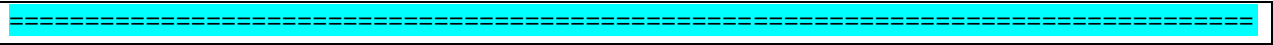


RAO BULLETIN

15 July 2011

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Medal of Honor Update 07: A century and a half after the Medal of Honor was established by Lincoln, another president from Illinois awarded the medal to a living recipient—only the second from the wars in Iraq and Afghanistan. Sergeant First Class and Army Ranger Leroy Petry earned the award when his team came under insurgent attack during a raid in Afghanistan in 2008. A fighter lobbed a grenade at his men, but SFC Petry grabbed it and tossed it away from his men without hesitation. He lost a hand in the process, but saved the lives of his men. As the saying goes, he showed “conspicuous gallantry above and beyond the call of duty.” At <http://www.army.mil/medalofhonor/petry/battlescape.html> is a play-by-play battlescape feature available for viewing which breaks down the event in detail. [Source: Vantage Point Alex Horton article 12 Jul 2011 ++]



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California Vet Home Update 10: Assembly member Linda Halderman, M.D. (R-Fresno) joined veterans' groups and local officials 11 JUL in calling upon Governor Brown and legislative Democrats to restore \$12.1 million in funding to the California Department of Veterans Affairs. The funds are needed to finish building new veterans' homes in Fresno and Redding, but were cut without advance warning in the state budget that the Governor signed last week. “This is a betrayal of the state’s obligation to men and women who served. California’s veterans were thrown under the bus by the Governor and Democrat controlled-Legislature in order to protect union giveaways and big government programs,” said Dr. Halderman. “Their decision to cut \$12.1 million from the California Department of Veterans Affairs will delay the opening of the new Fresno veterans’ home by a year, costing taxpayers more in the long-run. The state should honor the promise it made to our veterans a year ago by immediately restoring funding.”

The Legislature and the Governor's Administration on 28 JUN removed \$12.1 million from the California Department of Veterans Affairs budget to construct new veterans' homes in Fresno and Redding. No public hearings were held on this budget cut. Last year, Governor Schwarzenegger and other officials broke ground on the Fresno veterans' home and promised the facility would open in 2012. The home would house 300 veterans and create hundreds of jobs and millions in economic activity. "Budgets are about priorities. There is no excuse to defund a project that would help those who selflessly served our country," said Dr. Halderman. "My Assembly Republican colleagues and I proposed a budget road map in May that would protect priorities like these without higher taxes. We proposed common-sense reforms and spending cuts in lower priority government programs, but Democrats rejected them. I hope they reconsider this ill-advised cut and restore funding for our veterans immediately." [Source: KSEE 24 News article 11 Jul 2011 ++]

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Purple Heart Vets: A study led by Department of Veterans Affairs (VA) researchers found that aging Veterans who earned the Purple Heart show decreased mortality compared with those who had not earned the medal. Additionally, those war-wounded Veterans who survive into later life -especially those who do not develop posttraumatic stress disorder (PTSD)- may provide valuable clues as to the that lead to resilience to combat stress. A team of VA researchers who studied more than 10,000 Veterans of World War II and the Korean War produced these findings, which appear online in the journal *Depression and Anxiety*. "Among the older Veterans we studied, those with Purple Heart citations had half the mortality rate of those without Purple Heart citations," said lead author Tim Kimbrell, MD, a physician-researcher with the Center for Mental Health and Outcomes Research, based at the Central Arkansas Veterans Healthcare System. Whether the Purple Heart holders had chronic PTSD or not, they were about twice as likely to still be alive after some 10 years of follow-up, compared with those with no Purple Heart and no PTSD. The study included Veterans who were 65 and or older in the late 1990s. It tracked their survival through 2008.

It is estimated that more than a million Servicemembers received a Purple Heart in World War II, and nearly 119,000 in the Korean War. In recent years, researchers with VA and the Department of Defense have sought insight into the psychological and neurobiological factors that enable some Servicemembers to not develop PTSD after traumatic events. The authors of the new VA study say Purple Heart holders who survive long past their war experience without PTSD may be the ideal population on which to focus such research. "Our theory was that there are many factors that contribute to resilience to PTSD, and these same factors may increase survival," said Kimbrell. The researchers were surprised to find that among Purple Heart recipients, those with PTSD had slightly lower mortality than those without PTSD. This is a contradiction to several studies that have shown a link between chronic stress conditions such as PTSD and worse survival. Kimbrell and colleagues suggest this finding is due to what they term "early attrition." Those who had been physically injured in World War II or Korea and suffered PTSD may have been less likely to survive until age 65 in the first place; the PTSD-Purple Heart group included in their study may have been an exceptionally healthy and hearty cohort of Veterans. The researchers say further studies involving these Veterans, as well as those who were wounded in combat but did not develop PTSD, may lead to new insights to help prepare future Servicemembers to cope with the stress and trauma of war.

Kimbrell, in addition to his VA role, is also a professor at the University of Arkansas for Medical Sciences. He collaborated on the study with other authors from his site, as well as with colleagues from the Houston Center for Quality of Care and Utilization Studies, at the Michael E. DeBakey VA Medical Center; Baylor College of Medicine; the Ralph H. Johnson VA Medical Center in Charleston, SC; the Medical University of South Carolina; and the University of Texas Health Science Center. For more information on VA research, visit www.research.va.gov. [Source: VA News Release 12 Jul 2011 ++]

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VA Vet Contaminant Exposure Update 09: A Coral Gables veteran who filed a \$30 million medical malpractice lawsuit charging that an improper colonoscopy at the Miami Veterans' Administration hospital gave him life-threatening hepatitis C was scheduled to Miami to appear in federal court 11 JUL in the first of what could be dozens of similar trials. More than 11,000 U.S. veterans received colonoscopies with improperly cleaned equipment at VA hospitals in Miami, Murfreesboro, Tenn., and Augusta, Ga., between 2004 and 2009. Of the

veterans who had the procedure at the three facilities, five have tested positive for HIV, 25 for hepatitis C and eight for hepatitis B. In Miami, 11 additional suits charging emotional distress have been settled out of court for undisclosed amounts, the U.S. Attorney's office said. Nine malpractice suits have been filed in Tennessee. Officials in Georgia couldn't say how many have been filed there. None has gone to trial until now.

Robert Metzler, now 69, a U.S. Air Force veteran, says he got a colonoscopy at the Miami VA hospital in 2007 and two years later was told he has hepatitis C. Metzler's medical malpractice suit against the VA asks for \$20 million for him and \$10 million for his wife, Lucy Ann, for loss of consortium. Miami Assistant U.S. Attorney Lawrence Rosen, who's defending the VA, declined to comment on the case. Court documents he filed in the case acknowledge the VA "breached" a "duty of reasonable care" with the vets by using improperly cleaned equipment, but deny the equipment caused the health problems. In another Miami VA colonoscopy case settled out of court in March, the plaintiff's lawyer says the VA tracked down his client's ex-girlfriend from 10 years earlier to see if she — rather than the VA equipment — might have been the source of his HIV. "They don't want to open the floodgates and take responsibility for every one of the veterans who may or may not have been infected by their procedures," contends Alexander Perkins, the plaintiff's lawyer in that case.

The lawsuits were filed after a 2009 investigation by the VA's own Administrative Investigation Board revealed more than 11,000 colonoscopies were done at three VA hospitals using equipment that had been rinsed after each patient rather than being sterilized by steam and chemicals as called for by the manufacturer. Investigators who took apart water tubes on some of the equipment that was supposed to be clean and ready for use instead found "discolored liquid and debris." The AIB report said the colonoscopies in Miami were done in an environment of inadequate training, lack of supervision and inadequate communication. In the case settled out of court in March, U.S. Army veteran Juan Rivera of Miami sued for medical malpractice when he became HIV positive after a colonoscopy at the Miami VA hospital. Rivera, who is single, had asked for \$20 million. Neither side would reveal the size of the settlement in that case. Rosen represented the VA in that case as well as Metzler's. Rivera is "doing OK, on antiviral drugs," Perkins says. The VA has promised lifetime care for all infected veterans, even if it can't be proved they were infected at the VA hospitals.

In the Metzler case, court papers filed by Rosen in April 2011 argue that the chances that the veteran contracted hepatitis C from the VA equipment are no more than "two in one trillion." Hepatitis C can't survive outside a human host for more than four days, the documents say, and "substantially more than four days had passed" between any previous patient with Hepatitis C who had a colonoscopy and the one performed on Metzler. In the court papers, Rosen downplays the seriousness of the illness, asserting that Metzler "more likely than not will be completely cured of this infection...The plaintiff's current disease state is minimal, and liver function is normal. Experts agree that the medications becoming available will cure plaintiff of all symptoms." Gonzalez, Metzler's lawyer, responds that the veteran has "fatigue, dry skin, insomnia, hot flashes. He has virus-like symptoms. He worries he may need a liver transplant or get cancer." Metzler's case is based on the assertion that he had a blood test in August 2006 at the VA, with no sign of hepatitis C, Gonzalez said. His colonoscopy was in June 2007 and he was notified in March 2009 that he needed to come in to the VA for testing because the endoscope used in the procedure may have been contaminated, the lawyer said. A month later, he was told he was positive for hepatitis C.

In Tennessee, Nashville lawyer Mike Sheppard filed suit for three veterans and filed notice of suit for 18 more treated at the VA hospital in Murfreesboro. One has HIV and 18 have hepatitis C or B. The U.S. Attorney's Office for that district says it has received notice of nine colonoscopy cases against the VA. A federal court has dismissed two cases, the VA has filed motions to dismiss in four others and has not yet responded to the remaining three cases, said Mark H. Wildasin, civil chief for the U.S. Attorney's Office in Nashville. No case has come to trial, he said. [Source: Miami Herald Fred Tasker a=article 11 Jul 2011 ++]

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COLA 2012 Update 03: The ongoing effort to rein in federal spending includes a possible change in the way cost-of-living adjustments are calculated. If that happens, military retirees could lose a lot of money. Army Times reported that even the small change being discussed—an average of 0.25 percentage points—would cost a military retiree thousands of dollars over his or her lifetime. The publication noted that an active-component E-7 retiring this year after 20 years in uniform would receive more than \$109,000 less in retired pay over a 40-year

period. That's a drop of 5.6 percent from what that retiree would receive under the current calculation. For an O-5, the figure would be nearly \$208,000, or a 5.5 percent difference. Also affected by the possible change would be retired federal workers and Social Security recipients, among others. According to Army Times, Congress and the White House are considering changing the index to which COLA is currently figured. It is now tied to the Consumer Price Index for Urban Wage Earners, which tracks the costs of goods and services. Under consideration is a switch to the Chained Consumer Price Index for Urban Consumers, which includes nonwage earners. Over the last year, it has increased at a slower rate than the other index and economists predict the difference over time would be .025 percent. [Source: NGAUS Washington Report 12 Jul 2011 ++]

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Vet Housing Update 03: An Iraq war veteran from Texas sued a Citigroup unit 8 JUL, claiming the lender illegally foreclosed on his home he was on active duty. Army Sgt. Jorge Rodriguez said in a complaint filed in federal court in Manhattan that he was in training for deployment to Iraq in 2006 when CitiMortgage filed a foreclosure suit against his home in Del Valle, on the outskirts of Austin. CitiMortgage lawyers falsely said in an affidavit that Rodriguez wasn't on active service at the time, depriving him of protection under the Servicemembers Civil Relief Act, or SCRA, according to the complaint. Rodriguez is seeking to have the suit certified as a class action against CitiMortgage on behalf of other service members whose homes were foreclosed. "This was not an isolated incident," Rodriguez said in the complaint.

Beginning in DEC 03, "CitiMortgage initiated thousands of foreclosure proceedings across the United States without adequate safeguards to ensure that service members on active duty were not targeted by CitiMortgage's foreclosures." The suit seeks unspecified damages and an order restoring to service members possession of properties foreclosed in violation of the SCRA. Sean Kevelighan, a Citigroup spokesman, said the bank is looking into the matter. Bank of America Corp. and Morgan Stanley agreed in May to pay \$22.4 million to resolve U.S. allegations that they improperly foreclosed on active-duty soldiers. JPMorgan Chase & Co. earlier agreed to a \$56 million settlement of claims that it illegally overcharged military personnel on home loans. [Source: Bloomberg News Bob Van Voris article 8 Jul 2011 ++]

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Vet Cemetery Philippines: Walking along the rows of tombstones at the Clark Veterans Cemetery offers a glimpse of the wars America has fought and the men and women who waged them. But most of the grave markers have been half-buried for 20 years, and there is little hope that the volcanic ash obscuring names, dates and epitaphs will be cleared any time soon. Clark Veterans Cemetery was consigned to oblivion in 1991, when Mount Pinatubo's gigantic eruption forced the U.S. to abandon the sprawling air base surrounding it. Retired U.S. soldiers, Marines and sailors volunteer to keep watch, relying on donations to try to maintain the grounds, but they lament that they're helplessly short on funds to fix things, and that Washington is unwilling to help. As America marked Independence Day, the U.S. veterans who collect funds to care for the cemetery renewed their calls for Washington to fund and take charge of the work.

Workers at the cemetery north of Manila recently dug to fully expose a gravestone for an Army sergeant who died in World War II in the Philippines. They discovered his wife's name engraved under his and a long-hidden tribute: "Daughter, sister, wife and mother of veterans." It's impossible to say what else remains hidden at the 17-acre (seven-hectare) cemetery. It holds the remains of 8,600 people, including 2,200 American veterans and nearly 700 allied Philippine Scouts who saw battle in conflicts from the early 1900s to the resistance against brutal Japanese occupation troops in WWII. Clark's dead also include military dependents, civilians who worked for the U.S. wartime government and at least 2,139 mostly unidentified soldiers whose marble tombstones are labeled "Unknown." "People celebrate on the Fourth of July but they forgot the 8,600 who helped make that freedom happen," said former Navy Capt. Dennis Wright, who saw action in Vietnam and is now a business executive. "We're trying to get the U.S. government to assume responsibility for maintaining the cemetery so we can get it up to standards ... not on nickels and dimes and donations and gifts," said retired Air Force Chief Master Sgt. Larry Heilhecker, who served as cemetery caretaker for five years until last month.



In this July 1, 2011 photo, the flag-draped coffin of Erskine Ralph Milward, Chief Warrant Officer 3, U. S. Army retired, is prepared for burial rites at Clark Veterans Cemetery

Clark was a U.S. base for nearly a century and was once the largest American Air Force installation off the U.S. mainland. It served as a key staging area for U.S. forces during the Korean and Vietnam wars. The Clark cemetery, which can accommodate at least 12,000 remains, was developed between 1947 and 1950, when it was used to collect the remains and tombstones from four U.S. military cemeteries as American officials sorted out their dead from WWII and previous wars. An American cemetery at the then-Fort McKinley in Manila became the exclusive burial ground for all Americans and allied Philippine Scouts who were killed in WWII combat. The 152-acre (61-hectare) Manila cemetery collected 17,202 dead, the largest number of American casualties interred in one place from the last world war. Now closed to burials, the stunningly landscaped Manila cemetery became one of 24 American burial grounds outside the U.S. mainland. Nearly 125,000 Americans who perished in WWI and WWII and the Mexican War are interred in those U.S.-funded overseas cemeteries, regarded as among the most beautiful war memorials in the world. The overseas burial sites are administered by the American Battle Monuments Commission, or ABMC.

The dead at Clark are not limited to World War II casualties—they date as far back as 1900. Also unlike the Manila cemetery, it continues to accept burials. One U.S. veteran who lives in the area had his son buried here after he was killed in Iraq in 2004. But Clark is not administered by the ABMC. The Air Force managed Clark cemetery from 1947 to 1991, when it abruptly left after nearby Pinatubo roared back to life from a 500-year slumber. Even before the eruption, negotiations with the Philippine government for a new U.S. military lease on Clark had bogged down after nearly a century of presence in the Philippines, according to the veterans. Philippine authorities failed to look after the cemetery. In 1994, American veterans were shocked to find it had become an ash-covered jungle of weeds, overgrown grass and debris. Half of its old steel fence had been looted. Today, a pair of U.S. and Philippine flags flutter in the wind over the graves. A recently restored marble obelisk, pockmarked by World War II gun and artillery fire, venerates the unknown dead. A small sign at a new steel gate ushers in visitors with a tribute to the war dead: "Served with honor."

