy was and then the U.S. Soldier would add one meter using a button near the trigger. When fired, the explosive round would carry exactly one meter past the wall and explode with the force of a hand grenade above the Taliban fighter. The army's project manager for new weapons, Douglas Tamilio, said: "This is the first leap-ahead technology for troops that we've been able to develop and deploy."

A patent granted to the bullet's maker, Alliant Tech systems, reveals that the chip can determine how far it has traveled. Mr. Tamilio said: "You could shoot a Javelin missile, and it would cost about $69,000. These rounds will end up costing $45.00 apiece." They're relatively cheap. Lehner added: "This is a game-changer. The enemy has learned to get cover, for hundreds if not thousands of years. Well, they can't do that anymore. We're taking that cover from them and there's only two outcomes: We're going to get you behind that cover or force you to flee." The rifle will initially use high-explosive rounds, but its makers say that it might later use versions with smaller explosive charges that aim to stun rather than kill.

Bullet which can be pre-programmed to explode to hit troops that are hiding

[Source: http://www.blogster.com | Skipper12383's Blog | Dec 14, 2013 ++]

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Robotic Cargo Movers Update 01 ► Driverless Vehicle Technology

The Army and Marine Corps are pursuing futuristic driverless vehicle technology that would free troops to do other things like watch for ambushes and roadside bombs. The military is on the road to 2025, the notional date for Army Tank-Automotive Research, Development and Engineering Center (TARDEC) to roll out tactical vehicles that drive themselves as part of the Autonomous Mobility Appliqué System (AMAS). The effort is taking a page from commercial automakers working on cars that stay in their lanes and navigate traffic with nobody driving, and Google, which says it plans to field such a car in 2017. “AMAS is a great capability ... probably — in fact, I’m sure of this — better than Google Car,” said Col. Chris Cross, chief of the science and technology division at the Army Capabilities Integration Center. TARDEC Director Paul Rogers said its driver-assist technology could be an Army program next year, and two years after that “we could pull the soldier completely out of the vehicle.”

AMAS, developed by Lockheed Martin, is a system that attaches to vehicles and uses a combination of radar and a lidar to read the road surface, lanes and curves of the road, as well as fixed or moving obstacles like pedestrians and cars, Rogers said. A “drive-by-wire” kit takes control of the steering, acceleration and brakes, interacting with the sensors to stop when it senses an obstacle and determining whether it is safe to

continue. The system is pre-programmed to follow a path, anticipate movement, or to follow the vehicle in front if it is part of a convoy. Demonstrations involved seven vehicles, including the Family of Medium Tactical Vehicles and the Medium Tactical Vehicle Replacement.

A convoy of PLS and M915 Army trucks gets a test at Fort Hood, Texas. Testers were sometimes in the driver seats, but the vehicles were operated robotically.

In June, Lockheed demonstrated the drive-by-wire capability with a driver in the vehicle, as well as driverless vehicles operating in convoys at up to 40 miles per hour. A vehicle equipped with AMAS avoided a moving dummy on a sled that crossed its path. It has also paused for oncoming traffic before making a turn. Army officials say the point is not to replace them, but free them up to participate in missions outside the vehicle, or watch the road and conduct map reconnaissance inside the vehicle. Cross likened a driver of one of these vehicles to a fighter pilot who spends 10 to 15 percent of his time flying his aircraft and the rest of the time in the fight. The system has not mastered backing up or complex maneuvers, like K-turns. The developer must ensure it is ready for unstructured environments with other drivers or children running in the street.

Troops may see the technology in easy environments like warehouses and military installations before it appears on the battlefield. “That’s very doable today, but in a military or unstructured environment, the challenge becomes much more significant,” Rogers said. “We’re looking at how to make our systems robust so that they’re able to operate in more of these unstructured environments.” The Army has some key questions to answer, say Cross and Rogers. Will soldiers accept and adopt the technology? Will it make their jobs easier or make them more effective? If the technology doesn’t need a driver but needs four maintainers, is it worth it? And the technology is ahead of the law in most states. “We’re collecting information from [soldiers] about whether it works,” Rogers said of an upcoming user evaluation in August. [Source: ArmyTimes | Joe Gould | Jul 21, 2014 ++]

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Military Trivia 94 ► **America's War Horse | Sgt. Reckless**

The young filly showed great promise every time she ran a race. Many believed she would be a prize winner. But she never got the chance. In June 1950, North Korean troops stormed across the border between South Korea in a surprise attack that changed life on the Korean Peninsula. It also brought the sport of horseracing to a standstill. With no races to run, owning racehorses became a financial liability for their owners. Like many others, she was abandoned at the Seoul racetrack. A young Korean stable boy named Kim Huk Moon took over feeding, watering and grooming her. In October 1952 some U.S. Marines from the 5th Marines' Anti-Tank Company's Recoilless Rifle Platoon discovered the young filly and

decided she'd be valuable for carrying supplies into combat. The platoon leader, Lt. Eric Pederson, paid $250 of his own money to buy her. The only reason Kim sold his beloved horse was so he could buy an artificial leg for his older sister, Chung Soon, who lost her leg in a land mine accident.

Because she would be transporting the Recoilless Rifle into battle, the Marines decided she be named Reckless. During her training, she quickly became a unit mascot and allowed to roam freely through camp. On cold nights she slept in the Marine's tents. She was known to eat anything and everything. Among her favorites were scrambled eggs and pancakes in the morning washed down with a fresh cup of coffee. She also loved sweets of all kind: cakes, cookies, even the hard chocolate bars that came with C-rations. When she got bored she was known to eat blankets, hats, even poker chips. But her bravery under fire and her innate intelligence in numerous battles made her a hero. Learning each supply route after only a couple of trips, she often traveled to deliver supplies to the troops on her own, without benefit of a handler.

One of Reckless' finest hours came during the Battle of Outpost Vegas in March of 1953. This particular battle, according to one writer "was to bring a cannonading and bombing seldom experienced in warfare ... twenty-eight tons of bombs and hundreds of the largest shells turned the crest of Vegas into a smoking, death-pocked rubble." Reckless was in the middle of all of it. In a single day during the battle, she made 51 trips on her own, carrying over 9,000 pounds of ammunition and walked over 35 miles through open rice paddies ignoring the sounds of battle as artillery exploded around her. When she returned to the ammo dump, she often carried wounded soldiers down the mountain to safety, unload them, get reloaded with ammo, and off she would go back up to the guns and the din of battle. She also provided a shield for several Marines who were trapped trying to make their way up to the front line. Wounded twice, she didn't let that stop or slow her down from carrying out her duties.

She was given the battlefield rank of corporal in 1953, and then a battlefield promotion to sergeant in 1954, several months after the war ended. She also became the first horse in the Marine Corps known to have participated in an amphibious landing. Her military decorations include two Purple Hearts, Good Conduct Medal, Presidential Unit Citation with star, National Defense Service Medal, Korean Service Medal, United Nations Service Medal, Navy Unit Commendation, and Republic of Korea Presidential Unit Citation, all of which she wore proudly on her red and gold blanket. Sgt. Reckless was a household name in the 1950s earing her media coverage that rivaled attention bestowed on other famous animals, including Lassie and Seabiscuit. Her wartime service record, featured in The Saturday Evening Post, and LIFE magazine, recognized her as one of America's 100 all-time heroes, alongside George Washington and Abraham Lincoln.

When the war ended in 1953, she was retired and brought to the United States to live out her retirement years at Camp Pendleton. Her popularity continued where she made appearances on television and participated in the United States Marine Corps birthday ball. A horse so heroic during the Korean War, she was officially promoted to staff sergeant in 1959 by Gen. Randolph McC Pate, the Commandant of the Marine Corps. Seventeen hundred Marines marched in her honor during her promotional ceremony. Sgt.

Reckless was well cared for and treated as a VIP during her time at Camp Pendleton where she produced four foals. She developed arthritis in her back as she aged and injured herself on July 13, 1968, by falling into a barbed wire fence. She died under sedation while her wounds were being treated. At the time of her death, she was estimated to be 19 or 20 years old.

Although so famous in her day, she is mostly forgotten by history. Author and screenwriter Robin Hutton is doing something about that. Upon hearing the horses' story for the first time, she got goose bumps. She is quoted as having said, "When I first heard of her story eight years ago, the first thing that came to my mind was why haven't heard of this horse before? She should have had at least three movies done on her. But when I Googled her name, there was nothing on her. It was a travesty and I started writing a screenplay and later the book 'Sgt. Reckless America's War Horse.'" The book is due out in August. Documentary filmmaker Victoria Racimo is marketing it to HBO. Racimo's short documentary of Sgt. Reckless was shown at the 2014 Kentucky Derby and together with Hutton they succeeded in having a race named and run in her honor during the 8th race at Kentucky Oaks. Robin Hutton also led the effort to see Sgt. Reckless immortalized in bronze. "I just thought she needed to have a monument so people would forever know who she was," Hutton said.

A statue by sculptor Jocelyn Russell of Sgt. Reckless carrying ammunition shells and other combat equipment was unveiled on Friday, July 26, 2013, in Semper Fidelis Memorial Park at the National Museum of the Marine Corps, one day before the 60th anniversary of the Korean War. There is a lock of her tail hair in the base of the statue.

[Source: TogetherWeServed July 2014 ++]

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The President of the United States in the name of The Congress
takes pleasure in presenting the
Medal of Honor Posthumously
To

THORNE, Horace Martin

Rank and organization: Corporal, U.S. Army, Troop D, 89th Cavalry Reconnaissance Squadron, 9th Armored Division
Place and date: Place and date: Near Grufflingen, Belgium, 21 December 1944
Entered service at: Entered service at: Keyport, N.J. March 1941
Born: Sep. 29, 1918, Keansburg, N.J.

Citation

He was the leader of a combat patrol on 21 December 1944 near Grufflingen, Belgium, with the mission of driving German forces from dug-in positions in a heavily wooded area. As he advanced his light machinegun, a German Mark Ill tank emerged from the enemy position and was quickly immobilized by fire from American light tanks supporting the patrol. Two of the enemy tankmen attempted to abandon their vehicle but were killed by Cpl. Thorne's shots before they could jump to the ground. To complete the destruction of the tank and its crew, Cpl. Thorne left his covered position and crept forward alone through intense machinegun fire until close enough to toss 2 grenades into the tank's open turret, killing 2 more Germans. He returned across the same fire-beaten zone as heavy mortar fire began falling in the area, seized his machinegun and, without help, dragged it to the knocked-out tank and set it up on the vehicle's rear deck. He fired short rapid bursts into the enemy positions from his advantageous but exposed location, killing or wounding 8. Two enemy machinegun crews abandoned their positions and retreated in confusion. His gun Jammed; but rather than leave his self-chosen post he attempted to clear the stoppage; enemy small-arms fire, concentrated on the tank, killed him instantly. Cpl. Thorne, displaying heroic initiative and intrepid fighting qualities, inflicted costly casualties on the enemy and insured the success of his patrol's mission by the sacrifice of his life

Born in Keansburg, New Jersey, Thorne grew up on a 53-acre (0.21 km2) farm in the nearby North Middletown section of Middletown Township. He and his eight siblings attended Port Monmouth Elementary School and Leonardo High School. Thorne joined the Army from Keyport, New Jersey, in March 1941and by December 21, 1944, was serving as a corporal in Troop D, 89th Cavalry Reconnaissance Squadron, 9th Armored Division. On that day, near Grufflingen (now part of Burg-Reuland), in Belgium, he voluntarily took up an exposed position on top of a destroyed tank in order to better fire on the German forces. He killed several Germans and scattered the crews of two enemy machine-gun nests before being killed himself. He was posthumously awarded the Medal of Honor nine months later, on September 19, 1945.

Thorne, aged 26 at his death, was originally buried in a Belgian forest. His remains were later returned home and interred at Fair View Cemetery in Middletown, New Jersey. Thorne Middle School in Middletown was named in his honor in the 1960s; the school is home to a display which includes photographs of Thorne, his Medal of Honor, and the original award citation.

[Source: http://en.wikipedia.org/wiki/Horace_M._Thorne & www.history.army.mil/html/moh/wwII-t-z.html Oct 2014 ++]

Aviation Art 74 ► Alabama Rammer Jammer

Alabama Rammer Jammer

by Jim Laurier

P-51D Mustang s/n 44-15092 SX-B 'Alabama Rammer Jammer' flown by Lt. Arthur C Cundy of the 352nd FS, 353rd FG. On January 14, 1945, Cundy's 352nd Fighter Squadron was supporting a bombing mission to Germany. B-17s of the 91st Heavy Bombardment Group were to bomb various highway bridges in Cologne. Due to an instrument failure the High Bomb Squadron bombed a target of opportunity at Jocketa located about four miles NE of Plaue. The target was a junction of two main rail road lines over a river and ravine. Results were excellent. AA fire was nil in the target area. Enemy aircraft were encountered near the target area and in the ensuing air combats, one B-17 and two P-51s were lost. U.S. fighters claimed nine enemy aircraft destroyed and five damaged. Lt. Cundy claimed one Fw-190 destroyed on this date.

On March 2, 1945, Cundy claimed 2 more Fw-190s and one Me-109 to become an ace. Lt. Cundy was killed a few days later on March 11 1945 when he crashed into the English Channel while heading out on another mission. Lt. Arthur C. Cundy was a fine fighter pilot, a gentleman of the South, and one of many whose life was cut short in the calamity of World War Two.

[Source: http://www.aviationarthangar.com/alrajabyjiml.html Oct 2014 ++]

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Bataan Death March Update 05 ► Aging Vets Remember Torment

It's been 72 years since the Bataan Death March. Pedro Pineda, 94, thinks he might be ready to start talking about it. "Here is something I cannot forget," he said in mid-MAY while meeting with fellow veterans in a San Francisco apartment. "During this march, we had a short rest by an artesian well. We were so thirsty. But the Japanese sentries changed their mind, and told us to go back. On the way back, they bayoneted this guy ..."Oh my gosh, I saw that," he said, tears rolling down his cheeks and his fists clenched. "I never talked about it. But it happened. I saw it." Pineda, a retired cardio technician from Daly City, isn't the only one who rarely speaks of the infamous World War II massacre in the Philippines, a scorching, 63-mile trek Japanese soldiers forced upon 78,000 American and Filipino prisoners of war following the Battle of Bataan.

This picture, captured from the Japanese, shows American prisoners using improvised litters to carry those of their comrades who, from the lack of food or water on the march from Bataan, fell along the road." Philippines, May 1942.

The incident is rarely taught in schools and is often overlooked in war retrospectives, in part because it was among the worst defeats in U.S. military history and in part because of the sheer horror of what the soldiers endured. But a Berkeley woman is trying to change that. Cecelia Gaerlan has launched a nonprofit, Bataan Legacy, to educate younger generations about the sacrifices and courage of Bataan soldiers. She visits schools, lobbies for Bataan to be included in textbooks, and on 26 MAY hosted a reunion for Bataan survivors at the Philippine Consulate in San Francisco."These soldiers gave so much, but people just don't know. That's the double tragedy of Bataan," said Gaerlan, whose father, Luis, 94, is a Bataan survivor. "These men are now in their 90s. Time is of the essence."

The Bataan Death March was in April 1942, four months after Japan attacked Pearl Harbor. As a U.S. territory, the Philippines was an early and central player in the war's Pacific Theater, and thousands of Filipino soldiers fought the Japanese under the leadership of Gen. Douglas MacArthur. With much of Southeast Asia under attack by the Japanese, MacArthur's plan was to hold tough on the Bataan peninsula and, after the arrival of supplies and reinforcements, attack north from there. But the Japanese blockaded Bataan, and thousands of American and Filipino troops were left stranded without food or medicine. After a three-month siege in which 10,000 American and Filipino troops died, the U.S. surrendered. The Japanese then marched the prisoners of war - who were severely weakened from hunger and malaria - across the jungle to an internment camp. During the march, Japanese soldiers executed, bayoneted and tortured thousands of prisoners. To survive, the prisoners ate grass, maggots, worms and crickets. They sucked water off guava leaves. How they survived is a mystery, still. "I don't know why we lived. Luck? Something," Pineda said.

Proculo Bualat, 96, of San Francisco survived, then went on to endure months at the internment camp, where he worked burying the bodies of his cohorts, and then three years performing slave labor in a manganese mine before escaping. He's almost never spoken of those years, his wife Johanna said, but a few memories have stayed with him: that once, while on burial detail, he almost shoveled dirt over a soldier who was still alive; and that the worms that infested a deep wound on his leg probably kept him alive, because they kept away infection. Bualat went on to serve more than 20 years in the U.S. Army before finally retiring as a mechanic with the U.S. Postal Service.

POWs on the Bataan Death March. Along the March these prisoners were photographed, they have their hands tied behind their backs. The March of Death was about May 1942, from Bataan to Cabanatuan, the prison camp.

David Tejada, 91, of Daly City started talking about his Bataan experiences a few years ago, after he sought treatment through the Veterans Administration for post-traumatic stress disorder. Talking to other veterans has been enormously helpful, he said. He saw pregnant women bayoneted, girls raped, friends and relatives executed, and countless others starved to death. But it's not those incidents that gave him nightmares in later years, or what drove him to seek help. It was a brief incident on a boxcar at the end of the march. He was jammed on the train with more than 100 other men, packed so tightly and in such excruciating heat that many died on the train, wedged among their fellow prisoners. The train slowed for a minute, and a woman ran over with a basket of cooked chicken. She gave it to Tejada and said, "Can you give this to my son?" "I grabbed it and 100 other guys also grabbed it," he said, his face wincing at the memory. "I took two pieces and gave the rest to the group. I never gave it to her son. I didn't even know who her son was. But I felt so guilty - I thought maybe he died because I never found him. I had nightmares about that for 40 years. "But then the psychologist at the VA said I didn't need to feel guilty any more," he said. "He said I probably saved

my own life. ... I think we all just wanted to survive." [Source: San Francisco Chronicle | Carolyn Jones | May 26, 2014 ++]

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Military History ► Allegheny Arsenal Explosion

On September 17, 1862, seventy-eight girls and young women were killed in an explosion at the Allegheny Arsenal in the Lawrenceville section of Pittsburgh, Pennsylvania - the worst civilian disaster of the Civil War. The deaths of these young women were given little press coverage because the Battle of Antietam was fought the same day. The cause of the Arsenal explosion has never been fully determined. But an eye witness account attributed it to be a spark from a horses' hoof. To learn more of this event refer to the attachment to this Bulletin titled, "**Allegheny Arsenal Explosion".** [Source: Civil War Women | Maggie MacLean | Apr 04, 2014 ++]

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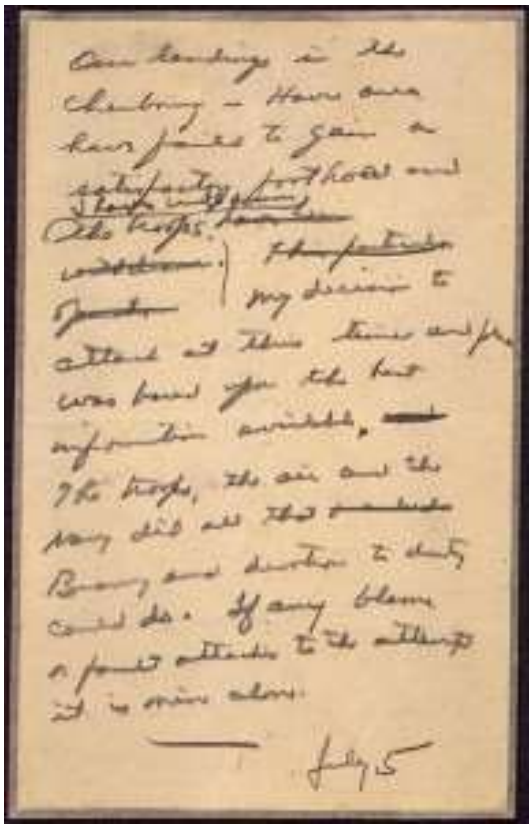
D-Day ► Eisenhower & Churchill Feared Defeat



In case the Nazis won

General Eisenhower prepared a letter that was to be opened in the event of the invasion's defeat. It reads "Our landings in the Cherbourg-Havre area have failed to gain a satisfactory foothold and I have withdrawn

the troops. My decision to attack at this time and place was based upon the best information available. The troops, the air and the Navy did all that bravery and devotion to duty could do. If any blame or fault attaches to the attempt it is mine alone." He dated the letter July 5 instead of June 5, a simple error from a man under extreme pressure. The contingency letter was labeled "In case the Nazis won."

Winston Churchill knew defeat all too well. It was his decisions that resulted in the deaths of as many as 58,000 French and British troops during the Gallipoli campaign during WWI. Churchill was removed from his position as First Admiralty of the Navy and the botched invasion weighed so heavily on him that he volunteered to serve in the trenches on the western front. The invasion of Normandy brought back all too familiar feelings of sending men to their deaths. The charismatic and confident leader confided in his wife on the night of June 5, "Do you realize that by the time you wake up in the morning 20,000 men may have been killed?" [Source: VAntage Point | Tim Hudak | Jun 06, 2014 ++]

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WWII PostWar Events ► Hermann Goering Mug Shot Nov 1945

Hermann Goering, once the leader of the formidable Luftwaffe and second in command of the German Reich under Hitler, appears in a mug shot on file with the Central Registry of War Criminals and Security Suspects in Paris, France, on November 5, 1945. Goering surrendered to U.S. soldiers in Bavaria, on May 9, 1945, and was eventually taken to Nuremburg to face trial for War Crimes.

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Military History Anniversaries ► 16 Oct thru 14 Nov

Significant events in U.S. Military History over the next 30 days are listed in the attachment to this Bulletin titled, "**Military History Anniversaries 16 Oct thru 14 Nov**".

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Spanish American War Images 46 ► Rough Riders Tampa FL

Captain Curry of the Rough Riders: Tampa, Florida, 1898.

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WWI in Photos 113 ► Battleground Casualty in 1915

An Austrian soldier, dead on a battleground, in 1915.

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Faces of WAR (WWII) ►

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Military Kits ► **1815 Battle of Waterloo | Private Soldier**

Personal equipment carried by the common British soldier:

1. 1812 pattern Belgic Shako as worn by a center company soldier of the Coldstream Guards during the Battle of Waterloo in 1815. It has white worsted woolen cap cords and tassels, a brass cap plate bearing a Coldstream star in the center, a black leather cockade worn on the left hand side red and white feathered plume to indicate that the wearer is from a center company. If the soldier was from the Grenadier Company he would wear a white plume and from the Light Company a Green plume
2. Fingerless woolen gloves
3. Soldiers red short coat bearing the rank of Corporal, it was lined with course linen and had Royal Blue facings, white worsted lace pewter buttons in two's as is the custom for the Coldstream Guards.
4. Black linen stock and leather stock worn around the neck
5. White waistcoat jacket, which had thinner sleeves than the body and would be worn under the red short coat or on its own for fatigue or off duty wear around the camp.
6. Linen shirts and under garments
7. Black painted canvas knapsack which contained all the soldiers' personal equipment and possessions when on campaign, it bears the Star of the Garter with the words Coldstream Guards in the center scroll. On the top is a rolled Greatcoat and mess tins held in place by pipeclayed buff leather straps
8. Leather cartridge box which contained 60 rounds of pre-packed ball cartridge ammunition, it has a Coldstream Guards star fitted to it and was carried on the right hip by a pipeclayed buff leather shoulder belt. Also visible is the bayonet scabbard and crossbelt worn on the left side
9. Wooden bowl containing a day's ration of salted beef, rations would be carried in the linen haversack
10. Pewter mug
11. Hard tack biscuits and cheese, carried in the linen haversack
12. Knife, fork and spoon kept in a linen bag and a day's ration of bread
13. Linen haversack worn on the left hip
14. Soldier's games, draughts and a board made from a piece of tent canvas, a pack of cards and a wooden yo-yo
15. Grey woolen gaiters, with leather foot straps and pewter buttons
16. Woolen socks
17. Brass sundial compass
18. Straight lasted shoes. The leather was rough side out and as they were straight lasted there was no right or left shoe; soldiers were expected to swop them around to prevent excessive wear on one side
19. Leather pouch, containing coins, dice made from flattened musket balls
20. Pocket watch on a length of woven binding
21. Wooden water canteen on a leather strap worn on the left hip
22. Washing and shaving kit
23. Small mirror in a stout wooden frame
24. Bone hair comb and bone handled toothbrush with horsehair bristles
25. Clothes pegs

26. & 27. Greased paper containing 'black ball', a mixture of tallow, beeswax and soot, used to polish and help waterproof shoes and cartridge box.

28. Horse hair boot brushes and bristle cloths brush
29. Wooden button stick, used to polish buttons and prevent clothing being stained in the process
30. Tin containing finely ground brick dust, which was mixed with olive oil and used as a metal polish
31. Small bristle scrubbing brush
32. Sewing kit, containing linen and sinew thread, spare buttons, wooden thimble, wooden needle case and scissors
33. Fife, a small, high-pitched instrument, similar to the piccolo
34. Wooden cartridge block used to store ammunition

35. Tin container stored below the wooden block, used to store additional packs of ammunition and spare musket flints
36, 37, & 38. Flint, steel and tinder contained in a brass case and used to light fires
39. Tin container for gun oil
40. Gun tool and worm used to strip and reassemble the Brown Bess musket for cleaning and repair, it was a simple device made up of two screwdriver heads and pointed needle used to push out the metal pins holding the barrel to the stock, screwed onto the pin is a worm which could be screwed on to the ramrod and was used to help remove cleaning cloth or unfired charges from the barrel
41. Feather spring clamp, used to remove the frizzen from the lock
42. Ramrod puller, used to remove a ramrod stuck in the barrel or stock
43. Musket flint with a scrap of notched leather and a piece of notched lead either of which would be placed around the flint and then helped secure the flint in the hammer
44. Canvas case containing spare flints, stored in the cartridge box tin
45. Leather lock stall, used to place over the frizzen to protect it and prevent accidental sparking that could fire the weapon
46. 17" triangular socket bayonet which fitted onto the musket, the same fitting method was subsequently used for the modern electric light
47. Soldiers pen knife
48. Reading glasses
49. 1807. British Army drill regulations and leather covered notebook
50. Brown Bess musket was in service from 1722 to 1838 - some were even shipped to the Crimea in 1854. It weighed 4.8kg and was made up of three component parts the lock, stock and barrel. It had an effective range of 100 meters but was capable of firing to 250 meters. It fired a .75 musket ball made of lead, which was contained as part of a paper tube made from Cartridge Grade paper which contained gunpowder. The soldier would remove the cartridge from the cartridge box, bite off the end to release the powder, pour a small amount into the pan and the rest down the barrel. The now empty cartridge still attached to the musket ball would then be placed into the barrel as wadding and the ramrod used to ram it down. The musket would be cocked and was then ready to fire. When the trigger was pulled the hammer containing the flint would strike the frizzen, causing sparks to ignite the gunpowder in the pan and pass through the touch hole to ignite the main charge and fire the musket ball. A well drilled soldier was capable of firing 4 shots a minute

[Source: The Telegraph | Inventories of war | Aug 07, 2014 ++]

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* Health Care *

TRICARE Pharmacy Policy Update 17: **Compounded Medication Use**

Tricare spends $259 million a year on medications it is not obligated to cover and should align its policies on compounded medications with existing regulations or change those rules, a federal watchdog agency says. The Defense Department health program paid for 465,000 compounded medications in 2013, about one-third of 1 percent of all prescriptions covered by Tricare for the year, at a cost 50 times higher than it spent on compounded medications in 2004. According to the Government Accountability Office, the benefit — used largely by retirees and their family members, who filled more than 85 percent of all Tricare compounded prescriptions last year — is more generous than coverage for these prescriptions under either Medicare or the Veterans Affairs Department health system, and offers a prime opportunity for cost-savings.