All the improvements came from donations. Wright's company spent \$90,000 to construct a new concrete and steel fence and a parking lot and make other improvements. An old veteran, confined to a nursing home in Florida, sent one dollar in a touching act, Heilhecker said. Ret. U.S. Air Force Technical Sgt. Littleton John Fortune has been giving small amounts from his pension for the upkeep of the cemetery, where many of his friends lay. He said the worst day in his life came in 2004 when his son, a young Army sergeant, was killed by a bomb in Iraq. He buried his son at Clark and continues to help the cemetery. Still, the Clark gravesites look forlorn compared to the American cemetery in Manila. A U.S. government decision to take control of the Clark cemetery could shed light on the fate of still-missing Americans, Wright said, citing the case of a U.S. Army Staff Sgt. Hershel Lee Covey, whose name is on a Clark cemetery tombstone that declared him as having died on July 17, 1942 in the Philippines. A check by The Associated Press showed ABMC lists Covey as "missing in action or buried at sea."

Dashing the hopes of the American veterans, the ABMC and the Department of Veterans Affairs, which manages 131 U.S. mainland cemeteries through an agency, both said Clark was outside their mandate. "Whether the U.S. government should take on responsibility for maintaining such a foreign, private cemetery is a veterans' benefits issue outside the scope of our authority," ABMC public affairs director Michael Conley told the AP in an e-mailed reply to questions. U.S. Ambassador to Manila Harry Thomas, who has visited the Clark cemetery twice, praised the American veterans for looking after the burial grounds, which he said volunteer embassy staff and visiting U.S.

sailors have helped clean up. But he said the U.S. Congress only appropriates funds for official cemeteries overseas through the ABMC, Thomas said. Philippine officials have authorized an American veterans' group led by Chesko to manage the Clark cemetery up to 2030, and have said they are open to allowing any U.S. agency to manage it. "Without them, we wouldn't have this freedom now," said Felipe Antonio Remollo, president of the state-run Clark Development Corp., which oversees the former base, now an industrial and commercial hub. Once developed and possibly turned into a war memorial, the cemetery could draw in tourists, Remollo said.

Clark's elderly veterans, some of whom become teary-eyed when reminiscing days with fallen comrades, worry about who will look after the cemetery as their ranks dwindle. Two passed away and were buried last week. "We're getting old. We can feel it in our bones, you know, in mind and everything," said 65-year-old Chesko. He has wondered whether fallen soldiers' sacrifices still matter to young Americans. "What bothers me sometimes is, will they still remember?" Chesko said. The new cemetery caretaker, John Gilbert, said the veterans were not trying to pass the responsibility. "We're proud to do it, don't get me wrong, but we do not have the resources to do it," said Gilbert. They would have no choice if Washington ignores their pleas, he said. "We are not ready to let this cemetery be taken back by the jungle," he said. "If we have to do it ourselves, we will do it. We don't leave our brothers behind." For further info refer to the Clark Veterans Cemetery Restoration Association at <http://www.vfwpost2485.com/CVCRA.htm>. [Source: AP Jim Gomez article 7 Jul 2011 ++]



A private guard walks along soil-covered grave markers at Clark Veterans Cemetery at the sprawling Clark Economic Zone, a former U.S. Air Force base in Dau, Pampanga province in northern Philippines. Retired U.S. soldiers, who voluntarily are keeping watch over the burial grounds, where some of their comrades lay, are waging a low-key battle to prod Washington to fund and take charge of the 2-acre (eight-hectare) cemetery.

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Volunteer Opportunities: The United We Serve website <http://www.serve.gov> provides a search engine that enables military advocates and supporters looking for volunteer opportunities to enter a city and state location and get a list of organizations that are seeking volunteers. The website allows users to narrow searches to match the type of organizations or activities they desire to support. For more details on support groups for the military, visit the Military Spouse Network <http://www.military.com/military-spouse-network>. [Source: Military.com 11 Jul 2011 ++]

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Commissary Coupon Use Update 03: Overseas Army and Air Force exchanges (AAFES) and commissaries accept coupons up to six months after their expiration date. Newspapers there don't contain them and sites often won't let those IP addresses print them, making coupons very difficult to come by for overseas families. The policy is one of the only ways families can use coupons at all. AFEES all but started a Facebook riot recently when they wrote on their wall that, thanks to the changing coupon acceptance policy of manufacturers, they were reexamining their rule around the acceptance of old coupons. The post, which has since been removed, sparked mass confusion and panic among overseas coupon users, speculation over whether or not the commissary would follow suit and demands to know who, exactly, these manufacturers are.

To clarify, policy has been to only accept current coupons yet overseas Exchanges have made exceptions. Initial posting of the notice was due to pending industry changes. The Exchange has no immediate plans to stop granting the exception overseas. A representative with AAFES said they will continue to accept them for the foreseeable future but "... the Exchange is a flexible entity and prepared to adapt to industry changes as they occur." Also, officials at the commissary have given assurances that they have no intention of changing their overseas coupons rules. In short, yes — it might change. But it isn't changing today.

It's important to remember how coupons work on the manufacturer and store ends. When a patron hands a coupon to a clerk, that discount comes out of the store's pocket until the coupon is mailed in and reimbursed by the manufacturer. According to one source, each manufacturer has a different grace period for accepting the coupon after that expiration date. Even coupons submitted stateside on the last day may not be mailed-in by that window. Those out of pocket costs to AAFES and the commissary are absorbed as operating costs by the store and never reimbursed. Coupons, particularly those used overseas, are a gift. It's good to hear that AAFES and the commissary are not shutting down their use ... yet. But when budget crunch time comes and people start throwing around ideas to reduce cost, that lax policy may go away.

If you want to help OCONUS families get coupons, there is a way to forward your unused coupons to them via the 'Support Our Troops organization'. Surplus and/or expired food and non-food manufacturer coupons can be mailed to Support Our Troops, P.O. Box 70, Daytona Beach, FL 32115-0070. They in turn will forward them to overseas locations. Expired coupons are accepted until they are two months old. For more info on this refer to http://www.supportourtroops.org/index.php?option=com_content&view=article&id=1435. [Source: Military Life, Spouse & Family News, by Amy article 1 Jul 2011 ++]

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TRICARE Philippines Update 02: Effective 1 SEP 2011, reimbursement of pharmaceuticals in the Philippines will be cost-shared only when purchased at a licensed retail or hospital-based TRICARE certified pharmacy. Claims for reimbursement of pharmaceuticals purchased or issued after this date from other than a licensed retail or hospital-based TRICARE certified pharmacy will be denied. To provide beneficiaries with a variety of locations to fill their prescription needs, the nation-wide chain of Mercury Drug retail pharmacies has been added as TRICARE certified providers. Beneficiaries may also locate other TRICARE certified pharmacies by going to the website: <http://www.tricare.mil/tma/pacific/pacificcertifiedproviders.aspx>. Providers and beneficiaries in the Philippines will receive letters in August 2011 about this change. [Source: TRICARE Marketing and Benefits Coordinator Roger D. Barker msg. 7 Jul 2011 ++]

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VA Claims Backlog Update 53: Results of an online survey conducted last winter by The American Legion reveal just how frustrated veterans are with backlog-choked VA Regional Offices across the country. Of the 2,145 who responded, 96 percent were veterans, 2 percent spouses and the remainder were dependents, caregivers or others. The survey was conducted to establish a foundation of understanding before American Legion Regional Office Action Review (ROAR) teams began visiting the offices to see where the

problems are and what might be done to correct them. VA has been mired in a backlog of unresolved benefits claims for several years. It is now believed to be nearly 1 million and growing. According to a report documenting the results of the ROAR online survey:

- 85 percent of respondents described the overall performance of the regional offices as "inefficient and untimely." Only 6 percent said their claims were adjudicated in 120 days or less, a standard VA Secretary Eric Shinseki has set as a goal for the department. At the 92nd American Legion National Convention in 2010, he told Legionnaires, "We intend to break the back of the backlog."
- Fifty-seven percent of survey respondents reported a processing time of one year or longer.
- Survey respondents expressed an understanding that there is a large volume of claims for VA to process, and it will take some time." However, respondents also expressed frustration about VA's failure to communicate clearly about the status of claims. While 50 percent indicated that professional courtesy at the regional office was at least adequate, 31 percent were dissatisfied about the way they were treated.
- The survey illuminated: lost paperwork. "A large percentage of respondents indicated that paper evidence they submitted had been lost even after certified arrival at the regional office," the report states. "A small percentage complained that their entire claims file had been lost."
- A common problem reported throughout the country is the practice of making veterans go out of their way for compensation and pension examinations, often "hundreds of miles away from their homes when there (is) an equipped facility within 25 miles."
- Sixty-six percent of respondents reported difficulty accessing their regional offices at all.
- Veterans reported "extreme frustration" with VA's lack of flexibility, short notice of appointment openings and examiner politeness at C&P examinations, according to the report.
- 65 percent said they were not treated fairly by adjudicators, and 54 percent said they intended to appeal VA's decisions. Claimants didn't feel that all evidence in the file was reviewed before a decision was made on the claim.
- Seventy percent said they would like to see VA hire more veterans to reduce the backlog and improve performance, and some participants suggested other strategies to improve regional offices, including:
 - 1) Institute a "call-back" system to reduce the amount of time veterans have to wait on the phone, on hold with VA's call center.
 - 2) Convert the claims-adjudication process to an electronic system.
 - 3) Allow veterans to review C&P examination results before adjudication to correct omissions.
 - 4) Expedite all pension claims because pension claims are income-based, and "it should be assumed that all applicants are experiencing financial hardship."

The American Legion's Veterans Affairs & Rehabilitation Division launched the ROAR program last spring to strengthen the organization's understanding of the claims backlog and help VA set priorities to begin reversing it. Through June, the Legion had conducted site visits at six regional offices to discuss issues reported in the online survey and to work out solutions. The Legion's VA&R Division is sharing results of the survey with VA Central Office. [Source: AL Online Update 7 Jul 2011 ++]

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VA Sexual Assaults Update 03: A San Diego psychologist has exposed the alarming increase of sexual misconduct among the military. Carolyn Allard, a psychologist with the Veteran's Affairs Department, said she knew men and women in the military were being subjected to military sexual trauma, or MST, but she never realized the full extent. "One in five women report experiencing MST when they come to the VA and one in 100 men report experience with MST," she said. Allard co-authored a new study for the June issue of the Journal of Trauma and Disassociation. "What's really alarming is if you factor the unreported number of men and women this is happening to," she said. The study revealed 24 percent of women and 1 percent of men reported some sort of MST, which ranges from inappropriate comments to physical assault. However, if the unreported number is factored in, it jumps to 80 percent of women and 30 percent of men have had experience with MST. Of the 48,000 veterans who were screened at the end of fiscal year 2010, more than 3.2 percent reported some form of MST. That is almost

a full percentage point higher than the national average outside the military. "The good news is that we can take the findings of this study and move forward towards better reporting and more important treatment and prevention, which the Department of Defense is fully committed to," said Allard. [Source: San Diego 10News.com article 5 Jul 2011 ++]

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Louisiana Vet Legislation Update 01: Calling it "a small thank you," Gov. Bobby Jindal signed a bill into law 5 JUL that extends benefits to Louisiana National Guardsmen disabled in action and to the families of those killed in action, retroactive to 2001. Jindal signed flanked by its author, Rep. Nick Lorusso, R-New Orleans, National Guard officials and family members of four guardsmen killed in action who will receive benefits. "It's fitting on the heels of Independence Day we are here to sign this bill that will ensure military families get the benefits they deserve," Jindal said. "We know no amount of money will bring their loved ones back. " I guarantee every one of these families would rather see their husband, their son, their brother walk through that door than to have this check. We can never pay them back. What we can do is show we care."

House Bill 143 extends benefits to guardsmen called to active duty since Sept. 11, 2001. A 2007 bill provided such benefits, but only for guardsmen killed or disabled after that bill was passed. HB 143 amends the benefits, extending them back to the start of the War on Terror. "This is not about money," said Larry Murphy of Crown Point, whose son was killed in action in Iraq in 2005. "This is about justice and seeing everybody treated equally." Sgt. Warren Murphy was killed along with six other soldiers when an improvised explosive device detonated near their vehicle in Taji, near Baghdad. Larry Murphy, a Navy veteran whose other son, Sean, is in the National Guard and stationed at Camp Beauregard, made the trip with his wife, Bonnie, to witness the ceremony. "For me personally, it's about solidarity," Murphy said. "You can't separate these people from those people when they're fighting in the same operation. What's fair for one is fair for all."

The benefit is \$250,000 for a fatality and \$100,000 for a permanent disability. Under the new legislation, two guardsmen disabled and the families of 32 guardsmen killed from 2001-07 will receive more than \$8 million in benefits. "This gives certainly peace of mind for many of our soldiers here," said Maj. Gen. Bennett Landreneau, the adjutant general of the Louisiana National Guard. "As we remember those who made the ultimate sacrifice, it makes us very comfortable to know it will help families who are so deserving." Lane Carson, secretary of Louisiana Department of Veterans Affairs, said, "I am proud to live in a state that values the sacrifices made by our military personnel and supports their families in times of loss." [Source: The News Star Jeff Matthews article 5 Jul 2011 ++]

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VA Women Vet Programs Update 13: The Department of Veterans Affairs (VA) has embarked on a major initiative to reach out to women Veterans in order to solicit their input on ways to enhance the health care services VA provides to women Veterans. "We are taking a proactive approach to enhancing VA health care for women Veterans," said Secretary of Veterans Affairs Eric K. Shinseki. "We are seeking the input of women Veterans so that VA can continue to provide high quality health care to the growing numbers of women Veterans." Representatives at VA's Health Resource Center (HRC) are placing calls to women Veterans nationwide, asking them to share their experiences with VA and suggest potential enhancements that will further VA's mission to provide the best care anywhere. Women Veterans are one of the fastest growing segments of the Veteran population. Of the 22.7 million living Veterans, more than 1.8 million are women. They comprise nearly 8 percent of the total Veteran population and 6 percent of all Veterans who use VA health care services. VA estimates by 2020 women Veterans will constitute 10 percent of the Veteran population and 9.5 percent of VA patients.

The HRC, which started placing calls on 1 JUN, is contacting women Veterans who have enrolled, but have not begun using VA services. "Through this contact center, we are placing friendly, conversational calls to women Veterans," said Patricia Hayes, chief consultant of the VA's Women Veterans Health Strategic Health Care Group. "We want these Veterans and their caregivers to talk candidly about why they are not using VA, whether they are aware of the gender-specific services we offer, and what additional services they would like to see VA offer." The HRC representatives making the calls are also informing women Veterans about the services VA offers and quickly connecting them with appropriate departments if they are interested in trying VA health care. Veterans who have

complaints about VA are connected to a patient advocate who helps resolve issues. VA has trained professionals in all aspects of women's health, including general primary care, osteoporosis management, heart disease, mental health care, menopausal services and obesity-related issues, such as diabetes. Preventive screenings for breast and cervical cancer are also areas in which VA excels. Soon, all VA facilities will offer comprehensive primary care for women from a single provider.