Compounded medications are prescriptions formulated by pharmacists that usually combine an FDA-approved pharmaceutical with bulk ingredients — powders, creams or liquids — designed to meet an individual patient's needs, either by altering a dosage, eliminating an allergen or changing the medication's delivery method. Tricare announced in July 2013 that it would stop covering any compounded prescriptions containing ingredients not approved by the Food and Drug Administration. Tricare officials said they made the decision out of concern for patient safety — in 2012, 64 people died after receiving contaminated steroid injections compounded at a facility in Massachusetts — as well as legal restrictions that keep the military health system from paying for prescriptions containing unapproved ingredients. But the decision caused an uproar among Tricare beneficiaries who use compounded medications, prompting Congress to order a GAO analysis of the program.

In a report released earlier this month, GAO found that Tricare's coverage for these prescriptions skirts DoD's own regulations and contributes to rising costs. "Although compounded drugs account for only a small percentage of the drugs dispensed to Tricare beneficiaries in pharmacy settings, their costs have increased significantly over the past ten years ... notably higher than Tricare's overall increase in drug costs," GAO analysts found. "We recommend the Secretary of Defense align Tricare's payment practices for compounded drugs with applicable regulations governing the Tricare program. This may include considering whether to amend Tricare regulations to explicitly allow payment for some or all bulk drug substances in compounded drugs." According to the GAO, all of the top 25 most expensive compounded prescriptions issued to Tricare beneficiaries at retail pharmacies in 2013 were topical medications, and most were pain medications. The compounded medication at the top of the list was a combination of the pain medications ketamine and lidocaine with an anti-inflammatory and antidepressant and bulk ingredients, issued for 721 prescriptions at a cost of nearly $5.3 million. The average cost per prescription of the medications in the top 25 ranged from $848 to $9,961.

In an interview with Military Times earlier this year, Rob Gussenhoven, chief science officer at DermaTran, a company that makes prescription pain creams for patients, including 2,000 Tricare prescriptions, said that cutting reimbursements for compounded medications could save DoD money but also might cause more problems for patients. He said topical medications like the ones compounded by his company — and those determined by the GAO to be among the priciest compounded medications — often keep patients from taking other addictive and dangerous pain medications. "It's the wrong time to restrict access to compounded medications," Gussenhoven said. "In addition to overdoses and deaths, opioid [painkillers] can ... disrupt the neuroendocrine system, reduce testosterone production, magnify pain and depression and lead to suicide ideation."

In a written response to the GAO report, Assistant Secretary of Defense for Health Affairs Dr. Jonathan Woodson said DoD health officials are monitoring the FDA's changing regulations regarding compounded

medications and will take into account any decisions made by the FDA regarding compound medication rules. Woodson also noted that the proposed fiscal 2015 defense authorization bill includes a provision that would allow DoD to provide coverage of these compounds, and if approved, "may shape DoD's approach to compounded drugs." [Source: NavyTimes | Patricia Kime | Oct 10, 2014 ++]

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Health Care Reform Update 59 ► Avoiding the ACA Penalty

Tens of millions of Americans without health insurance risk being fined by the IRS as part of the Affordable Care Act, which imposes a tax penalty on those who didn't purchase medical insurance. If you didn't have health insurance in 2014, and you did not receive an exemption, you'll be fined 1 percent of your yearly household income (above the tax filing threshold, which is about $10,000 for an individual) or $95 per person ($47.50 per child younger than 18) up to $285. But tax experts say up to 20 million people are eligible for a waiver. According to Inuit, maker of TurboTax, there are 30 reasons you may be exempt from the tax penalty if you don't have health insurance. These are the top reasons for a tax exemption:

- Affordability. The lowest-priced health insurance available would cost more than 8 percent of your household income.
- Medical expenses. You had medical expenses you couldn't afford to pay in the last 24 months, which resulted in significant debt.
- Cancellation. You had insurance that was canceled, and the other plans were unaffordable.
- Utility shut-off. You received a notice for shut-off from a utility company.
- Difficulty signing up. You had issues signing up through your state or federal marketplace.

There are several other reasons you MAY be exempt from the tax penalty. According to Intuit: Exemptions are also available because of homelessness, incarceration, eviction, foreclosure, bankruptcy, the death of a close family member or an experience with domestic violence. Members of Native American tribes also are not required to sign up for health insurance. If you are uninsured and want to find out if you could be exempt from the tax penalty, you can in only a few minutes with the 'TurboTax Exemption Check' at https://turbotax.intuit.com/health-care/exemptions/#!/exemption-home#!%2Fexemption-home. You can also find information about tax exemptions at https://www.healthcare.gov/. [Source: MoneyTalksNews | Krystal Steinmetz | Oct. 09, 2014 ++]

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TRICARE Autism Care Update 11 ► DoD Caretaker Pay Cuts

Military families are concerned they could lose medical help for their autistic children because of planned spending cuts at the Pentagon. As part of an effort to reduce its healthcare costs, the Pentagon is planning to slash payments in half to providers who work with autistic children under TRICARE, the military's healthcare plan. Many healthcare providers are balking at the pay cuts, saying they won't be able to provide the services without the additional money. If they go through, providers say the services will disappear. That's sparked a panic among families that use the programs and their advocates. "These new changes to autism therapy could be game over for some of our military families around the country," said Amanda Kelly, a board certified behavior analyst who works with autistic children for Keiki Educational Consultants. The changes, announced in the Federal Register in June, are scheduled to take effect on Oct. 20.

The Pentagon says it is trying to simplify the autism program and insists these families will continue to have access to autism treatment under the new program. "Beneficiaries currently receiving (coverage) under an existing TRICARE policy will seamlessly transition to the Autism Care Demo with no gap in coverage and no increase in cost — there will be no changes to their current plan," said Maj. Gen. Richard W. Thomas, director of health operations for the Defense Health Agency, in a statement to The Hill. Healthcare providers, however, say that they have been shut out from the process and received little to no communication from TRICARE about how the changes will affect the autistic children they serve. They are worried that even if military families do not lose their TRICARE coverage under the changes, they may have problems with finding available healthcare providers to work with their autistic children. If providers cut back on their services due to the pay cuts, it will create a shortage of providers that could leave more than 1,100 autistic children without help, according to the survey from Navigation Behavioral Consulting.

Meanwhile, the remaining healthcare providers that continue working with autistic children say they would face new limitations in what skills they can teach them. "Even for those kids who are still getting services, they're greatly limiting what we're able to do with those children," said Megan Miller, a board certified behavior analyst with Navigation Behavioral Consulting. Previously, healthcare providers taught autistic children communication, social, behavioral, developmental, cognitive, mental health, motor, adaptive, academic and vocational skills, Miller said. But under the new rules, she said they will only be allowed to teach communication, social and behavior skills, restricting how much the autistic children can learn and grow. "I am very concerned regarding the restricted focus of services," said Mandy Farmer, whose son receives autism coverage from TRICARE. "My son is three years old and we are in the thick of it with potty training and focus. "I just can't believe they are making these decisions about treatment without consulting (health care professionals) on how this will affect our children," she added. An official from the Department of Defense explained all of these skills will still be covered, but they are being merged together in three broader categories. [Source: The Hill | Tim Devaney | Oct. 08, 2014 ++]

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TRICARE Autism Care Update 12 ► DoD Caretaker Pay Cuts Delayed

The Pentagon is delaying controversial healthcare spending cuts after hundreds of military families complained it would have left their autistic children without coverage, according to an official from the Department of Defense. Pentagon officials announced 8 OCT they are halting a plan to slash TRICARE payments in half for providers who work with autistic children. This comes after TRICARE providers warned they would stop treating more than 1,100 autistic children, because of the massive pay cuts. "The department understands the concerns caused by the rate change," an official from the Department of Defense told The Hill. "In order to address these concerns, the department has commissioned an independent view of the (program)." TRICARE officials began informing key congressional staffers Wednesday evening they

would delay the pay cuts until April 20, 2015 as they order an independent review of the changes. Other changes to the program will go into effect as scheduled later this month, the DOD official said.

The announcement came about an hour after The Hill published a story about the planned cuts. As part of an effort to reduce its healthcare costs, the Pentagon was planning to slash payments in half to providers who work with autistic children under TRICARE, the military's healthcare plan. The latest TRICARE manual, released in September, cut their pay from $125 a hour to between $50 and $68 an hour. Many healthcare providers balked at the pay cuts, saying they wouldn't be able to provide the services without the additional money. If they go through, providers said the services will disappear.

A survey of TRICARE providers who work with autistic children finds 95 percent of these providers planned to cut back on the services they offer, while 22 percent intended to stop working with military children altogether, if the changes go through. The study was conducted by Navigation Behavioral Consulting, a healthcare provider that works with autistic children. The proposed changes were announced in the Federal Register in June and scheduled to take effect on 20 OCT, before the delay pushed the deadline back to April. According to TRICARE documents, more than 7,800 military children received autism benefits in 2013. [Source: The Hill | Tim Devaney | Oct. 08, 2014 ++]

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DEERS Verification Update 01 ► Don't Forget to Update

The lives of service members and their families are full of transitions. Whether it's permanent change of station moves, retiring, going from Reserve status to active duty or something else, the one constant is change. The good news is that your TRICARE coverage can stick with you through these life changes, but you do have to make sure that your records in the Defense Enrollment Eligibility Reporting System (DEERS) are up to date with your latest life events. This means you should keep all your personal information – address, duty status, phone numbers, and email addresses – up to date. It's important to review DEERS as soon as possible whenever you move or experience one of the following life events:

- Activation
- Deactivation
- Separation or retirement
- Becoming Medicare eligible

Changing your contact information in DEERS is easy and can be done online at milConnect (http://www.dmdc.osd.mil/milconnect), by fax or mail, or in person at the nearest uniformed services identification (ID) card office. One thing you can't update yourself in DEERS is your duty status – only your Service can make those updates. Whenever you have a change in your duty status, check DEERS to make sure it's accurate. You can find your nearest ID card offices online with the RAPIDS Site Locator at www.dmdc.osd.mil/rsl/. Other life events that can affect your TRICARE eligibility and require you to update DEERS include:

- Marriage or divorce
- Birth or adoption of a child
- Change in a student's full-time enrollment status

Many DEERS updates require supporting documentation, including: marriage, birth, or death certificates, Medicare cards and Social Security Administration notification letters and orders or DD Forms214/discharge orders. A list is available at http://www.dmdc.osd.mil/rsl of required documentation for various types of

updates. Make sure to review the list and bring the appropriate documents with you, or you may not be able to make the updates you need. Go to http://www.tricare.mil/DEERS for more information on how to update DEERS information. [Source: TRICARE Communications Oct. 08, 2014 ++]

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Reserve/Guard Tricare Update 02 ► Family Options

As the family member of a National Guard or Reserve member, your TRICARE options may change throughout the course of your sponsor's career. Your TRICARE eligibility depends on your sponsor's military status. If your sponsor's status ever changes from inactive to either, pre-activation, active duty, or deactivation, your TRICARE options will vary. The first step in your family gaining TRICARE eligibility, is for your sponsor to register all eligible family members in the Defense Enrollment Eligibility Reporting System (DEERS) in person, at a uniformed services identification (ID) card issuing facility and provide the required documentation; also when making changes with the family's composition (i.e. marriage, birth, death, divorce). Updating personal information such as address, email addresses or phone numbers can be done by logging into MilConnect at https://myaccess.dmdc.osd.mil, calling 1-800-538-9552 (TTY/TDD: 1-866-363-2883), faxing updates to 1-831-655-8317, or mailing updates to Defense Manpower Data Center Support Office: Attn: COA, 400 Gigling Road Seaside, CA 93955-6771 **Note:** Addresses must be a physical address; P.O. boxes can't be used. For more information on DEERS and to keep your contact information up to date, visit .http://www.TRICARE.mil/DEERS.

If your sponsor is issued a delayed-effective-date active-duty order in support of a contingency operation for more than 30 consecutive days (pre-activation status), eligible family members may receive the same TRICARE benefits as active duty family members under Early Eligibility. TRICARE Standard coverage is automatically provided to those registered in DEERS. No enrollment is necessary! TRICARE Prime, TRICARE Prime Remote Active Duty Family Member (TPRADFM), TRICARE Young Adult and the US Family Health Plan are also available based on eligibility and/or geographical location. These programs require enrollment. Your family keeps active duty benefits when your sponsor transitions to active duty.

When your sponsor is deactivated, your family may qualify for either the Transitional Assistance Management Program (TAMP) or the Continued Health Care Benefit Program (CHCBP). TAMP is available to eligible Guard/Reserve members that served more than 30 consecutive days in support of a contingency operation, and offers 180 days of transitional health care benefits to service members and their families. Under TAMP, TPRADFM is not available. Visit http://www.TRICARE.mil/TAMP to learn more about TAMP. CHCBP is similar to COBRA health coverage, and CHCBP eligibility begins the day after you lose active duty TRICARE coverage or TAMP coverage ends. You must enroll in CHCBP within 60 days of losing TRICARE eligibility and pay quarterly premiums. Visit http://www.TRICARE.mil/CHCBP to learn more about CHCBP.

While your sponsor is inactive, he or she may qualify to purchase TRICARE Reserve Select (TRS) coverage. TRS is a great option for your family if your sponsor is a member of the Selected Reserve and is not eligible for or enrolled in the Federal Employees Health Benefits Program. TRS provides comprehensive health care coverage and allows you to see any TRICARE authorized provider. Visit to learn about TRS. http://www.TRICARE.mil/TRS. Your sponsor may qualify to purchase TRICARE Retired Reserve (TRR) coverage for your family upon entering the Retired Reserves and is under the age of 60. Visit to learn more http://www.TRICARE.mil/TRR about TRR.