The Women Veterans Health Care program has made significant changes in the last few years to enhance the health care offered to eligible women Veterans. This progress includes:

- * Adopting key policies to improve access and enhance services for women Veterans;
- * Implementing comprehensive primary care for women Veterans;
- * Conducting cutting-edge research on the effects of military service on women's lives;
- * Improving communication and outreach to women Veterans; and
- * Providing mental health, homelessness and other services designed to meet the unique needs of women Veterans

For more information about VA programs and services for women Veterans, refer to <http://www.va.gov/womenvet> and <http://www.publichealth.va.gov/womenshealth>. [Source: VA News Release 7 Jul 2011 ++]

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Mobilized Reserve 5 JUL 2011: The Department of Defense announced the current number of reservists on active duty as of 5 JUL 2011. The net collective result is 1,772 fewer reservists mobilized than last reported in the 1 JUL 2011 RAO Bulletin. At any given time, services may activate some units and individuals while deactivating others, making it possible for these figures to either increase or decrease. The total number currently on active duty from the Army National Guard and Army Reserve is 72,022; Navy Reserve 5,007; Air National Guard and Air Force Reserve, 10,331; Marine Corps Reserve, 6,191; and the Coast Guard Reserve, 782. This brings the total National Guard and Reserve personnel who have been activated to 94,333 including both units and individual augmentees. A cumulative roster of all National Guard and Reserve personnel who are currently activated may be found at <http://www.defense.gov/news/d20110705ngr.pdf>. [Source: DoD News Release No. 583-11 dtd 6 Jul 2011 ++]

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July 5, 2011

Bariatric Surgery Update 03: In the first study to compare survival associated with bariatric surgery in mostly male patients, bariatric surgery was not significantly associated with decreased mortality, according to a research study published in the 15 JUN issue of the Journal of the American Medical Association. "At VA, we are committed to delivering the best care possible to Veterans," said Secretary of Veterans Affairs Eric K. Shinseki. "VA's research program plays an invaluable role by continually evaluating available approaches to determine their benefits and risks in different populations." In recent years, there has been a substantial increase in the prevalence of obesity, which is a challenge to treat. Bariatric surgery is the most effective way for severely obese patients to achieve weight loss.

The bariatric surgery study compared mortality rates for 850 obese Veterans who had received the procedure at one of 12 VA bariatric surgery centers between 2000 and 2006. These Veterans were considered to be "high-risk" due to older age and greater weight in comparison to more than 41,000 obese Veterans who had not received bariatric surgery, but had used VA outpatient services. The study also compared mortality rates for 847 obese Veterans who had received bariatric surgery and 847 matched obese Veterans who had not received bariatric surgery. Patients were followed for nearly 7 years. "By evaluating one important treatment option for obesity, this study represents another significant advance in defining best care approaches for those who entrust their health to VA," said Dr. Robert A. Petzel, VA's Under Secretary for Health.

The study was designed to shed light on the benefits of bariatric surgery in a defined group of patients over a limited timeframe. Despite this study's findings, study investigators are not suggesting VA stop doing bariatric

surgery for certain patients. "Significant weight loss results in improved disease control and quality of life for patients, so there are many reasons why patients like those in our study may still want to undergo bariatric surgery," said Dr. Matthew Maciejewski, the study's lead investigator and part of the Health Services Research and Development Center for Health Services Research in Durham, N.C. " Also, other studies, conducted on different patient populations, have found bariatric surgery to be associated with reduced mortality and have also suggested that survival benefits from surgery-induced weight loss may take longer than six years to become evident."

An analysis of the 1,694 propensity-matched patients found that bariatric surgery was not significantly associated with reduced mortality. Maciejewski recommends that Veterans who are considering bariatric surgery in VA, and who are similar to Veterans examined in this study, "should be counseled by their VA surgeon that bariatric surgery may not impact their survival in the medium term (6-7 years), but that the long-term association with mortality remains unknown." Moreover, because a high proportion of Veterans with diabetes or high cholesterol are able to discontinue their medications after bariatric surgery, he suggests that longer-term survival benefits be examined for Veterans who had bariatric surgery after 2006, before VA changes its policy and/or guidelines.

Dr. Joel Kupersmith, VA's Chief Research and Development Officer, notes that VA considers all associated evidence in any policy decision, but notes this is just one study. "It is by conducting leading-edge research studies such as this one on bariatric surgery, and evaluating the meaning in the context of all rigorous scientific evidence, that VA Research provides the foundation for optimal Veterans' health care," he said. Dr. Maciejewski also does not recommend that insurers stop covering bariatric surgery for high-risk patients based on these study results because, "survival is just one aspect of the cost-effectiveness of bariatric surgery, which has been shown to be cost-effective for eligible patients." [Source: VA News Release 7 Jul 2011 ++]

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Health Care Reform Update 42: The American Medical Association saw another steep drop in its membership in 2010 -- this time losing about 12,000 members or 5% of its total membership, the group announced Sunday during its 2011 House of Delegates meeting. In 2010, the AMA's had a total membership of 215,854, down from 228,150 in 2009. Numbers for 2011 are not yet available. While the AMA remains the nation's largest physician's group, membership has dropped sharply since the group endorsed President Obama's healthcare reform plan, which became law last year. Many in the organization quit in protest, and many more continue to quit. "Individual membership in the AMA continues to plummet as physicians see less value in their AMA membership, and increasingly perceive the AMA to be a less responsive organizational bureaucracy..." the District of Columbia delegation wrote in a resolution it introduced to reorganize the group's House of Delegates. Membership declines were most acute in Southern states -- the same region in which state medical societies have been championing opposition to the Affordable Care Act (ACA).

Daniel Edney, MD, a nephrologist and delegate for Mississippi, placed his state's membership at just 600 doctors. Mississippi had 2,327 members in 2010, according to the AMA. "It's PPACA and we all know it," Edney said, referring to the original full name of the law, the Patient Protection and Affordable Care Act, which has since been shorted to just the Affordable Care Act. "PPACA is what is driving all of our doctors crazy." But not all doctors oppose ACA, as evidence by the number of members -- most of them younger physicians -- who testified in support of the ACA's individual mandate during a Sunday session on the ACA provisions. The number of members in Alabama has dropped so much that the House of Delegates was set to strip away one seat from the state this year, said W. Jeff Terry, MD, a urologist and delegate for Alabama. But the House agreed to hold Alabama's seats at five and give the delegation a year to try and get its membership back up, Terry said. Which will be a difficult task, he admits. Many doctors in his state were so angry with the AMA for supporting healthcare reform that they resigned their memberships. "That was the one issue that caused the drop in membership," Terry told MedPage Today.

Terry has been trying to convince doctors in his state that like it or not, the AMA is the voice of doctors, at least in the minds of the public, and they're better off having their voices heard. Plus, the organization should have a diversity of opinions, he said. If the deflected docs don't rejoin, and more keep quitting, the AMA "will just be a bunch of people who think exactly the same," Terry said. But for those who quit in protest of the AMA's support of the healthcare reform law, it's an emotional thing, he said, likening the split to a divorce. "It takes a while to get over it," he said, adding he hopes Alabama members will eventually rejoin, but admits it will likely take a while. The

AMA reported that membership dues revenue decreased by \$4.2 million in 2010 -- down nearly 10% from 2009. Annual dues for active physician members are \$420, but students -- who comprise 21% of the AMA's membership, pay just \$20 a year. [Source: MedPage Today | Emily P. Walker article 20 Jun 201 ++]

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Automated Phone Menus: A survey by Consumers Union of 1000 people disclosed that 71 percent were extremely irritated when they couldn't reach a human on the phone. Websites such as <http://www.dialahuman.com> and <http://gethuman.com> list customer service numbers and tell how to bypass automated prompts to get a real person. Another free service, <http://www.lucyphone.com>, will help you avoid sitting on hold by letting you to provide your phone number and hang up. The service calls you back when a live representative is on the line. Other Tips for getting to a human:

1. Dial O, or try multiple zeros
 2. You can add the # key or the * key before and after a 0
 3. Dial multiples of other numbers 1111, 2222, 3333, 4444, etc.
 4. Being silent sometimes works (believe it or not some people still have rotary phones)
 5. Speak non-sensible phrases to confuse computer
 6. Try speaking and repeating "Operator" or "Customer Service"
 7. If there is a company directory, press just one letter and then try to connect to that person and then may transfer you or give you an inside phone number
 8. Make sure once you get a human, ask for the direct line to call (and then email us with it!)
- [Source: MoneyTalksNews Karla Bowsher article 22 Jun 2011 ++]

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Displaying the Flag Update 01: As a patriotic gesture after the tragedy of September 11, 2001, Bodger Seeds, planted a Floral Flag in Lompoc, California. It had been 50 years since they have planted such a flag. It was planted in January 2002 and was in full bloom on July 4, 2002. There have been four Floral Flags planted by Bodger Seeds in Lompoc during the last century: 1942, 1943, 1945, 1952. All of the flags were comprised of Red, White and Blue Larkspur flowers. Some of the flags were planted in a background of White Larkspur. Either the 1943 or the 1945 flag was a 'wavy' flag that was a failure. The first Floral Flag was planted a week after the bombing of Pearl Harbor, 1941 and was in bloom during the early summer of 1942. That flag was 455 feet long and 260 feet high, equaling 2.75 acres. It was planted in a 9 acre field of White Larkspur. The Stars were 10' x 10' and the Stripes were 22 feet wide. It was estimated to contain 200,000 Larkspur plants. The 1952 Floral Flag was planted with Stripes of varying widths so that the flag would retain proper perspective from the top of Lookout Point, approximately 1/4 mile to the south. This Flag was 7 acres square: 550 feet long and 540 feet wide. The Stripes were 33 feet wide on the south end of the flag and became progressively wider to a maximum of 53 feet wide on the north end of the flag.

This 2002 Flag was the first to have 5 pointed floral Stars. All previous flags had square blocks of White Larkspur for Stars. First the blue field (210 ft X 296 ft.) was planted. Once the Blue Larkspur plants began to sprout, a 24 foot metal frame in the shape of a 5 pointed star was placed precisely where each Star would be. The Blue Larkspur plants within this frame were removed and White Larkspur plants were planted in their place. This was repeated 49 more times to make 50 Stars. There were 5 rows of 6 Stars and 4 rows of 5 stars staggered in a way that makes the stars evenly spaced from one another. The flowers are grown by seed companies. The Floral Flag is 740 feet long and 390 feet wide and maintains the proper Flag dimensions, as described in Executive Order #10834. This Flag is 6.65 acres and is the first Floral Flag to be planted with 5 pointed Stars, comprised of White Larkspur. Each each Stripe is 30 feet wide. This Flag is estimated to contain more than 400,000 Larkspur plants, with 4-5 flower stems each, for a total of more than 2 million flowers. You can drive by this flag on V Street south of Ocean Ave. in Lompoc, CA. It's a beautiful place, close to Vandenberg AFB. Between the fields where the flag is planted, there are 9+ miles of flower fields that go all the way to the ocean



The developer of the Floral Flag had been in existence since 1890, and in Lompoc since about 1925. For many years they dominated the national flower-seed industry. In May of 2009, John Bodger and Sons sold off its flower and seed division, called Bodger Seeds, to German company Benary. Along with the sale came ownership of Bodger's facilities in Lompoc and Chile. With the global economic situation, Benary decided they had too many global facilities, and needed to scale back. The Lompac Valley facility was closed 9 APR 2010 and the Floral Flag no longer exists.[Source: <http://forums.christiansunite.com/index.php?topic=21794.0> Jul 2011 ++]

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Social Security Myths Update 01: It's not surprising that myths about Social Security persist, often fed by the program's critics. With the debate about Social Security's future once again heating up, these three myths need to be put to rest — so we can focus on the real issues.

Myth #1: By the time I retire, Social Security will be broke. If you believe this, you are not alone. More and more Americans have become convinced that the Social Security system won't be there when they need it. In an AARP survey released last year, only 35% of adults said they were very or somewhat confident about Social Security's future. It's true that Social Security's finances need work, because over the long term there will not be enough money to fully cover promised benefits. But radical changes aren't needed. In 2010 a number of different proposals were put forward that, taken in combination, would put the program back on firm financial ground for the future, including changes such as raising the amount of wages subject to the payroll tax (now capped at \$106,800) and benefit changes based on longer life expectancy.

Myth #2: The Social Security trust fund assets are worthless. Any surplus payroll taxes not used for current benefits are used to purchase special-issue, interest-paying Treasury bonds. In other words, the surplus in the Social Security trust fund has been loaned to the federal government for its general use — the reserve of \$2.6 trillion is not a heap of cash sitting in a vault. These bonds are backed by the full faith and credit of the federal government, just as they are for other Treasury bondholders. However, Treasury will soon need to pay back these bonds. This will put pressure on the federal budget, according to Social Security's board of trustees. Even without any changes, Social Security can continue paying full benefits through 2037. After that, the revenue from payroll taxes will still cover about 75 percent of promised benefits.

Myth #3: I could invest better on my own. Maybe you could, and maybe you couldn't. But the point of Social Security isn't to maximize the return on the payroll taxes you've contributed. Social Security is designed to be the one guaranteed part of your retirement income that can't be outlived or lost in the stock market. It's a secure base of income throughout your working life and retirement. And for many, it's a lifeline. Social Security provides the majority of income for at least half of Americans over age 65; it is 90 percent or more of income for 43 percent of singles and 22 percent of married couples. You can, and should, invest in a retirement fund like a 401(k) or an

individual retirement account. Maybe you'll enjoy strong returns and avoid the market turmoil we have seen during the past decade. If not, you'll still have Social Security to fall back on.
[Source: AARP Magazine Liz Weston article July/August 2011 issue ++]

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Tricare Overseas Program Update 11: As a TRICARE Overseas Program (TOP) Standard beneficiary, you may be required to submit your own claims for health care services. You should take the following steps to help avoid late or denied payments.

- To file your own medical claim, you must complete and submit a TRICARE DoD/CHAMPUS Medical Claim—Patient's Request for Medical Payment form (DD Form 2642). The sooner your claims processor receives your paperwork, the sooner you will be paid. Claims must be filed within one year of the date of service or within one year of the date of an inpatient discharge, but you are encouraged to send your DD Form 2642 to your claims processor as soon as possible after you receive care. You can access the DD Form 2642 at www.tricare.mil/claims or www.tricare-overseas.com. You may also be able to submit your claims electronically using the secure portal available on www.tricare-overseas.com. Certain restrictions apply. Note: Providers who file claims for you are required to submit their claims directly using either the CMS-1500 or UB-04 forms.
- You must submit proof of payment with your claim form in order for your payment to process. Proof of payment may include a receipt, canceled check, bank or credit card statement or invoice from the provider that clearly states payment was received. **Note:** Claims for services provided in Puerto Rico are reimbursed according to stateside guidelines and TRICARE-allowable charges. Claims for services provided in the Philippines and Panama are reimbursed based on government-provided foreign fee schedules.

To file a claim attach a readable copy of the provider's bill to the claim form, making sure it contains the following:

- Sponsor's Social Security number. (An eligible former spouse should use his or her own SSN, not the sponsor's.)
- Name of beneficiary receiving services
- Provider's name and address (If more than one provider's name is on the bill, circle the name of the person who treated you.)
- Date and place of each service
- Description of each service or supply
- Charge for each service
- Diagnosis (If the diagnosis is not on the bill, be sure to complete block 8a on the form.)
- Fill out all 12 blocks of the form correctly.
- Do not forget to sign the claim form. The beneficiary or a spouse, parent or guardian may sign the initial claim form.

Claims Mailing Addresses

- Non-active duty, TRICARE Eurasia-Africa send to TRICARE Overseas Program, P.O. Box 8976 Madison, WI 53708-8976 USA
- Non-active duty, TRICARE Latin America and Canada send to TRICARE Overseas Program, P.O. Box 7985 Madison, WI 53707-7985 USA
- Non-active duty, TRICARE Pacific send to TRICARE Overseas Program, P.O. Box 7985, Madison, WI 53707-7985 USA
- TRICARE For Life (TFL) claims in the United States and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands) send to WPS TFL, P.O. Box 7890 Madison, WI 53707-7890 USA

Any forms submitted later with additional required information may only be signed by a beneficiary age 18 or older, or by the parent or guardian if the beneficiary is under age 18. Be sure to keep a copy of the paperwork for your records. Mail your completed claim form to your claims processor to the address for the overseas region where you live. For assistance with filing claims, contact your TOP Regional Call Center and select option 2. Note that International SOS Assistance, Inc. issues reimbursements to overseas beneficiaries in U.S. dollars unless you specifically request reimbursement in foreign currencies. [Source: The 2011 Publication for Tricare Standard Overseas Beneficiaries May 2011 ++]

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NM Vet Legislation: Nine New Mexico state laws and benefits aimed at military veterans took effect 1 JUL, including disabled veteran license plates, enrollment priority for military children and tax exemptions for veterans service organizations. The laws were enacted during the 2011 legislative session and signed by the governor. They cover the following areas:

- **Disabled veteran license plate.** Any honorably-discharged veteran of the U.S. Armed Forces who is rated at least 50 percent service disabled can apply for a state of New Mexico vehicular license plate which identifies the veteran as a disabled veteran.
- **Mandatory Police Training for interacting with the mentally impaired.** Provides for additional education and training of law enforcement officials to facilitate interaction with persons with mental impairment. The goal is to increase crisis intervention training for handling law enforcement calls involving people with mental impairments.
- **NMDVS Enterprise Fund.** Creates an Enterprise Fund for the New Mexico Department of Veterans' Services consisting of appropriations, gifts, sale proceeds, fees collected and other public or private funds received by the NMDVS to carry out its programs and services.
- **Veterans' Service Organization Property Tax Exemption.** Any U.S. Congressionally-chartered veterans' service organization is exempt from paying property tax on the property of its facility.
- **Veteran business incubator program feasibility study.** The Military and Veterans' Affairs Committee has been requested to work with the Department of Veterans' Services and the New Mexico Economic Development Department to study the feasibility of enacting legislation to establish a business incubator program to foster the creation of veteran-owned businesses, lower veteran unemployment rates and increase jobs for New Mexicans. The Committee must report its findings, conclusions and recommendations for legislation to the legislature by November.
- **Hunting fee discount for non-resident disabled veterans undergoing rehabilitation.** Hunting licenses for deer, antelope, elk, javelina and turkey may be sold to non-resident disabled U.S. military members or veterans at resident license-fee rates if the applicant is undergoing a rehabilitation program utilizing hunting activities supported by the U.S. Department of Veterans' Affairs or an authorized nonprofit organization.
- **Deceased military person's disposition arrangements.** A person designated as the immediate contact on the Department of Defense (DoD) Emergency Data Form of an active-duty member of the U.S. Armed Forces can determine the means of disposition of that deceased Armed Forces member. The designee is authorized to make burial, funeral and disposition arrangements.
- **Military children school enrollment.** Priority enrollment status is automatically assigned to incoming students or the New Mexico schools system whose active-duty, National Guard or Reservist parent is transferred to a New Mexico military facility.
- **Temporary hunting and fishing license for active-duty military personnel.** Any active duty military personnel, National Guard or Reserve member who is a legally domiciled resident of New Mexico can apply for a temporary active duty fishing or small game hunting license. Applicants must show proof of residency and not claim residency elsewhere. Applicants may also apply if they are on active duty outside the state but are currently on leave here in New Mexico for not more than 30 days.

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Guard Empowerment Legislation: Sen. Patrick Leahy (D-VT) and Sen. Lindsey Graham (R-SC) introduced S.1025, the National Guard Empowerment and State-National Defense Integration Act of 2011 in late May. Twenty-eight senators have since signed on as co-sponsors. As of 5 JUL thirty senators sponsor the legislation that would give the National Guard a voice in final resource decisions at the Pentagon. The bill includes a provision to give the Guard's senior officer a seat on the Joint Chiefs of Staff. The National Guard Association of the United States (NGAUS) has asked the White House to clarify the administration's position on elevating the chief of the National Guard Bureau to the Joint Chiefs of Staff.

Despite the support from both the president and vice president during their campaign in 2008, the Department of Defense has declared its opposition to the move, which is now under consideration in the Senate after being approved in the House of Representatives. In a letter 1 JUL to both President Barack Obama and Vice President Joe Biden, retired Maj. Gen. Gus L. Hargett Jr., the NGAUS president, noted that the Pentagon's opposition "leaves us extremely concerned. It also has us wondering if there has been some evolution in your Administration's thinking and position on this matter," Hargett wrote. Nothing has changed since the 2008 campaign, he noted, that would warrant a switch in the position of the president and vice president. Hargett pointed out the dual mission of the Guard and the lack of a homeland mission for the active-component forces represented on the Joint Chiefs of Staff. "There should be no confusion, without the NGB chief on the Joint Chiefs, not only is the Guard not at the table, homeland security and the nation's governors are not at the table," the NGAUS boss wrote. [Source: NGAUS Washington Report 5 Jul 2011 ++]

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Medicare Scam: As the nation's leaders struggle to address steep health care costs, a Medicare scam is being orchestrated right under their noses and no one is doing anything to stop it, said former medical laboratory executives who have filed a lawsuit against Quest Diagnostics, Inc., accusing the company of overcharging the federal government by over \$1 billion. The individuals suing Quest called on the U.S. Department of Justice to intervene in their lawsuit, which alleges that the scam industry wide among medical labs is costing taxpayers as much as \$15 billion in Medicare and Medicaid overcharges. This particular fraud, known in the industry as "pull-through" business, is featured in the July 4th-10th edition of Bloomberg Businessweek.

Since 1996, the federal government has paid more – sometimes as much as 400 to 500 percent more – than private insurers for some Medicare and Medicaid patients' lab work conducted by Quest, the nation's largest lab testing company based in Madison, NJ. The lawsuit claims that billions of dollars in lab fees have been siphoned into illegal kickbacks to private insurers, such as Aetna and Cigna, which are among Quest's largest contract providers. "Quest and other labs are ripping off taxpayers, yet the federal government has done nothing. Despite our lawsuit, the scam continues and will until the government makes them pay damages," said Andrew Baker, one of three former executives of Unilab, purchased by Quest in 2003, who brought the lawsuit. The details of the fraud can be found in *Fair Laboratory Practices Associates vs. Quest Diagnostics, Inc.*, filed in 2005 under seal before the Southern District Court of New York. The federal court recently unsealed an amended complaint that charges Quest with violations of the Federal False Claims Act and the Federal Anti-Kickback Statute. It can be found at http://amlawdaily.typepad.com/04062011troutman_complaint.pdf.

Baker wonders why the federal government has not joined his lawsuit, especially since just last month Quest settled a remarkably similar California state claim for \$241 million in overcharges to the state's Medicaid program. In March 2009, California Attorney General Jerry Brown intervened in that case and a settlement soon followed, returning hundreds of millions of dollars to the state's coffers. Baker asserts billions are waiting to be returned to the federal government if the U.S. Department of Justice would join the FLPA case. The California lawsuit alleged Quest overcharged the state by as much as 400 percent for blood, urine and other tests conducted on Medicaid patients. For example, Quest charged the State of California \$8.59 for a complete blood test, but billed private insurers only \$1.43. The fraud is simple: Quest pressures private insurers to lean on doctors to send all their lab work to Quest, for patients insured privately and by Medicare and Medicaid. In return, the private insurers benefit

from lower and, in many cases, below-cost, lab fees, effectively subsidized by higher fees for the Medicare and Medicaid patients. Insurers threaten to throw doctors out of their networks if they refuse to send their tests for Medicare and Medicaid patients to Quest.

While Baker's lawsuit names only Quest, the FLPA plaintiffs believe the practice of overbilling Medicare and Medicaid has become widespread throughout the industry, resulting in overpayments of as much as \$15 billion. FLPA has appealed a lower court dismissal of their claims based on procedural grounds. The lower court did not rule on the merits of the case. The Quest scam could be the largest Medicare fraud committed by one company. In February 1999, the Office of Inspector General for the U.S. Department of Health and Human Services warned against the "pull-through" practice. [Source: PR Newswire Karen Hinton article 5 July 2011 ++]

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Cell-Phone Radiation Scams: The U.S. Federal Trade Commission has published tips on how to avoid cell phone radiation scams at . http://www.devicewatch.org/reports/cellphone_scams.shtml. The agency's warning was made in response to the proliferation of devices that are claimed to absorb electromagnetic emissions from mobile phones. Its warning document states: There is no scientific proof that so-called shields significantly reduce exposure from these electromagnetic emissions. In fact, products that block only the earpiece-or another small portion of the phone-are totally ineffective because the entire phone emits electromagnetic waves. What's more, these shields may interfere with the phone's signal, cause it to draw even more power to communicate with the base station, and possibly emit more radiation. A few reports have suggested that mobile telephone use is related to the development of certain brain tumors. The World Health Organization's International Agency on Research on Cancer recently classified mobile phone use as a 'possible carcinogen' based upon inconclusive epidemiological findings. At <http://www.cancer.gov/newscenter/pressreleases/2011/IARCcellphoneMay2011> their report can be read However, mobile phones produce very small amounts of non-ionizing radiation and no mechanism is known by which such radiation can cause brain tumors. The largest and most important study to date has reported that overall, cell phone users have no increased risk of the most common forms of brain tumors-glioma and meningioma. In addition, the study revealed no evidence of increasing risk with progressively increasing number of calls, longer call time, or years since beginning cell phone use. [Source: Consumer Health Digest #11-18, 23 Jun 2011++]

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SVAC Update 08: In these tight budget times, the Senate Veterans Affairs Committee has learned it must cut current spending to fund new initiatives for veterans. Accordingly, during a recent session they approved the following:

- Sen. Patty Murray (D-Wash.), committee chairman, would pay for her Hiring Heroes Act of 2011 (S 951) by extending by three years, to 2014, a higher fee on veterans who reuse their VA home loan authority. So the committee agreed that current fee of 3.3 percent for "subsequent" home loan usage, set to fall to 2.15 percent Oct. 1, should only fall now to 3.0 percent. The full Congress would have to agree to that.
- Likewise, to pay for the Senate version of a bill to repair a glitch in last December's Post-9/11 GI Bill Reform Act so it doesn't lower benefits for at least 4000 students enrolled in private colleges across seven states, Sen. Charles Schumer (D-N.Y.) got committee agreement to extend current higher fees on VA home loans with five or 10 percent down payments, by three years and one year respectively. The fees in question are 1.5 percent for loans with five percent down payments and 1.25 percent for 10 percent.
- To free up billions of dollars for the cost of providing VA health care to veterans and family members exposed to contaminated water over three decades at Camp Lejeune, N.C., Sen. Richard Burr (R-N.C.) won approval, without debate, to consolidate all base exchanges and commissary operations worldwide into a single for-profit retailing system.

Before being made law these measures will have to pass the scrutiny of at least the full Senate, if not an additional committee. They then will face additional hurdles, such as passing the House and being signed by the president. [Source: Military.com Tom Philpott article 30 Jun 2011 ++]

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NDAA 2012 Update 02: The Senate Armed Services Committee has agreed with House colleagues to approve a small increase in TRICARE Prime enrollment fees for working-age retirees, and to allow these fees to be raised annually by the percentage cost-of-living adjustment (COLA) applied to military retired pay. The vote ensures that TRICARE Prime enrollment fees for individual retirees under age 65 will be raised in the new fiscal year by \$30, to \$260 a year, and that retiree family coverage will climb by \$60, to \$520. These will be the first fee increases since TRICARE rates were set in 1995. The Senate panel also joined with the House to endorse an Obama administration plan to restructure TRICARE pharmacy co-payments to encourage use of mail order for refills instead of having local drugstores, at far greater cost to the government, refill prescriptions for chronic conditions. Through TRICARE “home delivery,” patients get a 90-day supply of pills versus a 30-day supply from retail outlets. Defense officials intend to make mail order more attractive by ending a \$3 charge for generic drugs and raising the co-pay for generic medicines at retail outlets to \$5, up from \$3. Co-pays for brand name drugs on the military formulary would stay at \$9 by mail but climb to \$12 at retail pharmacies. For non-formulary brand drugs, the \$22 co-pay would climb to \$25 for mail order and retail. The new co-pays are projected to save \$2.6 billion over five years, or five times the savings projected from higher TRICARE Prime fees on working age retirees.

The Senate committee also voted with the House to support a 1.6 percent military pay increase next January, enough to ensure that pay keeps pace with private sector wage growth. But the Senate committee parted ways with the House version of the fiscal 2012 defense authorization bill on a number of other personnel issues. Here’s a rundown of some key differences that will have to be reconciled before Congress can pass a final defense authorization bill later this year:

- **Combat Pay Windfall:** Only the Senate bill would require the services to begin to prorate monthly imminent danger pay and hostile fire pay of \$225 a month based on number of days in designated danger areas. Under current law, spending only part of a day in a war zone or imminent danger area makes a member eligible for the full \$225 payment. Amid the looming debt crisis, and congressional leaders searching for ways to lower federal spending, senators decided to address perceived combat pay windfalls to save \$30 million a year. The main targets are persons on temporary assignments. Flight crews, for example, can spend only hours in Afghanistan and get a full month of danger pay. The committee also received reports of military personnel attending first-of-the-month change of command ceremonies in war zones and, by arriving a day early and departing immediately after the ceremony, qualifying for two months of danger pay. Members on full deployments also would be impacted by this change. Currently, if a member on a yearlong, wartime deployment arrives mid-month and, a year later, departs mid-month, he or she qualifies for a total of 13 months of danger pay. If the prorated formula becomes law, total payments would reflect the actual length of deployment, ending the extra month of danger pay so many members now receive.
- **Special Survivor Indemnity Allowance:** The Senate bill is silent on a House-passed provision that would ease further a reduction in Survivor Benefit Plan payments felt by 57,000 surviving military spouses. Spouses of these survivors either have died on active duty or, in retirement from a service-connected injury or ailment. As a result they qualify for tax-free Dependency and Indemnity Compensation (DIC) from VA. But to accept DIC they must forfeit an equal amount of taxable SBP. To ease this so-called “widow’s tax,” Congress four years ago authorized a Special Survivor Indemnity Allowance (SSIA) valued now at \$70 a month and rising by \$10 a year until it hits \$100 by 2014. The House version of this year’s defense bill would raise SSIA higher and extend its life so that by fiscal 2017 payments would reach \$314 a month. The House was able to pay for this \$150 million SSIA initiative in part by accepting the administration’s plan to curb costs linked to the Uniformed Services Family Health Plan, a managed care plan for military beneficiaries living in six areas of the U.S. near former Public Health Service hospitals. The Senate bill also

would curb costs under USFHP, as described below. But rather than use the dollars saved to expand SSIA, senators choose to beef up incentives available to downsize the force.

- **Force Shaping Tools:** The Senate bill would give the services three new or extended authorities to downsize forces. One new tool would be a “voluntary retirement payment” which could be offered to certain officers with between 20 and 29 years of service if they agree to retire. The payment could equal up to 12 times an officer’s monthly basic pay. This could be used as an alternative to an early retirement board. The Senate bill also would extend the Voluntary Separation Incentive (VSI) authority that was set to expire. VSI is an annuity used extensively during the Post-Cold War drawdown to entice members to leave service. A third initiative would expand from three months to a full year the period service prior to expiration of an enlistment contract that member could be discharged without a loss of benefits such as the GI Bill. The change would apply only to benefits, not pay or allowances.
- **USFHP and Medicare:** Both the Senate and House would require individuals newly enrolled in the Uniformed Services Family Health Plan to transition to TRICARE for Life, and out of USFHP, as they become Medicare eligible due to age. But only the Senate bill praises the USFHP model and directs Defense officials to work with USFHP and Medicare to develop and evaluate health plan alternatives for TRICARE for Life beneficiaries so they can get integrated health care management like that being delivered to elderly through USFHP.