Families of National Guard and Reserve members may also be eligible for the TRICARE Dental Program (TDP). Enrollment in TDP is voluntary, and your premiums are based on your sponsor's status. To see if TDP is right for you, visit http://www.TRICARE.mil/TDP. To maintain continuous healthcare coverage when your sponsor's status changes you will need to purchase/enroll by the specific deadlines specified by your respective health plans. To verify your eligibility and learn more about your benefits as the family member of a National Guard or Reserve member please visit http://www.TRICARE.mil/reserve . [Source: TRICARE Communications Oct. 06, 2014 ++]

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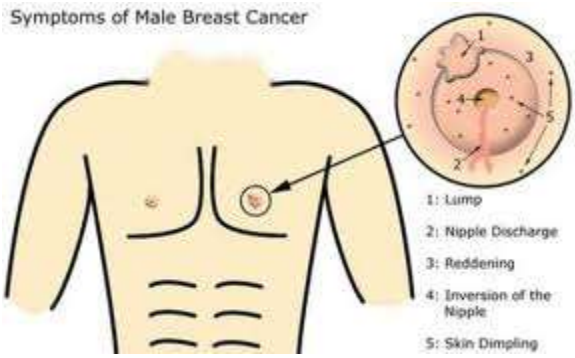
Male Breast Cancer ► On the Rise Among VA Patients

A recent study led by Dr. Anita Aggarwal, an oncologist at the Washington, DC, VA Medical Center, is the most extensive look yet at the prevalence of the disease among VA patients. She and her colleagues combed the VA Central Cancer Registry to learn more about how many men in VA have the disease and how it compares with breast cancer among female Veterans who receive care in VA. Aggarwal presented the findings at a meeting of the American Society for Clinical Oncology in early June. "In the general population, it's very rare," points out Aggarwal, noting that less than one percent of breast cancer cases occur in men. She says it's on the rise, though, with data showing a 26 percent increase from 1975 to 2010. Scientists don't yet have a handle on why that is, but they do know that men with breast cancer are typically diagnosed at a later stage than their female peers. "With men, there's a delay in detection," says Aggarwal. "There's less awareness, no screening. And men don't palpate their breasts every month, as do many women. All these factors combine."



Males have many similarities with female breast cancer. Men not only have breasts, but they also have milk ducts. And that's where the majority of male breast cancer originates. It's a form of the disease called invasive ductal carcinoma. And just as the BRCA genes, among others, can help predict which women are at risk for hereditary breast cancer, the same is true of men. It turns out that men who test positive for the BRCA 1 or BRCA2 mutations are also at higher risk. But men are far less likely to proactively get the test. Some do if they have a family history of breast cancer.

The similarities extend to treatment. As with women, surgery is one option, especially when the cancer is still localized to the breast and hasn't spread. "Because they only have a small amount of breast tissue, in most cases they end up getting a mastectomy [removal of the entire breast] instead of a lumpectomy [removal

of only the cancerous lump]," says Aggarwal. And although men and women have a different hormone mix, men do have some estrogen and progesterone. So men whose breast cancer is driven by those hormones can get hormone therapy similar to that given to women. The side effects, though, can be more troubling for men. "Men can get hot flashes from the hormone therapy and this is very distressing to them — they don't want to go out in public with this, because they see hot flashes as a woman's condition," says Aggarwal.

For men it is a tough medical and emotional battle "They get very distressed," she says. "In my experience, the first questions they will ask are, 'Why do I have breast cancer? Are you sure that's what it is?' They tend to get depressed and socially isolated." This is just one facet of the emotional turmoil that men with breast cancer may endure, suggests Aggarwal. The psychosocial aspects of the disease can be especially difficult for male Veterans when they also have posttraumatic stress disorder or another mental health condition. Fortunately, there is help on the emotional front. Aggarwal notes that at her VA medical center and others, support groups for breast cancer patients attract men as well as women. By the same token, men with breast cancer can attend general cancer support groups. Much of the information will be the same, and they still have the opportunity to bond with other men who face potentially life-threatening cancers whether prostate, lung, colon or other forms.

Aggarwal is now seeking to connect with oncologists and others in VA who work with breast cancer patients to do a more extensive study. "I would like to do a nationwide male breast cancer study," she says. "It would need to be a wide collaborative effort, since the total number of cases at any one VA or in any one region would be too small. We could look at epidemiology, chemical and radiation exposure, biology of the cancer and psychosocial factors." Another federal study is already underway, by the Agency for Toxic Substances and Disease Registry of the Centers for Disease Control and Prevention, to determine whether male breast cancer is linked to toxic exposures at Camp Lejeune in North Carolina, a Marine base where the water supply was chemically contaminated from the 1950s through the 1980s. The results are expected in 2015. Meanwhile, VA's Public Health website http://www.publichealth.va.gov/exposures/camp-lejeune has health care eligibility information for Veterans and family members who may have been affected. [Source: VHA Update | Mitch Mirkin | Oct. 02, 2014 ++]

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TRICARE Overseas Program Update 15 ► New Services Contract

The Defense Health Agency recently issued a Request for Proposals for a new health care support services contract supporting TRICARE beneficiaries living overseas. The new contract will provide a health care delivery system that integrates care at military clinics and hospitals with host nation provider networks to provide comprehensive health care for service members and their families stationed outside the United States. TRICARE provides health care to more than 450,000 active duty service members, their families, and other eligible beneficiaries living overseas. Living overseas can present unique challenges and TRICARE is there to ensure beneficiaries have the health care they need including:

- Clinical preventive services;
- Inpatient and outpatient care;
- Behavioral health care;
- Substance use disorder services;
- Maternity care; and
- Much more.

Regional call centers are available to assist beneficiaries obtain referrals and authorizations as well as coordinate emergency and urgent medical and dental care for active duty service members on temporary duty or leave overseas. Customer service is available 24/7 to assist beneficiaries with enrollments, general inquiries and transfers. Callers should chose option 4 to reach the global TRICARE service center to reach a representative. For 24/7 emergency medical assistance, eligible TRICARE beneficiaries can call International SOS, the current contractor, to locate the nearest emergency care facility or coordinate overseas emergency care. See http://www.tricare.mil/overseas for International SOS regional phone numbers.

Overseas beneficiaries also have access to TRICARE Service Centers (TSCs) typically located at military hospitals and clinics. TSCs are important resources to help beneficiaries learn about TRICARE program options, transfer enrollments, provide claims assistance, resolve TRICARE problems, and file grievances. For more information about getting health care when assigned to locations outside the United States, visit http://www.tricare.mil/overseas. TRICARE is dedicated to ensuring that beneficiaries living overseas get the health care they need, regardless of where they are located. [Source: TRICARE News Oct 02, 2014 ++]

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Health Care Reform Update 59 ► Things to Know for 2015

Are you ready for Round Two? In a little more than a month, the federal Health Insurance Marketplace will swing open its virtual doors and let the masses in. Hopefully, things will go a little smoother than last year. Here are some things you should know to help you in making a decision:

Open enrollment window for 2015 coverage - The upcoming open enrollment period applies only to those who are buying their own insurance. If you're one of the 53.9 percent of Americans who get their insurance through their workplace you'll still have your normal open enrollment period through your employer. However, for the 10.3 percent of the population who buy their own medical insurance, open enrollment on the government Health Insurance Marketplace begins 15 NOV. You'll have until 15 FEB to select your 2015 plan. However, to ensure your new plan kicks in on 1 JAN, the earliest date possible, you need to make your selection between 15 NOV and 15 DEC. Outside this three-month window, the only way to buy health insurance on the marketplace is if you become eligible for a special enrollment period. These enrollment periods are open to those who have experienced certain events, such as:

- Loss of employer-sponsored health insurance coverage.
- Marriage or divorce.
- Birth or adoption of a child.
- Relocation to outside the geographic area served by an individual's current medical insurance.

Penalty for failing to sign up - If you fail to sign up for health insurance coverage, you could be hit with a penalty at tax time. In 2014, the fee was the greater of 1 percent of your income or a per-person assessment that was capped at $285 per family. For penalties based upon income, only the amount above the tax filing threshold, $10,150 for an individual, is used in the calculation. However, those numbers will be going up in 2015. If you don't sign up for health insurance next year, expect to be paying the greater of 2 percent of your income above the tax filing threshold or $325 per adult and $162.50 per child for a maximum of $975 per family. For those who lacked coverage for only part of the year, the fee will be prorated. For example, an individual who went without health insurance for three months in 2014 will be assessed only 25 percent of the fee. Those who owed a fee in 2014 will have it assessed as part of their 2014 income taxes. Exemptions are available in certain situations, such as if you were without health insurance less than three months or the cost of the cheapest plan in your area exceeds 8 percent of your income.

Where to go for coverage - Most states have opted to let the federal government run their health insurance exchanges. However, even if you live in a state with its own marketplace, you can head to the federal website to be directed to your own state exchange. The federal website is https://www.healthcare.gov. If you used the website in 2014, you should be able to log in to your account to shop for new coverage starting 15 NOV. You can also call 800-318-2596 (expect a delay) and have a representative complete your application over the phone. Finally, there may be local organizations that can help with the application and enrollment process. To search for options in your area.you can go to https://localhelp.healthcare.gov.

What to look for in a policy - Assuming you're applying for health insurance on the marketplace for the first time, once you've completed your application, you should be presented with a number of health insurance plans from which to choose. These will be broken down into four tiers depending upon the level of coverage they provide. Check out our overview of the tiers for more details. Don't forget that you may be eligible for tax credits to subsidize premiums if you earn less than 400 percent of the federal poverty limit. In addition, those selecting a silver plan may be eligible for cost-sharing reductions that may lower co-payment amounts. Of course, premiums are only part of the picture. You also need to consider these factors when picking a plan:

- Deductible. The amount you must pay out of pocket before insurance coverage will kick in for non-preventive care.
- Co-payments. A flat amount you pay for certain services or items, such as office visits or prescription drugs.
- Coinsurance. Similar to co-pays, coinsurance is the percentage of a health care bill that is your responsibility.
- Network. Very few health insurance companies let you see any doctor you want nowadays. Most have a network of providers and facilities that participate with their health plans. Be sure your favorite doctors, hospitals and clinics are a part of a plan's network. Otherwise, you could be on the hook for your entire medical bill.

Advice for those who like the plan they chose last year - If you already have a plan you like from the 2014 open enrollment period, there's no need to log in or complete a new application. The Health Insurance Marketplace will automatically re-enroll you in your existing plan if you do nothing. In the event your insurer discontinues your plan, you'll be shifted to a similar plan. But before you decide to put your health insurance on autopilot, it might be wise to at least check out your options. According to the Kaiser Family Foundation, health insurance tax credits are calculated using the second-lowest silver-tiered plan as a benchmark. Individuals with more expensive plans must pay the full cost of the difference between their plan and that of the benchmark plan; that amount is not subsidized.
As a result, your premiums might go up significantly if your plan is no longer one of the cheapest options on the marketplace. To be safe, it might behoove you to spend a little time to see if and how your premium will be changing in 2015 and whether a better option is available.
[Source: MoneyTalksNews | Maryalene LaPonsie | Sept. 26, 2014 ++]

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Antibiotic-Resistant Bacteria ► On DoD's Radar

The Pentagon figures prominently in President Obama's new national plan to fight lethal, antibiotic-resistant bacteria. Under an executive order issued by the White House on 18 SEP, Obama outlined a national strategy to address the growing problem of illness and death caused by germs that can't be controlled with existing

medications. The order brings together seven Cabinet departments as well as other agencies to implement a five-year plan to address antibiotic overuse and misuse in the U.S., improve health surveillance of infectious diseases and develop new diagnostic tests and medications to treat bacterial infections. "The rise of antibiotic-resistant bacteria represents a serious threat to public health and the economy," Obama wrote. "Detecting, preventing, and controlling antibiotic resistance requires a strategic, coordinated, and sustained effort."

The secretaries of Defense, Health and Human Services, and Agriculture will serve as co-chairs of a 14-plus-member task force to oversee development and implementation of the plan. As part of the effort, the Pentagon will maintain a repository of resistant bacteria strains, update procedures for collecting, storing and cataloging germs, and continue its work through the Defense Threat Reduction Agency to develop new antibiotics and research experimental therapies for destroying bacteria. Antibiotic-resistant bacteria cause more than 2 million illnesses and 23,000 deaths in the U.S. each year, according to the Centers for Disease Control and Prevention. While the rates of methicillin-resistant Staphylococcus aureus, or MRSA, infections in the U.S. military dropped 31 percent from 2005 to 2010, these skin infections continue to plague recruits as well as troops engaged in physically rigorous training, with about one in 10 recruits getting a skin infection that can delay training or lead to separation, according to the Armed Forces Health Surveillance Center. And more than one-third of U.S. troops injured in Iraq and Afghanistan developed a bacterial or fungal infection as potentially life-threatening as their wounds.

DoD spends more than $40 million a year to support research and development of vaccines or medications to treat antibiotic-resistant illnesses as well as viruses that don't respond to any drugs. In an August telephone interview with reporters on the topic of antibiotic resistance, DoD infectious disease experts said the rise of drug-resistant bacteria and fungi pose a global threat that can't be ignored. "If it were easy to solve these problems, they would have been solved already," said Army Col. Michael Kozar, director for military infectious disease research at U.S. Army Medical Research and Materiel Command. "The good news is, it's getting a lot of attention," Kozar said. [Source: NavyTimes | Patricia Kime | Oct. 02, 2014 ++]

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TRICARE Communications ► No More Paper Letters

TRICARE beneficiaries need to watch their email and ensure they have a milConnect account to receive information about changes to their TRICARE coverage. The Department of Defense is no longer sending paper letters to notify beneficiaries about changes to their coverage and eligibility status. Beneficiaries will now receive emails or post cards directing them to online resources where they can view their information. When you have correspondence from TRICARE, you'll get it one of two ways.

- If you have a valid email address in the Defense Enrollment Eligibility Reporting System (DEERS), you'll get an email telling you to go milConnect to read your letter.
- If you don't have an email address in DEERS, you'll get a post card directing you to milConnect.