[Source: Standard-Examiner Tom Philpott article 29 Jun 2011 ++]

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Senior Exercise: Stretching to increase your flexibility and freedom of movement will help you do more of the activities you enjoy. Here are a few basic stretching exercises from the National Institutes of Health:

Before you start, follow these safety tips:

- Check with your health care provider to make sure these stretching exercises are safe for you.
- Always warm up before stretching exercises by doing some easy walking or arm-pumping first, or by doing stretching exercise after endurance or strength exercises.
- Mild discomfort or a mild pulling sensation is normal, but stretching should never cause pain, especially joint pain. If you feel pain, stop at once and consult your health care provider.
- Never bounce into a stretch -- make slow, steady movements to help your muscles stretch naturally.

Tricep Stretches: lengthen muscles in the back of the upper arm

- 1) Hold one end of a towel in your right hand.
- 2) Raise and bend right arm to drape towel down back. Keep your right arm in this position and continue holding onto the towel.
- 3) Reach behind your lower back and grasp bottom end of towel with left hand.
- 4) Climb your left hand progressively higher up towel, which also pulls your right arm down. Continue until your hands touch, or as close as you can comfortably go.
- 5) Reverse positions.
- 6) Repeat 3 to 5 times each session. Hold stretch for 10 to 30 seconds.

Double Hip Rotation: stretch the outer muscles of hips and thighs. Important: If you have had a hip replacement, do NOT perform double hip rotation exercises without permission from your surgeon.

- 1) Lie on floor on your back, knees bent and feet flat on the floor.
- 2) Keep shoulders on floor at all times.
- 3) Keep knees bent together and gently lower legs to one side as far as possible without forcing them.
- 4) Hold position for 10 to 30 seconds.
- 5) Return legs to upright position.
- 6) Repeat toward other side.
- 7) Repeat 3 to 5 times on each side.

How Much Should You Stretch, and How Often?

- Stretch after you do your regularly scheduled strength and endurance exercises.
- Do each stretching exercise 3 to 5 times at each session.
- Slowly stretch into the desired position, as far as possible without pain, and hold the stretch for 10 to 30 seconds.
- Relax, then repeat, trying to stretch farther.
- If you can't do endurance or strength exercises for any reason, and stretching exercises are the only kind you are able to do, do them at least 3 times a week, for at least 20 minutes each session.
- Remember that stretching exercises, by themselves, don't improve endurance or strength.

[Source: About.com | Senior Living Sharon O'Brien article 5 Jul 2011 ++]

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Social Security Reform Update 02: On 17 JUN, the Wall Street Journal reported that AARP, the nation's most powerful lobbying and advocacy group on senior issues, has changed its longstanding defense of Social Security and is now ready to consider reforms such as raising the retirement age. It was the organization's most startling change of direction since 2003 and 2005, when it backed Bush-era efforts to privatize Medicare, a move that many critics characterized as AARP abandoning its members' interests to line its own pockets with revenue from the supplemental insurance plans it endorses. AARP is now willing to enter negotiations with federal lawmakers to restructure the program, which could run out of money by 2036 based on the latest estimates. AARP leaders believe payouts to the elderly will eventually decline by 25% or more unless Social Security is reformed because the program will no longer be able to cover its own costs. The AARP believes changes are inevitable given intense pressure on Congress to fix massive budget problems and make Social Security solvent for future generations. "The ship was sailing. I wanted to be at the wheel when that happens," said John Rother, the AARP's influential policy director.

Yet after the Journal article appeared, the ensuing uproar prompted the AARP to quickly issue a statement denying that it's changed its position on Social Security. The statement did not specifically reject any Social Security cuts, but insisted that the program needs to be strengthened "for future generations." Read AARP statement. The AARP's official statements on Social Security have often been ambiguous. In March, the AARP suggested it was open to "gradual and modest changes" to ensure the financial stability of Social Security. And four years ago the AARP said: "Strengthening Social Security will require tough choices, and our members are prepared to make them. They want Social Security to be there for their kids and grandkids." The AARP remains leery of many plans circulating in Congress to reform Social Security, such as a proposal to cut benefits for wealthier retirees, and the organization does not plan to push the idea of benefit reductions. Nor will Rother support the idea of cutting Social Security to reduce the national debt because the AARP argues that the program has not contributed to U.S. deficits. "Social Security should not be used as a piggy bank to solve the nation's deficit. Any changes to this lifeline program should happen in a separate, broader discussion and make retirement more secure for future generations, not less," AARP Chief Executive Barry Rand said in the group's statement Friday.

Rother also says taxes should be increased to pay for most of the projected shortfall in the government pension fund for the elderly, according to the Journal article. An explicit shift in the AARP's position would be welcomed by budget hawks in Washington, but the organization is sure to meet with resistance from both liberals and conservatives. The left objects to sharp cuts in Social Security, though some favor trimming benefits for the wealthy. The right generally is opposed to stiff tax hikes or means testing for program recipients. [Source: Market Watch Jeffry Bartash article 17 Jun 2011 ++]

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Afghanistan, Iraqi Campaign Medals: The Defense Department announced 30 JUN it is adding a seventh star to the Iraq Campaign Medal and a fourth to the Afghanistan Campaign Medal. Each star recognizes a period of time and service members who serve more than one tour in Iraq or Afghanistan are eligible to pin on

additional stars. Multiple deployments mean some service members could wear one, two, three or more stars on their medals. The newest star for service in Iraq is for the period the Pentagon is calling "New Dawn." It begins Sept. 1, 2010 "through a date to be determined." It follows, in order, the periods known as, "Liberation of Iraq," "Transition of Iraq," "Iraqi Governance," "National Resolution," Iraqi Surge" and "Iraqi Sovereignty." Afghan war veterans who have served since Dec. 1, 2009 "through a date to be determined" are now eligible for a new star dubbed simply, "Consolidation III." That follows the "Liberation of Afghanistan" from Sept. 11, 2001 to Nov. 30, 2001, and consolidation I and II. The services will announce implementing instructions to their members about wear of the new campaign stars. Service members who have qualified for the ICM and ACM may display a bronze campaign star on their medal for each campaign phase in which they participated. A silver campaign star is issued in lieu of five bronze stars. Six other campaign phases were previously identified for Iraq, and three in Afghanistan.

In Iraq, they are:

- Liberation of Iraq, March 19 to May 1, 2003;
- Transition of Iraq, May 2, 2003 to June 28, 2004;
- National Resolution, Dec. 16, 2005 to Jan. 9, 2007;
- Iraqi Surge, Jan. 10, 2007 to Dec. 31, 2008; and
- Iraqi Sovereignty, Jan. 1, 2009 to Aug. 31, 2010.

In Afghanistan, the previously identified campaign phases are:

- Liberation of Afghanistan, Sept. 11 to Nov. 30, 2001;
- Consolidation I, Dec. 1, 2001 to Sept. 30, 2006; and
- Consolidation II, Oct. 1, 2006 to Nov. 30, 2009.

[Source: AFPS Donna Miles article 30 Jun 2011 ++]



Afghanistan Campaign Ribbon (Bottom) Iraq Campaign Ribbon (Top)

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VA Caregiver Program Update 10: The Department of Veterans Affairs will send out more than \$430,000 in stipend payments to nearly 200 Family Caregivers of Veterans in July. These Family Caregivers were the first to complete their Caregiver training under the program of Comprehensive Assistance for Family Caregivers. The first payments to 96 recipients were issued 1 JUL. Family Caregivers will receive an average \$1,600 in monthly stipend payments. The initial payments will average \$2,500 because the first stipend checks are retroactive to the date of application. The amount of the stipend is based on the condition of the Veteran and the amount of care they require as well as the geographic location where the Veteran resides. An additional 80 stipend payments will be released from the U.S. Treasury on 8 JUL bringing the total to 176 Family Caregivers receiving the stipend in July. "We continue to process and approve applications on a daily basis" said Deborah Amdur, VA's Chief Consultant for Care Management and Social Work. "It has been profoundly gratifying to receive messages from Family Caregivers about the value of this program."

Since 9 MAY, nearly 1,250 Caregivers of Veterans who were seriously injured in the line of duty on or after September 11, 2001, have applied for the Program. A core caregiver training curriculum is a required component of

the program. This comprehensive training, which was developed by Easter Seals in collaboration with VA clinical experts, has received many positive comments from Family Caregivers. In addition to the training, eligible Family Caregivers can also access mental health services and are provided health care insurance, if they are not already entitled to care or services under a health plan. Veterans may review the criteria for eligibility and download the Family Caregiver program application (VA CG 10-10) at <http://www.caregiver.va.gov>. The application enables the Veteran to designate a primary Family Caregiver and secondary Family Caregivers if needed. Caregiver Support Coordinators are stationed at every VA medical center to assist with coordinating the training or assist Caregivers in locating available services. Support for all Caregivers is also available via the national Caregiver Support Line at 1-855-260-3274. Caregivers of Veterans from all eras are encouraged to use the Website and Support Line to learn about more than two dozen supportive services VA offers to Family Caregivers. [Source: VA News Release 1 Jul 2011 ++]

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VA Cemetery Texas Update 03: Some Houston veterans and volunteer groups are accusing Department of Veterans Affairs officials of censoring religious speech at Houston National Cemetery. In one example cited in documents filed in federal court, cemetery director Arleen Ocasio reportedly told volunteers with the National Memorial Ladies that they had to stop telling the families, "God bless you," at funerals and that they had to remove the words "God bless" from condolence cards. The new allegations of "religious hostility" by VA and cemetery officials follow on the heels of a controversy over a prayer in Jesus' name by Pastor Scott Rainey at a Memorial Day service in the cemetery. U.S. District Judge Lynn N. Hughes ruled 26 MAY that Ocasio couldn't stop Rainey from using the words "Jesus Christ" in his invocation. Attorneys with the nonprofit Liberty Institute, which represented Rainey, filed an amended complaint this week after allegedly finding other instances of religious discrimination by cemetery officials against members Veterans of Foreign Wars District 4, The American Legion Post 586, and the National Memorial Ladies, a volunteer group that attends funerals of fallen service members.

The complaint accuses VA of "a widespread and consistent practice of discriminating against private religious speech" at the cemetery. According to court documents, Ocasio banned members of the groups from using certain religious words such as 'God' or 'Jesus,' censored the content of prayer, and forbade the use of religious messages in burial rituals unless the deceased's family submitted the text to her for prior approval. Court documents also describe the closure of the cemetery's chapel after Ocasio's appointment as director two years ago. "The doors remain locked during Houston National Cemetery operating hours, the cross and the Bible have been removed, and the Chapel bells, which tolled at least twice a day, are now inoperative," the complaint reads. "Director Ocasio only unlocks the Chapel doors when meetings or training sessions are held at the building. Furthermore it is no longer called a chapel but a meeting facility." Founder of Houston National Memorial Ladies, Cheryl Whitfield, said, "It's just unfair that somebody would ask us to take God out of our vocabulary. I could've kept my mouth shut and let things happen, but when it comes to standing up for your belief in God and giving comfort to the families, I don't want to regret not saying anything. We all had to stand up for what we believe in." A standing-room only crowd jammed a federal courtroom in Houston 29 JUN for a status conference on the case. [Source: Houston Chronicle article 29 Jun 2011 ++]

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VA Cemetery Texas Update 04: The Department of Veterans Affairs on Thursday said that invoking the name of God or Jesus is not only allowed, but common at VA National Cemeteries across the country. Local veterans and volunteer groups have accused VA officials of censoring religious speech — including the words Jesus and God — at Houston National Cemetery. "VA values and respects every veteran and their family's right to a burial service that honors their faith tradition," Keith Ethridge, director of VA's National Chaplain Center, said in a statement. "VA employs nearly 1,000 chaplains who, every year, preside over thousands of religious burial services, representing veterans of all faiths." Among the allegations raised in a federal civil suit against VA is a claim that Cemetery director Arleen Ocasio did not allow volunteer honor guards to recite prayers at funerals without approval of the deceased veteran's family. The catch, according to the suit, was that the honor guards couldn't get approval because they were forbidden from providing optional texts to the families for consideration. Cemetery guidelines released by VA on 30 JUN appeared to confirm that VA's National Cemetery Administration does not allow volunteer honor guards to submit any texts to veterans' families for review.

Such a policy is an unconstitutional prior restraint on speech, said Hiram Sasser, director of litigation for the Liberty Institute, a nonprofit that filed the suit. "In this case they're telling private citizens that their speech is banned, and they're banned from even talking to the families and letting the families even know that there are options, religious or not religious," Sasser said. A memo released by VA on 30 JUN was sent to all VA cemetery directors on 1 NOV 07, by William Tuerk, undersecretary for Memorial Affairs at the time. It states that cemetery employees, including VA-sponsored volunteer honor guards, "shall not provide texts of any such recitations to the deceased's survivors for consideration." Ocasio was told to enforce this policy. Similar language is used in a document titled, "Houston National Cemetery Honor Guard Guidelines." It is signed by Ocasio and dated 15 MAR.

Neither the NCA memo nor the Houston National Cemetery guidelines ban the words God or Jesus. They do list some limitations on texts, but those limitations do not include religious language. "VA will not accept for reading any texts that would, as determined by the cemetery director, have an adverse impact on the dignity and solemnity of a cemetery honoring those who served the Nation," the guidelines say. "Among the texts that would not be read would be those that are obscene, racist, are 'fighting words,' or are coarse, abusive or politically partisan." Ocasio's guidelines for honor guards in Houston permit a veteran's family to request a member of the clergy to conduct a brief religious service, which may include a reading from scriptures or a brief prayer. The guidelines state that military honors at funerals should consist only of the "core elements" of flag folding, presentation of the flag to survivors, playing of Taps and a rifle salute. Any additions can be made only at the request of the veteran's family.

The latest allegations of religious hostility at Houston National Cemetery add fuel to a controversy that first erupted last month over Pastor Scott Rainey's prayer in Jesus' name at a Memorial Day service. U.S. District Judge Lynn Hughes ruled 26 MAY that the government couldn't stop Rainey from using the words "Jesus Christ" in his invocation at the cemetery. Hughes issued a temporary restraining order to prevent VA from censoring Rainey's prayer. Liberty Institute, which filed that suit on Rainey's behalf, amended it Monday to include additional allegations of religious discrimination by cemetery officials against American Legion Post 586, Veterans of Foreign Wars District 4 and the National Memorial Ladies, a volunteer group that attends funerals of fallen service members. The controversy shows no signs of letting up, especially now that lawmakers have jumped into the fray. U.S. Rep. Ted Poe, R-Humble, sent a letter to VA Secretary Eric Shinseki, asking for an investigation and calling for Ocasio's termination if the allegations against her are true. Congressman Gene Green, D-Houston, whose father is buried at a VA National Cemetery, also voiced his concern. In a statement Green said freedom of speech and religion is a constitutional right that veterans buried at all national cemeteries fought for and defended. I believe all faiths should have the freedom to honor our Veterans, and it is unacceptable for the government to try to deny that right," Green said. [Source: Houston Chronicle Lindsay Wise article 30 Jun 2011 ++]

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VA Cemetery Texas Update 05: Several Houston-area military veteran groups filed a lawsuit against Houston National Cemetery, alleging that director Arleen Ocasio has been stamping out religious speech at the cemetery's military funerals. Specifically, members of groups like the Veterans of Foreign Wars and the American Legion, as well as cemetery volunteers, claim they were not allowed to use words like "God" and "Jesus" during ceremonies or in condolence letters. For those wondering whether this could be an issue in Abilene, a visit to the Texas State Veterans Cemetery at Abilene offers a pretty clear piece of evidence. A large painting, depicting servicemen and women of all branches, covers one of the walls in the administrative building. At the top of the painting are the words, "In God We Trust, United We Stand." In his office just next to the mural, cemetery director Clint Lynch offered a straightforward explanation of his policies, which mirror those of the U.S. Department of Veterans Affairs. The families of the deceased ultimately have the final say as to the religious content of their loved one's service. "If the family wants a minister, they get a minister. If they want bagpipes, we provide them bagpipes," Lynch said. Houston, he said, is Houston.