The emails and post cards won't contain private information, only a short generic message to inform you of a change to your coverage or eligibility. Most letters regarding your TRICARE benefit will now be online at milConnect only. You will need to maintain a DoD Self-Service Logon (DS Logon) account to continue to receive electronic letters. milConnect can also be accessed using your Common Access Card (CAC) or Defense Finance and Accounting Services (DFAS) pin, if applicable. However, it is recommended that sponsors and dependents 18 and over obtain a DS logon as it can be used for access to multiple web sites from milConnect, to regional contractor sites to TRICARE Online to various Veterans Affairs sites. Click the "Sign Up" button on milConnect to find out more. Beneficiaries who opt to receive email notifications can retrieve their health care information by logging on to milConnect, going to www.tricare.mil to review general benefits information, or contacting your regional contractor for help. This will get the information to you quicker, and since milConnect is available anywhere with internet access, you'll be notified of changes even if you're away from home.

It's important to go to http://milconnect.dmdc.osd.mil to sign up or update your email contact information. Without a DS Logon, CAC, or DFAS pin you won't be able to view this information. Once you sign-up, you will receive up-to-date benefit information such as primary care manager changes, new and replacement enrollment cards, eligibility and enrollment changes due to age or changes in member status, voluntary or involuntary disenrollment actions, and more. You can click on the "MyProfile" menu item to update your personal email preference. Please allow three days for revised settings to take effect. [Source: TRICARE Communications Oct. 01, 2014 ++]

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Erectile Dysfunction Update 02 ► Troop ED Cases Double Since 2004

Erectile dysfunction diagnoses have skyrocketed in the U.S. military in the past decade, with the rate among troops more than doubling from 2004 to 2013. A new report from military epidemiologists indicates that 100,248 cases of ED were diagnosed among active duty service members in the 10-year period, with more than half the cases classified as "psychogenic," meaning the dysfunction was related to psychiatric rather than physical causes. The report, published 29 SEP in the September Military Surveillance Monthly Report by the Armed Forces Health Surveillance Center, examined the medical records of all active-duty personnel who served during the timeframe. Researchers found that the overall incidence rate of ED climbed from 5.8 cases per 1,000 person-years in 2004 to 12.6 cases in 2013, or more than 1 percent of the total population.

A "person-year" is a statistical measure of the number of years that members of a given population have been affected by a particular condition multiplied by the total number of members in that population. It's often used in military epidemiological studies to account for the changing numbers of people serving in the military each year. According to the data, the diagnosis appeared more frequently in older service members, African American troops and those who were separated, divorced or widowed. The rate for that last demographic was nearly four times higher than among troops who had never married. Despite the alarming statistics for a largely healthy, fit and virile population, the figures likely are even higher, according to the report, because troops often won't seek medical treatment for the condition, which they may find

embarrassing or taboo to discuss. "The numbers in this report underestimate the true incidence in this population as not all servicemen with the condition seek or receive medical care for it," the authors noted.

A number of factors can contribute to ED, from mental health conditions like post-traumatic stress disorder, depression and anxiety, to medications for treating physical and mental conditions as well as injuries and illness. Sherrie Wilcox, a research assistant professor at the University of Southern California's Center for Innovation and Research on Veterans & Military Families who has studied sexual dysfunction in troops, said research indicates that about 80 percent of PTSD patients report sexual functioning problems. "These problems are likely elevated due to compounding challenges that are unique to service members, including intense (but essential) training, relocations, deployment, combat exposure," Wilcox said. In a study published by her and others in July in the Journal of Sexual Medicine, a survey found that troops ages 40 and younger suffer ED at nearly three times the rate of civilians their own age.

That report found that 33 percent of 367 active-duty men, all aged 40 and below, reported symptoms of erectile dysfunction, while 8.4 percent reported probable sexual dysfunction, or SD — issues unrelated to erections that include low sex drive and ejaculation problems. According to the USC findings, troops who reported they probably have PTSD were 30 times more likely to report ED and six times more likely to have probable SD. Those with depression, moderate to severe anxiety or who were sexual assault victims also were 10 to 13 times more likely to have ED or SD.

After that study was published, the Pentagon released information noting that the rate of ED for troops under age 40 was 4.02 per 1,000 person-years, or about 0.4 percent. But most recent data published by the AFHSC showed that for personnel age 20 to 29, the rate was 4.1 per 1,000 person-years and for those 30 to 39, it was 10.7 per 1,000 person-years from 2004 to 2013. Additional data in the AFHSC report showed a sharp drop in the incidence rate — by 50 percent — between 2012 and 2013, but that is because the case definition for ED has changed to require two doctors appointments in more than two years for the condition to be diagnosed. The drop shows that half the newly diagnosed cases did not seek medical care for the condition more than once, and the authors noted this could mean that patients were successfully treated in one visit or did not experience a recurrence of the condition. They also may have sought follow-up medical care outside the military health system, the researchers said.

Both Wilcox and the AFHSC authors noted that regardless of the cause of ED in the military, it should remain a concern not only for suffering patients, but for medical personnel treating troops and veterans. "Although ED does not present a life-threatening challenge and does not affect mission readiness, it is a common condition with a significant impact on quality of life," wrote the AFHSC researchers. "Although these issues are associated with significantly reduced quality of life and happiness, few affected individuals report receiving treatment," Wilcox said. "This is treatable." [Source: MilitaryTimes | Patrica Kime | Sept. 30, 2014 ++]

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TRICARE Prime Update 31 ► Enrollment Fee Increase Exemptions

Some TRICARE beneficiaries and their dependents no longer have to worry about paying higher enrollment fees for their health care each year, according to a new policy announced on 30 SEP. The Pentagon has decided to freeze annual enrollment fees for two groups of Prime beneficiaries at the rate in effect at the time of their enrollment. The change affects survivors of active-duty deceased service members, and medically-retired uniformed services members and their dependents, both of whom are part of the retiree group under

TRICARE rules. The new final rule, published in Tuesday's *Federal Register*, is an exception to current policy, which stipulates that TRICARE Prime enrollment fees are the same for all retirees and their dependents. The rule goes into effect on Oct. 30, 2014.

Beneficiaries in those two TRICARE categories who enrolled in Prime before Oct. 1, 2013, and those since that date, will have their annual enrollment fee frozen at the appropriate fiscal year rate. The enrollment fees for fiscal 2011 through fiscal 2014 are:

- Fiscal 2011: $230 (Single); $460 (Family)
- Fiscal 2012: $260 (Single); $520 (Family)
- Fiscal 2013: $269.38 (Single); $538.56 (Family)
- Fiscal 2014: $273.84 (Single); $547.68 (Family)

Future beneficiaries added to these categories will have their fee frozen at the rate in effect at the time they are classified in either category and enroll in TRICARE Prime or, if not enrolling, at the rate in effect at the time of enrollment. The fee stays frozen as long as one family member is enrolled in TRICARE Prime in one of the two categories, and there is not a break in coverage. According to TRICARE's website, the fiscal 2015 TRICARE Prime enrollment fee will be $277.92 (single) and $555.84 (family). "The Prime beneficiaries in these categories have made significant sacrifices for our country and are entitled to special recognition and benefits for their sacrifices," said the notice in the *Federal Register* explaining the decision.

Active-duty service members and their dependents do not pay for health care under TRICARE Prime. The military's massive health insurance program offers millions of service members, retirees and their dependents quality care at a relatively low cost. That's what the government aimed for when it created the Civilian Health and Medical Program of the Uniformed Services in 1966, now known as TRICARE. But the price of that success has been high for Uncle Sam: The $53 billion program now consumes 10 percent of the Pentagon's nonwar budget. TRICARE premiums for beneficiaries have not kept up with inflation and the overall increase in health care costs during the past two decades. Congress agreed to raise TRICARE Prime annual enrollment fees for retirees in 2011 -- the first time the fees have gone up since 1995. Since the legislative change, the rate of increase has been indexed to the rate of inflation. Retired TRICARE Prime beneficiaries now pay between $30 and $88 more in annual fees than they paid before the increase, which took effect in fiscal 2012.

The Obama administration has proposed more aggressive changes to TRICARE, including tying annual fees to retired recipients' income and charging an enrollment fee for TRICARE for Life, the health care program Congress created in 2001 for military retirees age 65 and older. Congress so far has rejected both of those ideas. The Pentagon currently is reviewing military pay and benefits -- including health care programs – through its Military Compensation and Retirement Modernization Commission. The panel is scheduled to issue a report in early 2015 with recommendations for reform. [Source: GovExec.com | Kellie Lunney | Sept. 30, 201429, 2014 ++]

*** Finances ***

Debt Lawsuits ► Make then 'Prove It'

Studies show that the majority of consumers being sued over a debt fail to show up to court, often resulting in a default judgment. The judgment means you're required to repay the debt, which, given the circumstances, will likely be a significant financial obstacle, and your credit standing will suffer as a result. Avoiding your debt collection lawsuit practically guarantees you'll have a judgment placed against you, but you don't have to sit back and let that happen. Showing up is the first step toward winning the case or settling your debt, and the next step is even easier: You need only say two words. **"Prove it"**

Debt collectors often assume a debtor won't show up to court to face a debt lawsuit, allowing them to get what they came for (the judgment) without having to do the legwork (provide proof of the debt). Somewhere between 60 and 95 percent of consumers who are sued for debt fail to participate in the lawsuits, a 2010 debt collection report from the Federal Trade Commission says, based on estimates provided by lawyers across the country. As far as default judgments go, they result most commonly from debt-collection lawsuits. A recent report from the Center for Responsible Lending cited a 2011 report from New York, which said 80 percent of default judgments in the state stemmed from such lawsuits. These tendencies make debt buyers' jobs incredibly easy, but consumers can disrupt this pattern by challenging the lawsuit. Just say, "Prove it." Make the debt buyer prove you owe the debt, because if they can't, the case could be dismissed. It's important to remember that this is not a cure-all and will not necessarily work every time, but the odds are in your favor.

This concept was the subject of a recent segment on "This American Life" called "Magic Words," in which a reporter watched as a debt case was dismissed because the debtors asked for evidence showing they owed the debt. A lawyer who watched the dismissal unfold explained to the reporter how debtors rarely show up, and if they ask for proof of their debt, the collector usually doesn't have it. When the creditor sells an account to a debt buyer, documentation doesn't always change hands. "Make them show their proof," said Amy Bennecoff, a senior associate at Kimmel & Silverman in New Jersey. "It's their burden of proof. If they don't have the contract, if they don't have the statements, you may win."

There's a lot more to challenging a debt lawsuit than asking for evidence. Debtors may need to take off work for their court hearings, which their jobs may not allow, and getting to the courthouse is another issue. Some states have fees for filing an answer to the lawsuit, which the debtor may not be able to pay. There are

often solutions to these obstacles — applications to waive fees, planning ahead to arrange transportation — but it's not always easy for the debtor to figure out what they have to do. When you receive a notice saying you're being sued over a debt, research your options as soon as you can by visiting the court's website. If you're able to arrive in court to face the debt collector, your chances of winning the case are much higher than if you're a no-show, because anything is better than that, really.

What to do when you are sued over debt.

In the segment on "This American Life," the reporter talked about a guy who used the "prove it" tactic as a way of avoiding legitimate debts. In that situation, it may seem unfair that someone can get a case dismissed over a real debt because the collector doesn't have the right paperwork, but at the same time, it could also be considered unfair to the consumer that creditors can get judgments without providing sufficient proof of a debt. The system can be worked both ways. Debt collectors seem to be the ones benefiting most. Debt lawsuit procedures vary by state, but you'll definitely want to do your research if you find yourself dealing with one. Bennecoff said she once showed up to court with a client, asked for proof of the debt, and the collector responded with information about a debt belonging to someone with the same name as the client, but it definitely wasn't the same person.

There are also cases of collectors suing for debts after the statute of limitations has expired or the debt has been paid. "A lot of courts don't require a lot of information to file these complaints, and then you get these defaults [judgments]," Bennecoff said. "Pay attention to what's getting filed against you." Otherwise, you may pay a steep price. Judgments can stay on your credit report seven years from the date they were entered in the court, even longer if they go unpaid, and your credit score will suffer as a result. If you're dealing with a judgment, work to improve your credit by focusing on other aspects of your credit, like credit utilization, so you can keep your score as high as possible, despite the judgment. [Source: http://www.credit.com | Christine DiGangi | Oct. 08, 2014 ++]

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Saving Money ► Dental Insurance | Do You Need It?

You need medical insurance, if only to protect against the cost of an accident or illness so expensive that you could be ruined financially. But do you really need dental insurance? It's an interesting question, because you can avoid the most likely causes and expenses of dental problems, decay and gum disease, by brushing your teeth and flossing diligently. "The cheapest cavity is the one you never get," Cleveland dentist Matt Messina tells U.S. News & World Report. About 61 percent of Americans have dental insurance. Nearly all of them have coverage through work or a group plan like AARP's, Medicaid, Tricare (for military families) and the federal Children's Health Insurance Program, wrote Evelyn Ireland, executive director of the National Association of Dental Plans, in an email interview. Most dental preferred provider organization and regular insurance (indemnity) plans have an average deductible of $50 and a maximum yearly benefit of $1,000, Ireland says. Only 2 to 4 percent of Americans with dental insurance use up their yearly maximum allowance. Dental plans offered through a workplace typically are one of three types:

- Indemnity plan. You choose your provider of choice, and your plan pays a percentage of the fees.
- PPO. Preferred provider organization plans have groups of practitioners who agree to reduced fees for patients within the network. Your costs are lower with network dentists. You may see out-of-network dentists, but it'll cost you more.
- HMO. Health maintenance organizations cut costs by requiring members to use only providers within the network.

Annual premiums for dental insurance run, on average, according to Ireland at the NADP:

- $166 to $326 per person yearly for an employee only.
- $325 to $667 a year for an employee and family.

Is insurance worth it? The National Association of Dental Plans describes coverage in a typical plan:

- Preventive care (periodic exams, X-rays and, for some age groups, sealants) — 100 percent.
- Basic procedures (office visits, extractions, fillings, root canals (sometimes), and periodontal treatment) — 80 percent.
- Major procedures (crowns, bridges, inlays, dentures and sometimes implants and root canals) — 50 percent or less.

Orthodontics coverage usually can be purchased as a rider, says the NADP. Cosmetic care is not covered. In deciding if insurance is worthwhile for you, consider:

- The annual price of premiums.
- The cost of the dental care you need.
- Your policy's limit on how much it pays out in benefits. Some plans let you roll over unused benefits from the previous year.
- Policy coverage.

"While many dental policies focus on preventive measures by offering two annual visits, you'll really start seeing the savings with more expensive treatments, like root canals and crowns," explains Angie's List. The Affordable Care Act requires insurance providers to offer dental insurance for children younger than 18. "Although the new act does not require dental coverage for adults, most state marketplaces will also offer dental coverage for adults," says the American Dental Association. Adult dental coverage may be offered as part of a comprehensive health plan or as stand-alone dental insurance. Here's more about the ACA and dental coverage:

- The ADA at http://www.mouthhealthy.org/en/dental-care-concerns/affordable-care-act-checklist tells how to compare benefits and assess a dental plan.
- Use this Healthcare.gov plan locator at https://www.healthcare.gov/find-premium-estimates to find Affordable Care Act dental plans locally and compare costs.

Dental insurance isn't the only way to cut dental bills. In fact, 39 percent of Americans have no dental insurance. Here are 10 other ways to cut your costs:

1. **Self-insure** - It may be less expensive to pay out of pocket than buy a plan. Fees vary by dentist office and by geographic region. Here are average costs in the U.S. for several common procedures, from the American Dental Association Health Policy Institute's 2013 Survey of Dental Fees:

- Teeth cleaning (prophylaxis) adult — $85.
- White dental filling (one surface, anterior) — $149.
- Silver filling (one surface, primary or permanent) — $125.
- Porcelain crown fused to noble metal — $1,003.
- Complete series of intra-oral X-rays — $124.

2. **Preventive care** - In many cases, the best way to save on dentistry is to take excellent care of your teeth and gums and teach children healthy dental routines. For example, did you know that fruit juices, carbonated drinks and acidic foods can help wear away your tooth enamel? The American Dental Association tells,

- How to brush correctly http://www.mouthhealthy.org/en/az-topics/b/brushing-your-teeth;
- How to floss effectively http://www.mouthhealthy.org/en/az-topics/f/flossing; and
- Offers more information on dental health. Http://www.mouthhealthy.org/en/dental-care-concerns

3. **Cut back to one cleaning a year** - If you don't have serious dental issues, you can probably get by with one cleaning annually, not two. "Several studies have indicated that visiting the dentist twice a year has no notable benefits when compared with a single visit annually," writes U.S. News & World Report. Just don't skip that annual cleaning and exam; it could save you from costly and serious problems.

4. **Discount dental plans** - Discount plans charge an annual fee in exchange for discounted services from network providers. Before buying in, be sure to look at a list of covered procedures. Enrollment fees often run between about $80 and $120 a year. Providers' discounts commonly are 10 to 60 percent, says NerdWallet. But note: "These plans typically cost less than HMOs and PPOs, but they won't save you as much money in the long run," Angie's List says (http://www.nerdwallet.com/blog/health/2014/05/07/save-going-to-the-dentist).

5. **Request 10 percent off -** Some dentists will take 10 percent off the cost of a visit or procedure if you pay at the time of the visit. Some offer a discount for cash. If your dentist doesn't provide a discount, ask for one. A respectful and polite request has the best chance of success. Or shop around for a dentist, gathering recommendations from friends and then phoning those offices to find out if they offer a discount.

6. **Charitable clinics -** Look for low-cost or free dental clinics offered in your community by local dentist volunteers. Find opportunities in your area (https://www.adcfmom.org/Schedule.html) through America's Dentists Care Foundation. Another charitable organization with volunteer dental professionals is Dentistry From the Heart http://www.dentistryfromtheheart.org, a global nonprofit organization (727-849-2002). Or ask your state's dental association (find it online) about low-cost care.

7. **Dental schools** - Dental schools, at many colleges and universities around the U.S., often offer free or reduced-cost care. At http://www.ada.org/en/home-ada/coda/find-a-program/search-dental-programs/dds-dmd-programs you can find American Dental Association accredited programs listed.

8. **Federally qualified health centers -** Private health centers offering dental services are in cities and counties across the country. They receive some government funding and charge according to what you can afford. To locate one in your area use the Health Resources and Services Administration clinic locator at http://findahealthcenter.hrsa.gov/Search_HCC.aspx.

9. **Look into dental tourism -** Cost savings can be had by traveling to other countries for dental care. "Dental patients who live close to an international border form the majority of dental health travelers," according to Patients Beyond Borders http://www.patientsbeyondborders.com/procedure/dentistry, which publishes a site and books with information about medical and dental tourism. Josef Woodman, CEO of Patients Beyond Borders, told Fox News that an estimated 400,000 Americans crossed international borders for dental care in 2012. Do plenty of research to ensure you are getting safe and high-quality care. Some resources:

- The American Dental Association at http://www.mouthhealthy.org/en/az-topics/t/travel has information and cautions about dentistry outside the U.S.
- OSAP, the Organization for Safety and Asepsis Procedures tells how to assess infection-control practices in a dentist office at http://www.osap.org/?page=TravelersGuide , and gives a checklist for obtaining safe dental care abroad. It cautions: *The decision to visit another country for dental care should go beyond simply comparing prices or even evaluating the dentists' expertise. Countries differ in their standards for infection control and safety. The use of fresh gloves, sterile instruments and safe water are not standard practice in all countries. Without these precautions, patients could be infected with diseases such as hepatitis B.*
- The American Dental Society of Europe at http://www.ads-eu.org/index.php?menuID=14 connects travelers with American- or Canadian-trained dentists and provides an online referral directory.

10. **Broaden your reach -** Dentist fees in rural counties typically are lower than in urban areas, the ADA's 2011 survey of fees found. Comparison shop for the procedure you need by phoning offices of American Dental Association member dentists outside your metro area and asking about fees. Here's how to locate an ADA member dentist.
[Source: MoneyTalksNews | Marilyn Lewis | Sept. 29, 2014 ++]

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SSA Disability Update 01 ► Program Can Help Veterans

Did you know that many disabled veterans and wounded warriors may qualify for Social Security disability benefits, in addition to their Veterans Affairs benefits? The Social Security Administration at http://www.youtube.com/playlist?list=PLGSYaZN04xzFCoEqDlY3n7xgWLh55vvDht has created a seven-part YouTube video at to assist veterans and members of the public to better understand the Social Security disability process. Earlier this year, the SSA also launched a disability education and awareness campaign, "The Faces and Facts of Disability" at http://www.socialsecurity.gov/disabilityfacts, to share information about the disability program and the people it helps. Through this campaign, the SSA hope to educate the public about the Social Security Disability Insurance program and dispel common misconceptions. For more information, please go to http://www.socialsecurity.gov. [Source: Arkansas Department of Veterans Affairs Newsletter Sept. 25, 2014 ++]

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Lowe's Military Discount ► 2 Types | Military & Veterans

Despite much debate, complaint, and argument, Lowe's continues to offer two different discount policies for various military folks. Unfortunately, there is a lot of confusion about the discount policies, amongst both the military and veteran population **and** also amongst the Lowe's staff. Since most of the Lowe's staff has never served in the military, it is easy to understand how their own policies can be confusing to them. Please be kind and don't be rude to the staff. Honestly, from some of the comments I've seen here, I'm surprised

they haven't cancelled the discounts altogether. Let's not have that happen because of confusion and frustration.

Military Discount. Lowe's established the 10% Military Discount to support the men and women who are currently serving our country in the Armed Services and to honor retired service members and recipients of Department of Veterans Affairs (VA) benefits. This 10% discount is also extended to the immediate family of those eligible for the discount. Immediate family is defined as the spouse and children under age 18. To qualify for the Everyday 10% Military Discount, you must:

- Be currently serving in, or retired from, a qualifying branch of the Armed Services, or be the immediate family member of someone who is and have a valid military ID Card; or
- Be a veteran who receives VA benefits and have a valid Veteran Identification Card (VIC).

Veterans Discount. Lowe's honors all Veterans on three specific holidays: Memorial Day, 4th of July and Veterans Day. During these three holiday weekends, Lowe's will offer a 10% to all veterans who served honorably and who present a valid Form DD214 or other proof of service. The discount is extended to the veteran community on ***these three holidays only***.

Exclusions. The military discount and veterans discount must be used on personal purchases only and cannot be used for Lowes.com purchases, previous sales, or the purchase of gift cards or services including product installations. It cannot be combined with the Lowe's Price Guarantee, or promotions such as "Spend and Get," "New Mover," "Project Starter," "Your Choice," or discounts such as Quote Support Program (QSP) quotes. Please, please keep in mind that Lowe's chooses to give this discount to military and veteran groups. They don't have to offer it, and they can decided to change their mind at any time. If you are going to use the Lowe's military or veteran discounts, be sure you understand the rules and have the proper identification. If your local store staff is confused, you can print out their policy or direct them to the Lowe's website.(http://www.lowes.com/cd_In-Store+Services+_745829091_#Military Discount). The military and veterans discount rules are listed on the "in-store services" page. Some stores may have local policies that direct them to offer the discount a little more generously, but these are the Lowe's corporate policies that they are supposed to be following. [Source: Military.com | Kate Horrell | Sept. 25, 2014 ++]

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Checking Accounts ► Alternative to Bank Account | Walmart

America's largest retailer is getting into the banking business in a big way. Walmart announced it will soon offer low-cost checking in partnership with Green Dot. The new checking account, dubbed GoBank, will be available at Walmart stores by the end of October. According to USA Today: GoBank will charge $8.95 a month but will waive the fee if customers consent to a monthly direct deposit of $500. Other fees that are associated with "free" checking accounts at commercial banks — for overdraft, not maintaining a minimum balance or writing bad checks — are waived. Steve Streit, CEO and founder of Green Dot, said in a statement:

No other checking account makes it this easy and affordable to manage your everyday finances. GoBank is breaking down the barriers to traditional banking and brings the benefits of a FDIC-insured checking account that's loaded with features to a large segment of Americans.

According to Fortune, it's expected that Walmart's new checking account will appeal to low-income Americans and the unbanked. Unlike traditional banks that use credit bureau ratings to determine eligibility, potential GoBank customers only need to pass an ID verification to open an account. Nearly 10 million U.S.

households don't use a bank, Fortune said. Customers must purchase a $2.95 starter kit to open an account, after which GoBank customers can immediately begin using their MasterCard debit card. Walmart already offers bill pay, check cashing and prepaid debit cards. [Source: MoneyTalksNews | Krystal Steinmetz | Oct. 01, 2014 ++]

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Government Agency Email Scam ► How It works

Watch out for scammers pretending to represent the Social Security Administration or Service Canada. Con artists are contacting citizens via email and requesting personal information, which they use to commit identity theft.

How the Scam Works:

- You get an email that appears to be from the Social Security Administration, Service Canada or organization acting on behalf of the official government agency. The email claims that you are eligible for a new benefit and need to complete an online form to apply.
- You click the link, and the form asks for basic information such as name, address and telephone number. It also requests information about your job, health and government ID numbers (such as driver's license or Social Security number).
- When you complete the form, a confirmation page promises that your case will be reviewed and a government agent will contact you. Not likely! Scammers use the info you give them to commit ID theft, possibly redirecting your benefits to an account controlled by the thief.

As always, watch out for other variations of this scam. Scammers also call residents and ask for personal information over the phone. And other email versions use a slightly different scenario, such as asking you to update or verify account information.

How to Spot this Scam:

- Be skeptical of email. The government typically doesn't call, text or email. Government agencies normally communicate through the mail, so be very cautious of any unsolicited calls, text messages or emails you receive.
- The government should already know your basic information. If a government agency is contacting you about your benefits, they should already know your basic information, such as name, address and government ID number.
- Pick up the phone. If you receive a suspicious call or email, call the local government agency to check its legitimacy. Look for the phone number on previous correspondence or the official website. Don't call a number in the email.
- As always, don't click on links and download attachments in suspicious emails. When in doubt, call to confirm the email first.

For more information check out these alerts from the SSA and Service Canada. http://www.businessinsider.com/the-world-war-ii-aviation-art-reveals-in-great-detail-the-violence-of-old-wars-2012-11?op=1. To find out more about scams or report one, check out BBB Scam Stopper at http://www.bbb.org/council/bbb-scam-stopper. [Source: BBB Scam Alert Sept. 11, 2014 ++]

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Job Hunt Scam 2 ► Craigslist Postings

Watch out for Craigslist job scams using the names of real organizations to lure in potential job seekers. These posts look just like real jobs, but take precautions before sending your resume.

How the Scam Works:

- You see a job post on Craigslist.org. It says Clearpoint, a non-profit organization that provides credit counseling, is hiring an "Office Admin Assistant." The ad looks completely legitimate. The business is real, the job description is standard and the entire post is typo-free.
- You decide to apply for the job. The "manager" replies to your email, saying that he/she needs further information from you. Unfortunately, this information includes your credit card number!

Job scams especially have many different variations. Watch out for scams using different business names and position titles. Also, scammers may ask job seekers to pay upfront for training, which never materializes. Or they may "hire" you and send a fake check. The con artists will instruct you to deduct a fraction for payment and wire the rest back.

Tips to Avoid Falling for Fake Job Scams: Spot a job scam before you waste your time and money.

1. Some positions are more likely to be scams. Use extra caution when looking at ads for jobs with generic titles, such as admin assistant or customer service representative. These often don't require special training or licensing, so they appeal to a wide range of applicants.
2. Check out the business' website to make sure the opening is posted there. If you are still skeptical, call the business to check on the position. Don't rely on websites or phone numbers provided in the advertisement; find the "employer" on your own to make sure it's the real deal.
3. Watch out for these phrases. Scam ads often contain the phrases "Teleworking OK," "Immediate Start" and "No Experience Needed." Watch out for ads that urge you to apply immediately.
4. Search for the position in Google. If the result comes up in many other cities with the exact same job post, it is likely a scam.
5. Be very cautious of any job that asks you to share personal information or hand over money. Scammers will often use the guise of running a credit check, setting up direct deposit or paying for training.