Lynch said his main goal is to "ensure as much dignity as possible" through funeral services. Whether the family opts for a religious or secular memorial isn't his decision to make. "I'm not there to provide any comments," Lynch said. "I'm there to help the family through the military portion of the service." The U.S. Department of Defense provides memorial details — the military personnel who fire rifles, play taps and present a folded flag to the family — for active-duty funerals in Abilene. Dyess Air Force Base supplies personnel for Air Force and Marine funerals.

The Army sends in a detail from Fort Hood, while the Navy brings one in from Goodfellow Air Force Base in San Angelo. Those details are augmented locally by the Veterans Honor Guard, which features a host of American Legion and VFW members volunteering their time to perform ceremonial rites at military funerals throughout the Big Country.

Ralph Rodriguez is a Vietnam veteran, the commander for District 8 of the VFW, and one of the local honor guard's organizers. He said the use of the word "God" has never been an issue in and around Abilene, and he certainly hopes it never will be. Rodriguez noted that it's pretty difficult to avoid it when the American Legion's motto is, "For God and Country." "Even in the Pledge of Allegiance, it's 'one nation under God,'" Rodriguez said. "And that's what we are." Rodriguez was just in Houston for a VFW convention, in fact. Tempers were riding high about the issue out there — "It kind of made me angry, too," Rodriguez said — but he said he's cautiously optimistic about the matter getting settled. Rodriguez said the local Honor Guard assembles on a voluntary basis for each funeral. He's been involved with it for more than a decade, and said he sees the rites as a small token of gratitude for the services troops have rendered. "If we can't give a little of our time for them, what else can we give?" Rodriguez said. "They gave everything for their country." [Source: Abilene Reporter News Jeremy Goldmeier article 6 Jul 2011 ++]

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Commissary Update 05: Among the bills approved by the Senate Veterans Affairs Committee this week was the "Caring for Camp Lejeune Veterans Act of 2011" (S. 277), sponsored by Sen. Burr (R-NC), the senior Republican on the Committee. The bill would authorize VA health care for former military family members and veterans and certain family members stationed at Camp Lejeune between 1957 and 1987, when the water at the base is acknowledged to have been contaminated with carcinogens. The Military Officers Association of America (MOAA) indicated its support for the bill and other pending measures in a letter to Committee Chair Sen. Patty Murray (D-WA) and Sen. Burr. But that was before the committee voted unanimously, without notice or hearing, to fund the care by eliminating the federal subsidy for military commissaries and directing consolidation of all DoD commissaries and exchanges. MOAA strongly opposes this sneak attack on the military benefit package.

- First, the Veterans Affairs Committee has no jurisdiction over and no knowledge of DoD commissary and exchange systems, which are under the purview of the Armed Services Committee.
- Second, they propose virtually dismantling the commissary system without any hearings or other effort to assess the adverse impact of such a dramatic cut to a core military benefit. There are good reasons why the Armed Services Committees, who actually understand the commissary and exchange programs, have ardently rejected similar proposals for the last four decades.
- Third, they seek to poach DoD funds to pay for VA health care at a time when DoD personnel budgets already are under threat.

MOAA supports expanding VA care to cover Camp Lejeune veterans, but the Veterans Affairs Committee needs to find another way to fund it besides raiding the military commissary system. Make no mistake, without the federal subsidy, military commissaries would eventually go out of business, as prices would have to rise, and savings to customers would be lost. The commissary is one of DoD's most cost-effective people programs. Every dollar of the subsidy translates to nearly three dollars of benefit value to patrons (and considerably more than that for lower-grade enlisted families). Where else can the Pentagon get that kind of compensation bang for the buck? Active duty and retired community veterans are encouraged to go to MOAA's preformatted editable message at <http://capwiz.com/moaa/issues/alert/?alertid=51001611&PROCESS=Take+Action> and forward it to their legislators. The message asks for legislators to reject this attack on military commissaries. [Source: MOAA Leg Up 1 Jul 2011 ++]

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Arlington National Cemetery Update 26: The Justice Department has opened an investigation of Arlington National Cemetery for the mishandling of remains, possible contracting fraud and falsification of records, the Washington Post reported 28 JUN.. A federal grand jury in Alexandria has been subpoenaing witnesses

and records relating to the scandal to see if criminal charges are warranted, sources said. The investigation has been underway for at least six months, according to sources who spoke on the condition of anonymity because they were not authorized to speak publicly. It is being conducted by the FBI and the Army's Criminal Investigation Division. Investigators are also looking into whether some grave sites were reserved against Army regulations. The cemetery has been under new management for a year, but officials have continued to discover burial problems, including a mass grave. Arlington National's new management testified in front of the House Veterans Committee's Subcommittee on Disability Assistance and Memorial Affairs (DAMA) in late JUN. There, Ms. Kathryn Condon, the Executive Director of the Army National Cemeteries Program and Mr. Patrick Hallinan, the Superintendent at Arlington National Cemetery, testified about the problems Arlington has continued to encounter, as well as about some of the improvements that have been made.

On 9 JUN 69 boxes of records were found in a Northern Virginia storage facility; the Army's Criminal Investigative Division is investigating to find out if a crime was committed, or if any personally identifiable information was contained in the records. Congressman Jon Runyan (R-NJ), Chairman of the DAMA subcommittee, promised that there would be more hearings on that particular issue in the future. On the bright side, Arlington officials said that the cemetery is now paperless, and that it had successfully transferred to a digital scheduling system over the last year. The hope is that this will be more efficient while at the same time preventing the kinds of mistakes that have plagued Arlington recently. Investigators are said to be seeking information about who knew about the cemetery's burial problems and whether fraud or falsification of records was involved.

An Army inspector general's report found that cemetery officials lacking in contracting experience and with little supervision failed to digitize the cemetery's paper records. Additionally, the practice of reserving gravesites at Arlington is being reviewed. Officially, the cemetery stopped taking reservations in 1962, but the practice of reserving choice grave sites continued, unofficially, under Raymond J. Costanzo, who was superintendent from 1972 to 1990, an Army investigation found. Metzler, his successor, who ran the cemetery until he was forced to retire last year, also apparently allowed people to pick areas of the cemetery where they wanted to be buried, Army officials have said. In regards to the mass grave that was recently found at Arlington, three of the eight sets of remains were identified, and so far two have been reburied, officials said. They are still working to identify one other. Four were certified as unidentifiable. The cemetery will have to bury multiple sets of remains under a headstone that reads "Unknown." [Source: TREA Washington Update 1 Jul 2011 ++]

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Chronic Pain Update 01: Chronic pain affects 116 million Americans and costs the U.S. as much as \$635 billion each year, according to a new report from the Institute of Medicine (IOM) that called for changes in how chronic pain is managed. Much of the chronic pain experienced by Americans isn't treated correctly, in part because doctors are not taught in medical school how to help patients manage pain, according to the report, entitled "Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research," <http://www.iom.edu/Reports/2011/Relieving-Pain-in-America-A-Blueprint-for-Transforming-Prevention-Care-Education-Research/Report-Brief.aspx> which was mandated by the healthcare reform law. Chronic pain is so widespread and poorly understood that it's a public health issue and a major "national challenge," concluded the Committee on Advancing Pain Research, Care, and Education, which was made up of 18 experts in pain management, anesthesiology, bioethics, statistics, and immunology. "Given the large number of people who experience pain and the enormous cost in terms of both dollars and the suffering experienced by individuals and their families, it is clear that pain is a major public health problem in America," said committee chair Philip Pizzo, MD, professor of microbiology and immunology at Stanford University School of Medicine, in a press release.

Chronic pain is "more than a physical symptom" and can be influenced by genetics, stress, depression, and behavioral, cultural, and emotional factors, the committee wrote. Moreover, long-term, persistent pain, which may have been caused by an injury or a disease, can cause changes in the nervous system, which in turn cause the pain to become its own distinct chronic disease. The report called for a cultural change in order to prevent, assess, treat and understand all types of pain and laid out a blueprint for providing relief from pain. It directs the Department of Health and Human Services to develop a plan to increase awareness about pain and its health consequences; improve how pain is assessed in the healthcare setting and how treatment of pain is paid for by the federal government; and to address disparities in how different groups of people experience pain. It also called for the

National Institutes of Health to designate a lead institute tasked with "moving pain research forward," and it called for coordinated efforts between public and private organizations to create recommended changes to how chronic pain is managed.

The committee said that while pain is prevalent, the full scope of the problem is unclear, especially among groups of people where pain might be under diagnosed and underrated, including minorities, women, children, the elderly, military veterans, and people who are at the end of life. More data should be collected to study trends over time and to pinpoint certain populations at risk for chronic pain, the committee wrote. The panel offered some advice for doctors as well: Primary care physicians should collaborate with pain specialists in cases where a patient's pain persists even after treatment. The committee acknowledges that healthcare providers need to be better educated about how to understand pain and its causes, especially primary care doctors who are often the first stop for patients seeking treatment for chronic pain. The report recommends healthcare providers engage in continuing education programs, and that licensure, certification, and recertification should include assessment of providers' knowledge of pain management. [Source: MedPage Today Emily P. Walke article 30 Jun 2011 ++]

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Vet Jobs Update 31: The Midwest and Northern states appear to be where some of the highest rates of unemployed 9/11 veterans live, according to a JUN 2011 Understanding Our Economy Senate report. Below are the 10 states with the highest veteran unemployment. For comparison, total state unemployment rates from the Bureau of Labor Statistics are in parentheses.

- Michigan 29.4 percent (10.3)
- Indiana 23.6 percent (8.2)
- Minnesota 22.9 percent (6.6)
- Montana 20.1 percent (7.3)
- Tennessee 20 percent (9.7)
- Kansas 17.2 percent (6.6)
- Vermont 16.8 percent (5.4)
- Connecticut 15.5 percent (9.1)
- Nevada 15.2 percent (12.1)
- New York 15.2 percent (7.9)

The complete report at http://jec.senate.gov/public/index.cfm?a=Files.Serve&File_id=f18b678e-10a0-4e9e-a01c-1aa3606964d5 is the sixth edition of state-by-state snapshots issued by the Joint Economic Committee during the 112th Congress and includes data through May 2011. For the first time, the report includes the 2010 average unemployment rates for Post-9/11 veterans (those who have served on active duty since September 2001) and for all veterans. Post-9/11 veterans faced higher unemployment rates than the overall veteran population in 35 states and the District of Columbia. Post-9/11 veterans in Michigan had the highest unemployment rate (29.4 percent). Indiana saw the largest difference between the Post-9/11 unemployment rate (23.6 percent) and the overall veteran unemployment rate (9.0 percent) – a gap of 14.6 percentage points. Nationally, Post-9/11 veterans had an average unemployment rate in 2010 almost 3 percentage points higher than the overall veteran-unemployment rate, 11.5 percent vs. 8.7 percent. [Source: AL Online Update 30 Jun 2011 ++]

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Military Retirement System Update 04: Two cuts in military retired pay are under discussion as part of negotiations between Congress and the White House over the size of the U.S. national debt, but getting an agreement is proving difficult. One cut is small, involving how annual cost-of-living adjustments are calculated. It could apply to military and federal civilian retirees, disabled veterans and survivors. The net effect would be annual adjustments that average one-quarter of a percentage point below what they would be with the current formula. The

second option involves a complete overhaul of the benefit, replacing a 20-year program that pays immediate benefits with a new plan that could provide some retirement benefits for as few as five years of service -- with payments not starting until at least age 60 for any service members who do not retire on a full military disability. As it stands, this proposal would apply only to future troops, not current retirees or anyone already in uniform.

The talks come as the U.S. has run out of borrowing power after reaching its current \$14.3 trillion debt limit. The Treasury Department has warned the U.S. will run out of cash reserves to pay bills Aug. 2, which has become the deadline for reaching an agreement. Senate GOP Leader Mitch McConnell of Kentucky met with Republican colleagues 21 Jun and later said he expects a "large package" of spending cuts that includes short-term reductions in spending by federal agencies over two years, as well as bigger cuts in entitlement programs over 10 years. He did not offer specifics, but entitlements include government retirement benefits and veterans' benefits, which is why they are under scrutiny at the same time as more well-known programs such as Social Security, Medicare and Medicaid. The proposed change to the annual cost-of-living adjustment in retired pay would save \$24 billion over 10 years, according to an estimate from the nonpartisan Congressional Budget Office. The change would stop linking annual COLAs for benefits and retired pay to the Consumer Price Index for Urban Wage Earners. Instead it would be linked to the Consumer Price Index for All Urban Consumers. The past two years have seen no cost-of-living increase in retired pay because of flat consumer prices. But the Bureau of Labor Statistics, which tracks prices, is reporting a 3.6 percent overall increase in the CPI-U in the past 12 months. The CPI-W has increased 4.1 percent over the same period, half a percentage point more.

A complete overhaul of military retired pay would pay immediate annuities only to those who receive military medical retirement. For everyone else, retired pay would not begin until age 60 — or possibly older. The Pentagon has been pushing for this kind of retired pay overhaul since Donald Rumsfeld was in charge, but finding support among the services and key lawmakers for such a change has been tough. "About 70 to 80 percent of our force does not stay in the service long enough to retire, but they leave with nothing," Defense Secretary Robert Gates told the Senate Appropriations Committee earlier this month. "That doesn't make any sense. The private sector is well ahead of us in that respect." Second, he said, is the 20-year retirement model that encourages people to leave when the military wants some to stay. "We make it financially silly for them not to retire at 20 years," Gates said, adding that the military needs to "incentivize them to give us another five years of service." The Pentagon has not provided an estimate of how much this concept might save, but the immediate effect would be small because current members would be exempt. [Source: AL Online Update Rick Maze article 30 Jun 2011 ++]

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Vet Toxic Exposure ~TCE: As early as WWII, United States Air Force and other Military bases used and disposed of chemical degreasers and other toxic substances that were later determined to contaminate drinking water and pose multiple health risks including: Cancers, Reproductive disorders, Birth defects, and Multiple other serious difficulties. Countless military personnel, their families, and private individuals living and working in the near vicinity of the bases may have been affected by these contaminants, through drinking water, general water usage and exposure through vapor seepage. The four most alarming contaminants are: Trichloroethylene (TCE), Tetrachloroethylene (PCE), Vinyl Chloride, and Benzene. Scientific studies show that some or all of these chemical compounds have breached the ground water supply on several of our US Military Bases and in some instances, have affected civilian properties adjacent to the bases including churches, schools and private wells. Currently, on-going research is being conducted on military bases around the country and on properties directly adjacent to these bases to identify just how wide spread this contamination may be.

Marine Corps Base (MCB) Camp Pendleton encompasses about 125,000 acres in southern California. The base lies along the Pacific Ocean and contains an estimated 17 miles of coastline. The entire base, except for about 125 acres in southern Orange County, is within northern San Diego County. MCB Camp Pendleton lies between two major cities—San Diego is 38 miles south of the base and Los Angeles is 82 miles north. In 1980, 2, 4, 5-TP (silvex) was detected in two base production wells (51 and 73 micrograms per liter [µg/L]). An initial assessment study (IAS) conducted in September 1984 identified eight sites that warranted further evaluation. The IAS determined that none of the sites posed an immediate health hazard, but recommended five sites for further investigation. A site

investigation (SI) in 1988 included sampling of six sites: the five identified in the IAS and an additional site recommended for further study by the Navy. Sampling detected metals in soil, groundwater, sediment, and surface water; VOCs in groundwater and surface water; polychlorinated biphenyls (PCBs) and pesticides in soil; and an SVOC in groundwater (CDM 1988). Three of the remaining UST sites are in residential areas, but only subsurface soil and groundwater contamination remains at these sites. Soil remediation has occurred in these residential areas, with remaining contamination beneath several feet of soil or pavement and inaccessible to residents. Further, the UST site-related groundwater contamination is not near any drinking water production wells.