To find out more about this and other scams, check out BBB Scam Stopper and alert on.http://www.bbb.org/council/bbb-scam-stopper. [Source: BBB Scam alert Sept. 19, 2014 ++]

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Thrift Savings Plan 2014 ► Share Prices + YTD Gain or Loss

TSP Share Prices for Oct. 10, 2014

	Close	YTD
G Fund	$14.5458	+1.81%
F Fund	$16.6506	+5.77%
C Fund	$25.0324	+4.85%
S Fund	$32.4181	-3.72%
I Fund	$23.8319	-6.78%
L 2050	$14.0815	+0.13%

L 2040	$24.9690	**+0.54%**
L 2030	$23.6546	**+0.83%**
L 2020	$22.0541	**+1.19%**
L Income	$17.1301	**+1.86%**

Average Annual Returns (As of December 2013)

	L Income	L 2020	L 2030	L 2040	L 2050	G Fund	F Fund	C Fund	S Fund	I Fund
1-Year	6.97%	16.03%	20.16%	23.23%	26.20%	1.89%	(1.68%)	32.45%	38.35%	22.13%
3-Year	4.64%	8.76%	10.49%	11.73%	-	1.94%	3.42%	16.22%	16.59%	8.51%
5-Year	5.64%	11.13%	13.20%	14.74%	-	2.32%	4.58%	18.00%	22.50%	12.39%
10-Year	-	-	-	-	-	3.39%	4.65%	7.44%	10.43%	7.08%
Since Inception	4.50%	6.09%	6.65%	7.02%	12.40%	5.54%	6.66%	10.30%	9.31%	5.38%
Inception Date	08/01/05	08/01/05	08/01/05	08/01/05	01/31/11	04/01/87	01/25/88	01/29/88	05/01/01	05/01/01

Calendar Year Returns

	L Income	L 2020	L 2030	L 2040	L 2050	G Fund	F Fund	C Fund	S Fund	I Fund
2009	8.57%	19.14%	22.48%	25.19%	-	2.97%	5.99%	26.68%	34.85%	30.04%
2010	5.74%	10.59%	12.48%	13.89%	-	2.81%	6.71%	15.06%	29.06%	7.94%
2011	2.23%	0.41%	(0.31%)	(0.96%)	-	2.45%	7.89%	2.11%	(3.38%)	(11.81%)
2012	4.77%	10.42%	12.61%	14.27%	15.85%	1.47%	4.29%	16.07%	18.57%	18.62%
2013	6.97%	16.03%	20.16%	23.23%	26.20%	1.89%	(1.68%)	32.45%	38.35%	22.13%
YTD	2.61%	3.38%	3.70%	3.88%	3.97%	1.75%	4.73%	8.41%	1.18%	(1.06%)

Monthly Returns (Past 12 Months)

	L Income	L 2020	L 2030	L 2040	L 2050	G Fund	F Fund	C Fund	S Fund	I Fund
2013										
Oct	1.01%	2.23%	2.75%	3.11%	3.47%	0.19%	0.89%	4.60%	2.94%	3.38%
Nov	0.58%	1.24%	1.54%	1.74%	1.93%	0.18%	(0.35%)	3.05%	2.49%	0.75%
Dec	0.58%	1.25%	1.56%	1.77%	1.98%	0.19%	(0.56%)	2.54%	2.94%	1.51%
2014										
Jan	(0.42%)	(1.57%)	(2.04%)	(2.35%)	(2.71%)	0.21%	1.58%	(3.45%)	(1.91%)	(4.03%)
Feb	1.15%	2.73%	3.44%	3.94%	4.44%	0.18%	0.62%	4.58%	5.43%	5.58%
Mar	0.19%	0.17%	0.14%	0.12%	0.09%	0.19%	(0.15%)	0.85%	(0.69%)	(0.57%)
Apr	0.31%	0.39%	0.37%	0.32%	0.32%	0.20%	0.90%	0.75%	(2.47%)	1.51%
May	0.64%	1.20%	1.46%	1.63%	1.78%	0.20%	1.21%	2.35%	1.52%	1.72%
Jun	0.58%	1.19%	1.52%	1.77%	1.96%	0.19%	0.14%	2.07%	4.45%	0.99%
Jul	(0.26%)	(0.97%)	(1.34%)	(1.63%)	(1.86%)	0.19%	(0.19%)	(1.37%)	(4.38%)	(1.95%)
Aug	0.84%	1.64%	2.07%	2.40%	2.61%	0.20%	1.12%	4.01%	4.98%	(0.14%)
Sep	(0.42%)	(1.36%)	(1.84%)	(2.18%)	(2.50%)	0.18%	(0.58%)	(1.40%)	(5.10%)	(3.82%)
Last 12 mo	4.86%	8.35%	9.88%	10.92%	11.82%	2.32%	4.70%	19.83%	9.89%	4.59%

[Source: www.myfederalretirement.com/public/237.cfm & http://tspcenter.com/tspReturns.php?view=year

Tax Burden for North Dakota Retirees ► As of Oct 2014

Many people planning to retire use the presence or absence of a state income tax as a litmus test for a retirement destination. This is a serious miscalculation since higher sales and property taxes can more than offset the lack of a state income tax. The lack of a state income tax doesn't necessarily ensure a low total tax burden. States raise revenue in many ways including sales taxes, excise taxes, license taxes, income taxes, intangible taxes, property taxes, estate taxes and inheritance taxes. Depending on where you live, you may end up paying all of them or just a few. Following are the taxes you can expect to pay if you retire in **North Dakota**. Note - This state has a statutory provision for automatic adjustment of tax brackets, personal exemptions or standard deductions to the rate of inflation.

Sales Taxes

State Sales Tax: 5% (food and prescription drugs exempt); 6% on lodging, 7% on alcoholic beverages. Cities or counties which have adopted home rule charters may levy additional sales and use taxes up to 3.0%.
Gasoline Tax: 41.4 cents/gallon (Includes all taxes)
Diesel Fuel Tax: 47.4 cents/gallon (Includes all taxes)
Cigarette Tax: 44 cents/pack of 20

Personal Income Taxes

Tax Rate Range: * Low – 1.51%; High – 3.99%. Rates for single person.
Income Brackets: *Lowest – $35,350; Highest – $388,350 (2013). Rates for single person. (See tax table at http://www.nd.gov/tax/indincome/forms/2012/taxtables.pdf?20141009111545)
Number of Brackets: Five. The tax brackets reported are for single individuals. For married taxpayers the same rates apply to income brackets ranging from $59,100 to $388,350. An additional $300 personal exemption is allowed for joint returns or unmarried head of household.
Personal Exemptions: Single – $3,900; Married – $7,800; Dependents – $3,900. There is also a new marriage income tax credit with a maximum limit of $300. State allows personal exemption or standard deductions as provided in the Internal Revenue Code.
Standard Deduction: Federal amount ($6,100 – single, $12,200 – joint; single over 65 – $1,400; married $1,100))
Medical/Dental Deduction: Full
Federal Income Tax Deduction: None
Retirement Income Taxes: A total of $5,000 can be excluded from military, civil service, some state/local government, and qualified pensions, minus amount of Social Security received. Out-of-state government pensions are fully taxed. Call 701-328-3275 for more information.
Retired Military pay: North Dakota's individual income tax law provides only one special deduction for active members of the military. It does not include combat pay that is exempt from federal income tax. The current income tax law does not provide for any special deductions for retired military members.
Military Disability Retired Pay: Retirees who entered the military before Sept. 24, 1975, and members receiving disability retirements based on combat injuries or who could receive disability payments from the VA are covered by laws giving disability broad exemption from federal income tax. Most military retired pay based on service-related disabilities also is free from federal income tax, but there is no guarantee of total protection.
VA Disability Dependency and Indemnity Compensation: VA benefits are not taxable because they generally are for disabilities and are not subject to federal or state taxes.
Military SBP/SSBP/RCSBP/RSFPP: Generally subject to state taxes for those states with income tax. Check with state department of revenue office.

Property Taxes

All real property in the state is subject to tax by the state, counties, townships, and municipalities. Residential property is taxed as 9% of assessed value. For the most part, personal property is exempt from property tax. Personal property of utilities companies that are assessed by the State board of Equalization is subject to property tax. Household personal property, inventories, and machinery and equipment used in trade or manufacture are exempt from property taxes. Machinery and equipment used in refining products from oil or gas extracted from the earth is deemed to be real property and therefore subject to property taxes. A mobile home used as a residence or place of business is also subject to a property tax.

There is also a Homestead Tax Credit available to senior citizens (65+) or disabled persons who own or rent their home. Your income, plus the income of your spouse and any dependents, may not exceed $26,000 for

the calendar year preceding the assessment date. Your assets may not exceed $75,000. The maximum homestead credit is $4,500 (income $0 to $18,000). Go to www.nd.gov/tax/misc/faq/property for details. For a brochure on the Homestead Tax Credit, refer to . http://www.nd.gov/tax/property/pubs/homesteadcredit-brochure.pdf?20141009111846. Call 701-328-3127 for details.

Inheritance and Estate Taxes

North Dakota does not have an inheritance tax. There is an estate tax based on a decedent's total gross estate and limited to the credit for state death taxes allowed on the Federal 706 estate tax return. North Dakota's definition of a deceased person's taxable estate is identical to the federal definition and North Dakota recognizes all federal exemptions and deductions.

For further information, visit the North Dakota State Tax Department site http://www.nd.gov/tax or call 701-328-3657. Go to http://www.nd.gov/tax/genpubs/2012-redbook.pdf?20141009112627 to review the North Dakota tax guide.

[Source: http://www.retirementliving.com/taxes-new-york-wyoming#NORTHDAKOTA Oct 2014 ++]

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* General Interest *

Notes of Interest ► 01 thru 15 Oct 2014

- **COLA.** The Consumer Price Index dipped 0.2 percent in August, falling to 234.030. It now stands 1.6 percent above the FY2014 COLA baseline of 230.327. The July, August, and September CPIs will be used to calculate the 2015 COLA. Predictions on the 2015 COLA are it will fall somewhere between 1.6 and 1.8 percent. The new COLA will be announced 22 OCT.
- **AVDL Memorial.** To view a two minute time lapse video of the construction of the American Veterans Disabled for Life Memorial, scheduled for dedication on October 5, 2014 refer to http://www.washingtonpost.com/news/checkpoint/wp/2014/09/30/americas-disabled-veterans-get-a-memorial-all-their-own/.
- **Medals.** The new U.S. mission in Iraq is part of Operation Enduring Freedom, at least according to the Pentagon's medals and awards division.
- **Vet Jobs.** The unemployment rate for post-9/11 vets stood at 6.2 percent in September, down nearly 2 points from the previous month's rate, and down a full 3 points from the 9.2 percent unemployment rate charted in July, according to the Bureau of Labor Statistics.
- **Home Ownership.** An analysis of median income and median home prices developed by RealtyTrac Inc. revealed that roughly 38 million Americans, or 1 in 8 people, live in a county where household income must exceed $100,000 to support a mortgage payment for an median-priced home.
- **Wi-Fi.** Marriott International is in hot water for illegally blocking some of its guests' mobile hotspots at an event at its hotel and convention center in Nashville, then charging

patrons up to $1,000 per device to connect to the hotel's Wi-Fi. Marriott has agreed to pay a $600,000 fine for its actions.

- **Federal Judge Salaries.** Federal judges have ruled Congress has no authority to block their pay raises. In total, CBO said the judges will receive a collective $1 billion in extra pay in the next 10 years. About one quarter of that will go to restitution payments for salary increases that should have been previously awarded.
- **Medicare 2015 Premiums.** Next year's standard Medicare Part B monthly premium and deductible will remain the same as the last two years. For the approximately 49 million Americans enrolled in Medicare Part B, premiums and deductibles will remain unchanged in 2015 at $104.90 and $147, respectively.
- **TRICARE.** There is no such thing as a Tricare "insurance card," as Tricare is not health insurance as that term is commonly understood. Proof of Tricare coverage is usually a military ID card. Dependent children under age 10 normally are not required to have military ID cards; their parents' ID cards are accepted as sufficient proof of coverage. However, ID cards can be issued to younger children in certain circumstances, including yours, when a child is in the custody of a parent or guardian who is not eligible for Tricare in his or her own right.
- **TRICARE.** The stepchild of a military sponsor normally loses Tricare eligibility upon the divorce of the military sponsor and the child's biological parent. Any such status changes must be reported to the Defense Enrollment Eligibility Reporting System.
- **Vet Haircuts.** This Veterans Day, Hair Cuttery is giving back to former service men and women through its Share-a-Haircut program. For every adult haircut purchased on Tuesday, Nov. 11, a free haircut certificate will be donated back to a veteran in communities local to Hair Cuttery's almost 900 locations. In each market, Hair Cuttery will partner with local veteran's organizations to reach those in need through the donation of haircut certificates.
- **Free Hamburgers.** Shoney's is offering a free All-American Burger (a fresh, never frozen, hand-pattied, grain-fed, 100% ground beef, cooked to order burger, served on a toasted bun with lettuce, tomatoes, red onions, pickles and mayonnaise) to veterans and active duty military service members on Tuesday, November 11, 2014 at participating restaurants while supplies last.

- **Weapons**. Check out https://www.youtube.com/watch?v=ZFjGbOyd2ek to see the deadliest weapon ever invented - Metal Storm.

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Car Insurance Update 06 ► Impact of One Speeding Ticket

Insurance companies pay more attention to claims than tickets when they set rates. A car whose owners have a lot of accident claims or expensive repairs will cost more to insure, even for the driver who has a spotless record. But tickets do tend to have a dramatic effect on individual rates. A 25-year-old male in ZIP code 94608 driving a 2013 Honda Civic with full coverage, for example, would see his monthly premiums soar with a single conviction for speeding 11 to 15 mph over the limit.