The base water systems draw their water from local groundwater basins. MCB Camp Pendleton has four main groundwater basins: Las Flores, San Mateo, San Onofre, and Santa Margarita. The base's North System has four wells in the San Mateo River Basin and three wells in the San Onofre River Basin. This system provides drinking water to about 12,000–15,000 consumers in the San Onofre housing and mobile home areas, San Onofre Recreation Beach, and 52–64 areas of the base. The South System has 12 wells in the Santa Margarita River Basin and three wells in the Las Flores River Basin. This system provides drinking water to about 39,000–43,000 consumers in the remaining base areas, including residences in the 43 area and all areas south. [Source: <http://www.militarycontamination.com> Jul 2011 ++]

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Saving Money: The end of an era in cell phones was marked 7 JUL when Verizon confirmed it has joined AT&T and T-Mobile in dumping its popular unlimited data plan. That leaves Sprint as the only major wireless provider still offering a one-price-for-all-you-can-consume data. And who knows how long it'll be before Sprint follows suit. Starting 7 JUL, new Verizon customers will have to sign up for what's called a usage-based data plan. Existing customers are grandfathered in, but Verizon hasn't announced what'll happen when those contracts expire. Most likely, they'll have to go usage-based too. So instead of one price for all data, Verizon is charging \$10 for 75 MB per month, \$30 for 2 GB per month, \$50 for 5 GB per month, and \$80 for 10 GB per month. Verizon will also begin charging \$30 for unlimited mobile wireless hot spots, which were previously free. For more details, PC Magazine has a good Q&A at <http://www.pcmag.com/article2/0,2817,2388130,00.asp>. Even if you're not affected by this move, it's a good reminder to check your own usage and your bill for any potential savings. Here are five ways to save money on your cell phone bill:

- 1. Pay attention to where and when you use your phone.** You probably already know that many plans offer reduced rates if you talk or text at different times and on different days. And you should know to watch out for roaming charges. But here's something you may not be aware of: It's not where you roam, but where your carrier sends the signal (i.e. the closest tower).
- 2. Look at how you use your phone.** Think less about cost per minute or per text and more about cost per month. If you live on your cell phone and have dropped your land line, then you might need a plan that lets you talk, text, and check sports scores on an unlimited basis – and that just leaves you with Sprint among the big providers. But if you just have your phone for emergencies, then look at a prepaid plan. Shop around and you could spend as little as \$20 every three months. Best of all, since you don't have a contract commitment, if you don't like the model or your reception isn't up to your standards, you can try a different one when your minutes and time run out.
- 3. Use a land line for local calls.** This might seem counterintuitive, but if you haven't ditched your land line, use it for your local calls. Most all wired phone plans charge a flat fee for local calls, and if you don't use your cell, those are minutes saved at no additional cost. You can do the same at work, although some employers obviously frown on using company phones for personal use.
- 4. Eliminate unnecessary frills.** You might really use text messaging, but what about roadside assistance or protection? Many carriers offer roadside assistance for only \$3 or \$4 a month, which means your carrier will come to your rescue if you have car trouble and, say, tow your car to the nearest service station. They also offer equipment protection for around \$5 a month. Truth is, those additional costs quickly add up. Equipment protection sounds fairly reasonable, but unless you destroy the latest and greatest smartphone shortly after you get it, by the time you

wreck or lose it you'll probably have already paid for it in monthly fees and the deductible. Also, look to your auto insurance or motor club membership, or even a premium credit card. You don't want to pay for something you already have or can get cheaper elsewhere.

5. **Ask and ye shall receive.** Say you have a plan that doesn't include texting because you figure you'll never use text messaging. Then you start getting texts from your friends. Or from work. Next thing you know, you're texting back. Then you get your next bill and find you're being charged \$50 extra just for those couple of texts – OK, those 23 texts – you sent. If that happens go to your local AT&T office, where they offer to switch you to a new plan including text for only an additional \$10 per month. You can be sure of one thing: Your service provider doesn't want to lose you to a competitor. So ask about better deals. Don't threaten, at least not at first, but it doesn't hurt to tell your service rep that a competitor is offering you a better plan. Chances are they'll do whatever it takes to keep you. Ultimately, it pays to be aware and to shop around. Pay attention to what you are paying for.

[Source: Money Talks News Ross Boissoneau 7 Jul 2011 ++]

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Notes of Interest:

- **Fast Food.** McDonald's may have served billions, but not every customer's happy about it. "A new consumer survey has crowned In-N-Out Burger as the nation's fast food favorite," CNN reports, "while giving low marks to iconic chains such as McDonald's, Burger King and KFC."
- **Ripoffs.** Ripoff Report® at <http://www.ripoffreport.com> is a consumer reporting Web site and publication, by consumers, for consumers, to file and document complaints about companies or individuals. Unlike the Better Business Bureau, Ripoff Report does not hide reports of "satisfied" complaints. ALL complaints remain public and unedited in order to create a working history on the company or individual in question.
- **Mileage rates.** The Internal Revenue Service has raised the mileage reimbursement rate from 51 to 55.5 cents for the second half of the year due to high gas prices. However, the government General Services Administration will not follow suit as they have with all previous IRS rate changes.
- **GPS.** Something to consider if you have a GPS in your car - don't put your home address in it. Put a nearby address (like a store or gas station) so you can still find your way home if you need to, but no one else would know where you live if your GPS were stolen. Especially if they have also stolen your garage door opener.

[Source: Various 1-15 Jul 2011 ++]

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Medicare Fraud Update 71:

- **Miami FL** - Psychiatrist Alan Gumer, 64, pleaded guilty to Medicare fraud for his critical role in a \$200 million scheme that enabled a chain of Miami-based mental-health clinics to bilk the government program. Gumer got in near the start of the nation's largest mental-health clinic racket in 2004, signing bogus medical evaluations to qualify patients for costly group therapy sessions covered by Medicare. At times," Gumer also prescribed psychiatric medications to individuals who did not need them to make it appear to Medicare that the patients' qualified for treatment, according to federal court documents. The racket enabled Miami-based American Therapeutic Corp. to bill the government program for psychotherapy that was unnecessary for thousands of patients who faked suffering from depression, schizophrenia or bipolar conditions. Gumer was responsible for \$19.3 million in false claims filed on behalf of the patients, who were paid kickbacks by the American Therapeutic chain of South Florida clinics. Asked by U.S. District Judge Patricia Seitz why he pleaded guilty, Gumer said: "It's the right thing to do." Gumer became the first doctor among three psychiatrists indicted in the American Therapeutic case to admit playing such a

dominant part in the seven-year scam, which netted \$83 million in Medicare payments for the company. He and two other psychiatrists, Dr. Mark Willner of Weston and Dr. Alberto Ayala of Miami-Dade, served as the company's medical directors. Gumer faces between six and seven years in prison under sentencing guidelines for pleading to one count of conspiring to defraud the taxpayer-funded Medicare program. But because he is cooperating with authorities, Justice Department lawyers are expected to recommend that he receive a sentence reduction in the future, according to his plea agreement. Prosecutors dropped four other healthcare fraud charges as part of the deal.

- **Miami FL** - Three more Miami-area residents pleaded guilty 13 JUL to participating in a \$200 million Medicare-fraud scheme. Under the scheme, Florida-based American Therapeutic Corp., its management company, as well as the American Sleep Institute conspired to bill the government insurance program for medically unnecessary services. The companies paid kickbacks to owners and operators of assisted-living facilities and halfway houses and to so-called patient brokers in exchange for delivering them ineligible patients. The participation of two of the men who pleaded guilty, Joseph Valdes and James Edwards, contributed \$9.9 million and \$8.16 million, respectively, to the overall Medicare fraud. The third individual, Adriana Mejia, laundered \$2.25 million in funds, according to the Justice Department.
- **Baton Rouge LA** - Sonya Lewis Williams and two of her employees were indicted 30 JUN on federal charges of health care fraud totaling at least \$349,715. She operated two companies, Fusion Services and Grace Social Services, that were Medicare providers. Fusion employed two licensed clinical social workers who allowed their Medicare provider numbers to be used by Williams to defraud the health insurer for the elderly and disabled, the indictment alleges. Carla M. Clark and Lillie Lavan are accused of assisting Williams in the preparation and submission of false billings to Medicare for face-to-face psychotherapy services that were never provided to patients. Those false billings totaled \$1.2 million between May 2006 and September 2010. Williams actually received \$349,715 from Medicare and shared that money with Clark and Lavan. Unnamed other individuals also participated in the alleged scheme to defraud Medicare. Some of the patients listed as receiving face-to-face psycho-therapy died prior to the service dates for which Medicare was billed.
- **Cowen WV** - Angela McCracken will have to pay back nearly \$25,000 dollars after being convicted of health care fraud. She falsified documents, which caused Medicaid to pay her for services she did not perform, according to a news released from the West Virginia Department of Health and Human Resources. She was convicted of health care fraud and was order to repay \$24,493.60 in restitution, officials said. McCracken had a one to 10 year prison sentence suspended, but will spend five years on probation, officials also said. She worked as a residential habilitation service provider, who helped low income and developmentally disabled patients.
- **Gambrells MD** - Larry Bernhard, age 55, a podiatrist who operated his business from his home pleaded guilty to health care fraud and aggravated identity theft related to a scheme to fraudulently bill Medicare for more than \$1.1 million. Bernhard admits that from 31 OCT 07 to JUL 2010 he fraudulently billed Medicare Advantage plans and was paid at least \$1.1 million from these plans. All of the fraudulent billing occurred while Bernhard was excluded from billing all federal health care programs, including Medicare Advantage plans. Of the \$1.1 million received by Bernhard, at least \$1 million was for services that were not rendered. Bernhard admits that he used the names and personal identifying information of approximately 200 patients at various nursing homes to submit false bills for podiatry care that he never performed. Bernhard faces a maximum penalty of 10 years in prison for health care fraud and a mandatory two years in prison, consecutive to any other sentence imposed, for aggravated identity theft. U.S. As part of his plea agreement, Bernhard has agreed to pay restitution of \$1,122,992.08.

- **Brooklyn NY** - Leonard Langman, M.D., a neurologist who owned and operated a., medical clinic pleaded guilty 6 JUL to one count of health care fraud for his role in a scheme to defraud Medicare; the U.S. Department of Labor, Office of Workers' Compensation Programs (OWCP); the New York State Workers' Compensation Board (NYS-WCB); the New York State Insurance Fund (SIF) and various private health insurance carriers. From JAN 06 to DEC 09, Dr. Langman caused false and fraudulent claims to be submitted to Medicare, OWCP, NYC-WCB, SIF and others. Langman submitted claims for services that were not provided; misrepresented the services he provided by billing for a level of service higher than that which he performed; double-billed different health care benefit programs for the same service provided to the same beneficiary; and billed for services purportedly performed when he was out of the country. At sentencing, Dr. Langman faces a maximum sentence of 10 years in prison. Sentencing is scheduled for Dec. 2, 2011.
- **Atlanta GA** - Radiologist Dr. Rajashakher P. Reddy, 41, was found guilty 7 JUL of 20 counts of wire fraud, five counts of mail fraud, four counts of health care fraud, and one count of obstruction of justice after a six-day trial. He was acquitted of five counts of wire fraud. Reddy ran "Reddy Solutions Inc.," with provided services to hospitals in the Southeast that do not have full-time radiology coverage. He produced tens of thousands of reports claiming to include his medical findings and diagnoses based on radiology studies that had been performed, when in fact all NOV 09, also was convicted of obstructing the investigation by instructing his employees to destroy records subpoenaed by the government and create new ones. He also asked employees to lie to investigators, authorities said. He could receive a maximum sentence of 20 years in prison and a fine of up to \$250,000 for each of the fraud and obstruction counts. A sentencing date has not yet been set.
- **Brunswick FL** - Samuel Curtis III, 37, admitted t 8 JUL that he participated in a scheme to defraud Medicare out of more than a half million dollars by submitting phony claims from his Glynn County and Texas medical equipment companies. A FBI Special Agent testified the scheme began in JAN 05 at Team Orthotics and Prosthodontics, which Curtis owned and operated. The scheme shifted to Preferred when Curtis bought the company in January 2008 and continued through June of that year. A Preferred employee uncovered the fraud and reported it to federal authorities. The scheme involved more than \$539,000 in phony Medicare claims. Assisted by his office manager Cecil Risher, Curtis devised a plan to steal identification information from Medicare patients and doctors that the pair used to submit phony claims to Medicare. They billed Medicare for prosthetics, braces and other medical devices that either never were provided to patients, were never prescribed by doctors or were not medically necessary, an FBI and U.S. Department of Health and Human Services investigation showed. Curtis faces up to 10 years in prison and a fine up to \$250,000 on the conspiracy count. The judge ordered him to remain jailed without bail pending sentencing. Risher pleaded guilty on Jan. 10 to conspiracy under a similar plea agreement. He remains free on \$20,000 bail while awaiting sentencing.
- **Los Angeles CA** - The co-owners of two health care companies have been convicted on multiple fraud charges after scheming to defraud Medicare out of about \$20 million. A federal jury found Evans Oniha guilty 7 JUL on one count of conspiracy to commit health care fraud, four counts of health care fraud and one count of false statements. The government says that from OCT 02 to FEB 2011, Oniha and a co-owner wrongly obtained Medicare beneficiary information and used it to submit false claims for equipment and home health services. Oniha and co-owner Camillus Ehigie operated Caravan Medical Supplies in Culver city and Prosperity Home Health Services in Lawndale. Ehigie pleaded guilty to multiple charges on 5 JUL and will be sentenced in JAN2012. Oniha is scheduled to be sentenced 19 SEP.
- **Toms River NJ** - Patrick Lynch, 54, admitted to treating patients, prescribing medicine and ordering procedures while posing as a licensed physician. Officials say that Lynch created the Visiting Doctors of

New Jersey, a medical practice that offered care to elderly homebound patients in Ocean and Monmouth Counties. They say that he hired licensed doctors and nurses to serve clients, but that those professionals quit after they did not get paid. Instead of paying the employees, Lynch used their licensed identification numbers to write prescriptions and bill Medicare, according to a press release. He has been charged with health care fraud and aggravated identity theft and faces as up to 12 years in prison with fines totaling more than \$250,000. Sentencing is scheduled for 17 OCT.

[Source: Fraud News Daily 1-15 Jul 2011 ++]

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Medicad Fraud Update 43:

- **Philippines** - A federal judge on 30 JUN ordered Health Visions Corp, a Philippines company, to pay back \$100 million it swindled from the U.S. military's health insurance program. HVC, which pleaded guilty to mail fraud, was ordered to liquidate all assets within 10 months and give the proceeds to the U.S. government. Federal prosecutors say the company bilked the military's Tricare program out of \$99.9 million between 1998 and 2004. The program insures 9.2 million current and retired servicemen and dependents worldwide. The company routinely inflated claims by more than 230 percent, operated a phony insurance program and billed for medical services never delivered, court records showed, and the **Pentagon moved slowly** to uncover the scheme.

Assistant U.S. Attorney Peter Jarosz described Health Visions as the biggest violator yet in a long running investigation into Tricare fraud in the Philippines. "This is basically a death sentence for the company. It will no longer exist and that will protect the Tricare program since it was the biggest violator," he said after the hearing. "We got what we needed out of this prosecution." Formed in 1997, Health Visions owned and operated hospitals and clinics in the Philippines and billed Tricare on behalf of other health care providers. On top of the \$99.9 million in restitution, U.S. District Judge Barbara Crabb ordered the company to forfeit an additional \$910,000 and pay a \$500,000 fine. Health Visions will be required to sell off land, office buildings and hospitals in the Philippines and an airplane and houses in the U.S. under Crabb's order. The company has run into problems selling hospitals because of ownership disputes, and Jarosz said it was uncertain whether the U.S. government would ever recover the full amount.

Health Visions and its former president, Thomas Lutz, were hit with a 75-count indictment in 2005. Lutz, 41, has pleaded guilty to his role in a kickback scheme and could face up to five years in prison when he is sentenced. A date for that hearing will be scheduled shortly now that the company has been sentenced, Jarosz said. The case has been an embarrassment to the Pentagon, where different branches have blamed one another for allowing the company's fraud to slip through the cracks. The fraud was so extensive that claims from the Philippines increased by 2,000 percent between 1998 and 2003 even as the number of Tricare beneficiaries remained the same. Payments to the country went up from less than \$3 million to more than \$60 million during that time.