Company	No tickets	With ticket	Increase
A	$187	$310	66%
B	$195	$271	39%
C	$234	$281	20%
D	$237	$308	30%

The driver's cheapest option with a clean record becomes the most expensive with a single speeding ticket; shopping around after a violation would save this driver $39 a month – $468 a year. The top 20 ticket magnets include sports cars, SUVs, old beaters and a hybrid. Insurance.com analyzed data submitted by more than 557,000 drivers who were comparing car insurance quotes to find the car models whose drivers had the most violations. One in 3 drivers of the Subaru WRX had a traffic violation in the past three years, ranking the turbocharged, all-wheel-drive sport compact atop the 526-model list. The most-ticketed brand overall was Scion, with 27.5 percent of owners reporting a traffic conviction. The average for all vehicles was 19.9 percent. Cars that get the most tickets, by rank, make and model, and the percentage with tickets:

1. Subaru WRX — 33.6 percent.
2. Pontiac GTO — 32.7 percent.
3. Scion FR-S — 32.6 percent.
4. Toyota Supra — 30.8 percent.
5. Subaru Tribeca — 29.7 percent.
6. Volkswagen Rabbit — 29.6 percent.
7. Mercury Topaz — 28.8 percent.
8. Scion TC — 28.8 percent.
9. Toyota FJ Cruiser — 28.4 percent.
10. Mazda Mazda2 — 28.1 percent.
11. Hyundai Veloster — 28.1 percent.
12. Volkswagen GTI — 28.1 percent.
13. Suzuki Reno — 28.1 percent.
14. Scion XA — 27.8 percent.
15. Pontiac G8 — 27.7 percent.
16. MINI Cooper S Countryman — 27.5 percent.
17. Mitsubishi 3000 GT — 27.4 percent.
18 .Saturn Aura — 27.1 percent.
19. Infiniti QX56/QX80 — 27.1 percent.
20. Toyota Prius C — 27 percent.

At http://www.insurance.com/auto-insurance/vehicle-shopping/cars-that-get-the-most-tickets.html you can enter your car and model determine where it fits into the Ticket Magnets rankings. [Source: MoneyTalksNews | Insurance.com | Oct. 01, 2014 ++]

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Burial At Sea Update 04 ► Coast Guard Performs Viking Funeral

The Coast Guard carries out dozens of burials at sea in a given year, but one World War II veteran got a unique farewell. On 29 SEP, Station Atlantic City fulfilled the final wishes of service veteran Andrew Haines, a New Jersey resident who died in late August at age 89. Haines spent more than a decade planning his own Norse-style send-off — a self-built funeral ship to carry his cremated ashes, which was then to be ignited

with a flare. “Oh, I was thrilled,” Haines’ son Andy told Navy Times. “I was thrilled when the Coast Guard called and told me we were doing it my way.” Haines said his father, a World War II veteran who finished his tour at Atlantic City, had been planning his funeral for years. Andrew Haines emigrated from Norway as a child in 1927 and had stayed connected to his Scandinavian heritage throughout his life.

About 10 years ago, Andy said, Haines’ cousin in Norway sent him blueprints for a 100-foot wooden ship, which he scaled down as small as two feet, as a small construction project. “When I came over to the house one day with the wife and one grandson, we were in the basement, and he’s got the whole bottom shell done with the deck, getting ready to put the rest of the stuff on,” Andy recalled. Then Andy had an idea. He asked his father if he still wanted to be cremated, and he said he did. “So I said, ‘How about if we try to make a Viking funeral out of this for you?’ ” he recalled. Haines built five versions of the ship, his son said, settling on a 54-inch version for the ceremony. More remarkable, Haines built the boats one-handed. He lost an arm in a 1975 boating accident, which ended his career as a commercial fisherman for Atlantic City Fisheries, the family business. In his retirement, however, he became active in amputee golf tournaments, his son said.

He passed away of natural causes on 26 AUG. After his cremation, Andy filed paperwork with the Coast Guard to have his father buried at sea. “Burial at sea is not that uncommon,” Boatswain’s Mate 1st Class Christopher Fonseca, Atlantic City’s operations officer, told Navy Times. “We probably do about seven a year just at Atlantic City.” Once the station came up with a plan to safely bring the wooden boat out to sea and set it on fire, they coordinated with the family to set up a ceremony. Fonseca said about 30 people came to say goodbye to Haines ashore. After a group memorial, a few close family members and a preacher rode out on a 47-foot motor boat with Fonseca’s team, as the rest of the party threw flowers into the water behind them.

Handmade Wooden Boat Containing Haines' Ashes

About three miles off the coast, Fonseca and his crew brought the miniature Viking ship down to a recess in their boat, lit the wood shavings inside on fire with a flare and sent it out to sea. It took about 20 minutes to burn, he said. The family said some last words, and one crew member read a nautically themed Alfred Lord Tennyson poem, “Crossing the Bar.” Fonseca said he’d done a few burials at sea in his career — they are free to any military veteran — but never one this elaborate. “Scattering ashes and flowers is pretty much the norm,” he said. [Source: NavyTimes | Meghann Myers | Oct. 02, 2014 ++]

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Internet Disinformation Update 01 ► Tips for Accessing Validity

By now, hopefully no one believes that if something is on the Internet, it must be true. Though disinformation (deliberately incorrect information) and misinformation (accidentally incorrect information) exist in both online and traditional journalism, standards for accuracy are weaker online. There are typically few or no gatekeepers to check whether someone is exaggerating, neglecting to tell the whole truth by omitting important information, downplaying the significance of something, saying something in a deliberately ambiguous way to provide an out, or telling a barefaced lie. Plus, people can — and many do — position themselves as experts. You frequently see, for instance, lay people playing doctor or lawyer, offering opinions about complicated subjects, when it's clear all they've done is Googled a medical article or court case and don't have a clue how to interpret its meaning or what its limitations are.

As a reader, you should be skeptical, not cynical, about information you come across, whether its source is a traditional or new media outlet. Ask yourself, "Is it true?" and then ask:

- **Does the site look professional?** If a website is carefully constructed rather than slopped together, chances are greater the information within it will be accurate. But looks can and do deceive. A flashy site can merely be a marketing front for quack health remedies or an illegal pyramid scheme.
- **Who's behind the information?** Different sources employ different levels of thoroughness in research, fact checking, and objectivity.
- **Why is the person or organization presenting the information?** Sources might have agendas, sometimes explicit, sometimes hidden.
- **Is the information paid for?** Ads and advertorials, whether labeled or not, are inherently less credible than other information.
- **Does the information diverge from my current understanding?** If it diverges widely and may affect an important decision, try to verify the same information with at least two other sources, and make sure those sources aren't copycatting the information from the same source.

Whether online or off, the byword is, and likely always will remain, Caveat lector — Let the reader beware. [Source: MOAA | Reid Goldsborough | Sept. 17, 2014 ++]

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Coconut Oil ► Ways You Can Use

Coconut oil is having a moment — and not just in stir fries and baked goods. This slightly-sweet oil is a powerhouse that does everything from remove sticky labels to soothe cuts. With a jar running around $10, there are so many uses for this unique ingredient around your home, you may not even use it for cooking.

- **Body lotion:** Use straight from the jar or make your own homemade coconut oil body lotion that soothes dry skin and also helps prevent age spots.
- **Treat athlete's foot:** Athlete's foot is an itchy bother that's caused by a fungal infection, which loves warm, moist, and dark places (meaning your sweaty feet). Thanks to coconut oil's high amounts of antifungal properties, applying three to four times a day for up to a week will clear up the infection.
- **Stop squeaks:** Next time your door or window screeches, rub a little coconut oil on hinges or edges of frames to stop the annoying noise and keep things moving.
- **Sticker remover**: Tired of the stickiness left over from labels? Use coconut oil to help remove the gunk.
- **Wood helper:** Make dry wood furniture happy again with a quick rub of coconut oil. The creamy oil also helps fill scratches in your favorite wood furniture, making things look new again.
- **Wound care:** Due to the high concentration of antibacterial and soothing properties, smoothing a thin layer of coconut oil over a wound helps it stay clean and heal faster.
- **Fight yeast infections:** Apply a small amount to affected area three to four times a day alongside ingesting up to three tablespoons each day during treatment. Coconut oil is high in lauric and caprylic acids, which have antiviral, antimicrobal, and antifungal properties.
- **Boost metabolism:** Coconut oil has healthy components that tackle harmful bacteria while leaving healthy bacteria alone, helping to balance the flora in the digestive system. This results in feeling better, healthier, and happier. Simply replace cooking oil or butter with coconut oil.
- **Banish lice:** It's a topic most don't want to discuss, but sometimes lice happen. Get rid of them fast by massaging coconut oil into hair and leaving overnight. Comb through hair then wash. The high fat content of the coconut oil literally suffocates the lice and helps them slide off hair, and the treatment is safe to use as often as needed.
- **Shine leather:** If you've got an old couch that's seen better days, rub a bit of coconut oil over the cracks to give it new life.
- **Car detailing:** Apply a small amount of coconut oil to a soft cloth and use for wiping down the inside console of your car. Along with cleaning your vehicle, it delivers a subtle tropical smell that lingers.
- **Shave cream:** Coconut oil is a wonderful emollient, so blend it together with essential oils to create a homemade shave cream that keeps legs smooth and also moisturized.
- **Stop dog's itch:** If you've got a pooch that's got an itch or hot spot, massage a dollop of coconut oil on the area to relieve the irritation and soothe his skin.

- **Eye makeup remover:** Simply swipe on a cotton ball and gently wipe eyes, removing eye makeup. And coconut oil helps fight fine lines, so using it to remove make up is a win-win.
- **Natural SPF 4:** Straight from the jar, coconut oil is a natural SPF 4. Use in a pinch when needed with the benefit that you'll feel like you just came from the tropics.
- **Refresh cutting boards:** If your cutting board is feeling a bit dry, rub with coconut oil, let sit for four hours, then buff with paper towel.
- **Stop hairballs:** Tired of kitty constantly leaving hairballs around your house? Rub a small amount of coconut oil on her paws, which will shine her fur and balance her system, cutting down on unwanted surprises on your floor.
- **Cooking:** Coconut oil has a high smoke point, which means it can be used with high-temp cooking. And coconut oil is a rich source of fatty acids and healthier than trans fats or animals fats.
- **Fire starter:** Next time you're going camping or starting a bonfire, soak cotton balls melted in coconut oil, pack in a sealable bag, then slightly pull apart the ball and light. Toss in the kindling and you've got fire. The soaked balls will burn for five to 10 minutes, helping to create a nice blaze.

[Source: MoneyTalksNews | Sarah Lipoff | July 26, 2014 ++]

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Photos That Say it All ► What sacrifice looks like

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WWII Ads ► Camel Cigarettes

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Normandy Then & Now ► Omaha Beach German Bunker

June 7, 1944: US Army troops congregate around a signal post used by engineers on the site of a captured German bunker overlooking Omaha Beach after the D-Day landings near Saint Laurent sur Mer. Today, Tourist stroll past the same bunker.

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They Grew Up to Be? ► Cosby Show - Raven Symone

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Have You Heard? ► Men vs. Women

NICKNAMES - If Laura, Kate and Sarah go out for lunch, they will call each other Laura, Kate and Sarah. If Mike, Dave and John go out, they will affectionately refer to each other as Fat Boy, Shorty and Lofty.

EATING OUT - When the bill arrives, Mike, Dave and John will each throw in $20, even though it's only for $52.50. None of them will have anything smaller. When the girls get their bill, out comes the pocket calculators...YES!!!

MONEY - A man will pay $2 for a $1 item he needs. A woman will pay $1 for a $2 item that she doesn't need but it's on sale.

BATHROOMS - A man has five items in his bathroom: toothbrush and toothpaste, razor, soap, and a towel. The average number of items in the typical woman's bathroom is 337. A man would not be able to identify more than 20 of these items.

ARGUMENTS - A woman has the last word in any argument. Anything a man says after that is the beginning of a new argument.

FUTURE - A woman worries about the future until she gets a husband. A man never worries about the future until he gets a wife.

MARRIAGE - A woman marries a man expecting he will change, but he doesn't. A man marries a woman expecting that she won't change, but she does.

DRESSING UP - A woman will dress up to go shopping, water the plants, empty the bins, answer the phone, read a book, and get the mail. A man will dress up for weddings and funerals.

NATURAL - Men wake up as good-looking as they went to bed. Women somehow deteriorate during the night.

OFFSPRING - Ah, children. A woman knows all about her children. She knows about dentist appointments and romances, best friends, favorite foods, secret fears and hopes and dreams. A man is vaguely aware of some short people living in the house.

THOUGHT FOR THE DAY - A married man should forget his mistakes. There's no use in two people remembering the same thing!

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Words You Don't Hear anymore

Watch for the postman, I want to get this letter to Willie in the mail today.

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Interesting Ideas ► **Reheating Pizza in a Microwave**

Put a small amount of water in a glass to prevent the pizza crust from getting chewy

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NEVER BEFORE SEEN IMAGES
OF SECRET SERVICE CONFRONTATION
WITH FENCE JUMPER
THE PATRIOT POST
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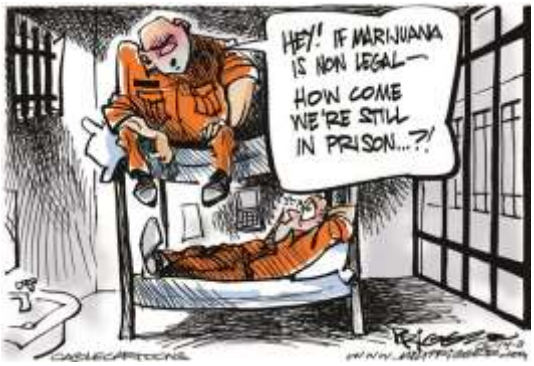
That's all Folks!
GAY-MARRIAGE


HEY! IF MARIJUANA IS NON LEGAL— HOW COME WE'RE STILL IN PRISON...?!

AMBER ALERT
MISSING TODDLER
NAME: KIM JONG UN
HEIGHT: 4' NOTHING
WEIGHT: 250LBS (OR SO)
ALSO ANSWERS TO "DEAR LEADER" "CHUBBY" "DINNER'S READY!!"
IF FOUND, CALL CNN

WON'T BE ABLE TO BUY SMOKES ON BASE?
HAZARD TO OUR HEALTH
NEWS
PENTAGON MULLS ENDING TOBACCO SALES TO GI's
DAVE GRANLUND

Made in CHINA

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