The Office of Inspector General has criticized Tricare's managers for waiting years to cut off payments to Health Visions after suspecting the company of fraud. William Winkenwerder, former assistant secretary of defense for health affairs, said 30 JUN that the inspector general's office was partly to blame because it refused his requests to send additional investigators to the country. He said he worked hard to stop the problems after they came to his attention in 2003. Asked how the company was able to defraud the program of \$100 million, Winkenwerder said: "There were some very deceptive practices that were occurring. The fact that this was a faraway location did add to the challenge of uncovering problems. And they didn't get away with it ultimately, which is the good news." The investigation has been handled by prosecutors in

Wisconsin because WPS Health Insurance, a Madison company, is the subcontractor that handles most overseas claims. About three dozen others have been indicted, mostly U.S. military veterans and Philippine doctors.

- **Las Vegas NV** - Rakesh Nathu, a Las Vegas physician, will have to pay the U.S. government \$5.7 million plus interest to settle allegations that he submitted false claims to federal health care programs for various radiation oncology services. The government claimed that Nathu had improperly billed Medicare, TRICARE and the Federal Employees Health Benefits Plan from 2007 through 2009. He double billed for several procedures affiliated with radiation treatment plans, billed for medically unnecessary radiation oncology services, and billed for certain high reimbursement radiation oncology services when a different, less expensive service should have been billed. "This case is about stealing millions of dollars from taxpayers," said Daniel R. Levinson, Inspector General of HHS. "And we'll continue to fight this kind of unconscionable abuse of our Medicare program." Daniel G. Bogden, the U.S. Attorney for the District of Nevada, encourages patients, employees, and others who suspect billing fraud on the part of doctors to report such fraud to federal authorities immediately.
- **Atlanta GA** - The Office of Inspector General (OIG) U.S. Department of Health and Human Services (HHS) Investigators said Pablo Sanu-Yasell and Jose Garcia-Suarez defrauded doctors, patients and the federal government and are now at the top of their federal most wanted list. The HHS added them to the list 11 JUL. According to an indictment, Yasell ran his business in a strip mall in Woodstock. "Our investigation revealed that he had no patients, none what so ever," said Assistant Special Agent in Charge Mark Creamer. Yasell is accused of falsely billing Medicare for \$120,000 and Suarez \$333,000. The men used real doctor identification numbers and Medicare patient information to defraud the system. WSBTV Channel 2's Erica Byfield went looking for Yasell's office but could not find it. Instead, she found a restaurant, yoga studio and UPS store in the strip mall. "Sometimes they will use post office boxes. They will place an address that's really like a UPS store," said Creamer. Suarez has listed business addresses in south Georgia and downtown Atlanta. Both men were last seen in Georgia in 2008. Agents now suspect they are traveling together in either Cuba or the Dominican Republic. OIG's most wanted health care fugitives can be seen at <http://oig.hhs.gov/fraud/fugitives/index.asp>. In all, OIG is seeking more than 170 fugitives on charges related to health care fraud and abuse.



Jose Garcia-Suarez
[DOB: 10-01-1963](#)
[Height: 5'11"](#)
[Weight: 150 lbs.](#)



Pablo Sanu-Yasell
[DOB: 03-02-1937](#)
[Height: 5'7"](#)
[Weight: 150 lbs.](#)

[Source: Fraud News Daily 15 - 30 Jun 2011 ++]

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State Veteran's Benefits: The state of Nebraska provides several benefits to veterans as indicated below. To obtain information on these refer to the “**Veteran State Benefits NE**” attachment to this Bulletin for an overview of those benefits listed below. Benefits are available to veterans who are residents of the state. For a more detailed explanation of each click on “[Learn more about ...](#)” wording highlighted in blue on the attachment.

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

[Source: <http://www.military.com/benefits> Jul 2011 ++]

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Military History: During WWII the battle for Leyte had been raging since an Allied invasion force arrived off the coast of this central Philippine island. From the 23rd of October to the 26th, in a running battle on the sea and in the air, the Japanese attempted to repulse the landing. This titanic military engagement, known as “The Battle of Leyte Gulf,” proved to be the largest naval battle in history and decided the fate of not only the Philippines, but also of the once mighty IJN Combined fleet. During the four-day skirmish, Adm. Halsey’s Third Fleet and Adm. Kinkaid’s Seventh decimated four separate Japanese naval task forces commanded by Admirals Ozawa, Kurita, Nishimura and Shima. When the smoke had cleared, the surviving Japanese ships of Operation “SHO-GO” limped back to Tokyo and the Americans secured the landing beaches. Consequently, despite the stiff resistance by the Imperial Navy and Adm. Onishi’s newly instituted Kamikaze tactics, American ground troops finally stormed ashore. To read more about the details of this military operation refer to this Bulletin’s attachment titled, **“Saga of Ormac Bay”**. [Source: <http://www.militaryhistoryonline.com/wwii/articles/ormocbay.aspx> Jul 2011 ++]

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Military History Anniversaries: Significant 16-31 JUL events in U.S. Military History are:

- Jul 16 1779 - Revolutionary War: American troops capture Stony Point, N.Y.
- Jul 16 1945 - WWII: The United States detonates the first atomic bomb in a test at Alamogordo, N. M.
- Jul 17 1898 - Spanish-American War: U.S. troops take Santiago de Cuba.
- Jul 17 1966 - Vietnam: Ho Chi Minh orders a partial mobilization of to defend against American airstrikes.
- Jul 18 1915 - WWI: 2nd Battle of Isonzo begins & ends with loss of 280,000 men
- Jul 18 1942 - WWII: German Me-262, the first jet-propelled aircraft to fly in combat, makes its first flight.
- Jul 18 1971 - Vietnam: New Zealand and Australia announce they will pull their troops out of Vietnam.
- Jul 19 1942 - WWII: German U-boats are withdrawn from positions off the U.S. Atlantic coast due to American anti-submarine countermeasures.
- Jul 20 1917 - WWI: Draft lottery held; #258 is 1st drawn
- Jul 20 1944 - WWII: Adolf Hitler is wounded in an assassination attempt by German Army officers.
- Jul 20 1950 - Korean War: The U.S. Army’s Task Force Smith is pushed back by superior forces.
- Jul 21 1861 - Civil War: In the first major battle of the War, Confederate forces defeat the Union Army along Bull Run near Manassas Junction, Virginia. The battle becomes known as Manassas by the Confederates, while the Union calls it Bull Run
- Jul 21 1944 - WWII: U.S. Army and Marine forces land on Guam in the Marianas.
- Jul 21 1954 - Vietnam: The French sign an armistice with the Viet Minh that ends the war but divides Vietnam into two countries.
- Jul 22 1775 - Revolutionary War: George Washington took command of the Continental Army.
- Jul 22 1814 - Five Indian tribes in Ohio make peace with the United States and declare war on Britain.
- Jul 22 1966 - Vietnam: B-52 bombers hit the DMZ between North and South Vietnam for the first time.
- Jul 22 1987 - Gulf War: US began escorting re-flagged Kuwaiti tankers in Persian Gulf
- Jul 23 1944 - WWII: US forces invade Japanese-held Tinian.
- Jul 23 1962 - The Geneva Conference on Laos forbids the United States to invade eastern Laos.
- Jul 24 1990 - Gulf War: U.S. warships in Persian Gulf placed on alert after Iraq masses nearly 30,000 troops near its border with Kuwait

- Jul 25 1944 - WWII: Allied forces begin the breakthrough of German lines in Normandy.
- Jul 25 1990 - Gulf War: U.S. Ambassador tells Iraq, US won't take sides in Iraq-Kuwait dispute.
- Jul 27 1861 - Civil War: Confederate troops occupy Fort Fillmore, New Mexico
- Jul 27 1944 - WWII: U.S. troops complete the liberation of Guam.
- Jul 27 1953 - Korea: Representatives of the United Nations, Korea and China sign an armistice at Panmunjon ending the war.
- Jul 27 1964 - Vietnam: President Lyndon Johnson sends an additional 5,000 advisers to South Vietnam.
- Jul 27 1995 - The Korean War Veterans Memorial is dedicated in Washington, D.C..
- Jul 28 1914 - WWI: War begins when Austria-Hungary declared war on Serbia followed by Germany declaring war on France (3 AUG). On 4 AUG Germany invaded Belgium, Britain declared war on Germany, and President Woodrow Wilson declared policy of U.S. neutrality.
- Jul 28 1945 - A B-25 bomber crashes into the Empire State Building in New York City, killing 13 people.
- Jul 28 1965 - Vietnam: LBJ sends 50,000 more soldiers to Vietnam (total of 125,000)
- Jul 29 1915 - U.S. Marines land at Port-au-Prince to protect American interests in Haiti.
- Jul 29 1967 - Fire aboard carrier USS Forrestal in Gulf of Tonkin kills 134. \$100 million damage
- Jul 30 1942 - FDR signs bill creating women's Navy auxiliary agency (WAVES)
- Jul 30 1944 - US 30th division reaches suburbs of St-Lo Normandy
- Jul 30 1945 - WWII: After delivering parts of the first atomic bomb the U.S. cruiser Indianapolis is torpedoed/sinks, 880 die.
- Jul 31 1813 - Revolutionary War: British invade Plattsburgh NY
- Jul 31 1991 - Senate votes to allow women to fly combat aircraft

[Source: Various Jul 2011 ++]

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Military Trivia Update 31:

1. What famous Hollywood film director once served as a combat engineer during the Battle of the Bulge?
2. What did John Banner, who found fame as the portly and myopic Sergeant Schultz on Hogan's Heroes, do during WWII?
3. When stricken by appendicitis just before shipping out, this future legendary college coach was replaced at the last minute by an officer who was killed by a kamakazi pilot while manning his post.
4. Due to eye problems, this actor memorized the recruitment center eye chart in a failed attempt to join the US Marines.
5. The father of these famous siblings died while being held as a prisoner of war.
6. Later the butt of endless jokes on American television, this actor won five Bronze
7. After the war, this Hollywood tough guy was falsely touted by the studios as having served as a tail gunner on a bomber during WWII.
8. This British actor, who was assigned to the U.S. 1st Infantry Division, was among the first soldiers to land at Normandy on D-Day.
9. This comedian boasted that he was the only celebrity to go into the war as a Private and come out of the war as a Private.
10. Although he appeared in 14 films set in WWII, this actor used his 3-A draft status to repeatedly postpone enlistment and never served in the war.

Answers

1. Mel Brooks. During the battle, Brooks responded to a German call to surrender by doing his version of Al Jolson's Toot Toot Tootsie.

2. Modeled for recruiting posters. Ironically, both Banner and Werner Klemperer, who played Colonel Klink on "Hogan's Heroes", were Jews who escaped Nazi Germany and came to America before the war.
3. John Wooden. Wooden, later of UCLA basketball fame, was to have served on the U.S.S. Franklin, an aircraft carrier that suffered extensive casualties at the battle of Leyte.
4. John Wooden. Wooden, later of UCLA basketball fame, was to have served on the U.S.S. Franklin, an aircraft carrier that suffered extensive casualties at the battle of Leyte.
5. Tom and Dick Smothers. Major Thomas Smothers died on board a Japanese prison ship en route to Japan. The Smothers Brothers would later become opponents of vocal the war in Vietnam.
6. Ted Knight. Born Tadewurz Wladziu Konopka, Knight is destined to be remembered as Ted Baxter, bumbling TV anchor on "The Mary Tyler Moore Show".
7. Charles Bronson. Bronson actually spent the war driving a mess truck in Kingman, Arizona.
8. David Niven. Niven fought all the way to the Rhine river and was one of 25 Brits to be awarded the U.S. Legion of Merit medal. The orderly assigned to assist Niven throughout the war was actor Peter Ustinov.
9. Red Skelton. Drafted into the Army, Skelton entertained the troops in Italy until his discharge.
10. John Wayne. To his credit, the diminutive Wally Cox tried but failed to make it through boot camp. After being hospitalized several times with heat stroke, he was given an honorable discharge for medical reasons.

[Source: http://www.funtrivia.com/quizzes/history/war_history.html Jun 2011 ++]

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Tax Burden for Connecticut Retirees: Many people planning to retire use the presence or absence of a state income tax as a litmus test for a retirement destination. This is a serious miscalculation since higher sales and property taxes can more than offset the lack of a state income tax. The lack of a state income tax doesn't necessarily ensure a low total tax burden. Following are the taxes you can expect to pay if you retire in Connecticut:

Sales Taxes

State Sales Tax: 6% (food, prescription & non-prescription drugs exempt).

Gasoline Tax: 41.8 cents/gallon

Diesel Fuel Tax: 39.6 cents/gallon

Cigarette Tax: \$3.00/pack of 20.

Personal Income Taxes

Tax Rate Range: Low - 3.0%; High - 6.5%

Income Brackets: *Three. Lowest - First \$10,000; Highest - Over \$500,000 ([Click here to estimate your tax](#))

Number of Brackets: 3

Personal Exemptions: **Single - \$13,000; Married - \$24,000; Dependents - \$0 ([Click for details](#))

Standard Deduction: None

Medical/Dental Deduction: None

Federal Income Tax Deduction: None

Retirement Income Taxes: Social Security is exempt for individual taxpayers with federal adjusted gross income of less than \$50,000 and for married filing jointly taxpayers, with federal AGI below \$60,000. All out-of-state government and federal civil service pensions are fully taxed. Tax information for seniors ([click here](#)).

Retired Military Pay: Connecticut exempts 50% of federally taxable military retirement pay from the state income tax. The exemption applies to federal retirement pay to members of the U.S. Army, Navy, Air Force, Marines, Coast Guard, and Army and Air National Guard. Benefits received by a beneficiary under an option or election made by a retired member are also covered by this law.

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

Taxes and real and personal property are assessed and collected by individual towns or other taxing districts. All assessments are at 70% of fair market value. An annual property tax credit or rent rebate is available to residents, age 65 or older, or to a surviving spouse of a previously approved applicant who is age 50 or older. Regardless of age, totally disabled persons are also eligible. Income parameters apply. Municipalities may provide additional tax relief for seniors. Call 800-286-2214 or 860-297-5962 for details.

Inheritance and Estate Taxes

Connecticut imposes an estate tax which taxes the transfer of estates valued at \$3.5 million or more at a progressive rate starting with 5 percent of the first \$100,000 over the threshold and rising to 16 percent for the amount above \$10 million. This is applicable to estates of decedents dying on or after January 1, 2010.

For further information, visit the Connecticut Department of Revenue site <http://www.ct.gov/drs/site/default.asp>. For more details refer to <http://www.ct.gov/drs/cwp/view.asp?A=1510&Q=453368>.
[Source: www.retirementliving.com Jul 2011 ++]

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Veteran Legislation Status 13 JUL 2011: For a listing of Congressional bills of interest to the veteran community introduced in the 112th Congress refer to the Bulletin's "**House & Senate Veteran Legislation**" attachment. Support of these bills through cosponsorship by other legislators is critical if they are ever going to move through the legislative process for a floor vote to become law. A good indication on that likelihood is the number of cosponsors who have signed onto the bill. Any number of members may cosponsor a bill in the House or Senate. At <http://thomas.loc.gov> you can review a copy of each bill's content, determine its current status, the committee it has been assigned to, and if your legislator is a sponsor or cosponsor of it. To determine what bills, amendments your representative has sponsored, cosponsored, or dropped sponsorship on refer to <http://thomas.loc.gov/bss/d111/sponlst.html>.

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

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Veteran Hearing/Mark-up Schedule: Following is the current schedule of Congressional hearings and markups pertaining to the veteran community. Congressional hearings are the principal formal method by which committees collect and analyze information in the early stages of legislative policymaking. Hearings usually include oral testimony from witnesses, and questioning of the witnesses by members of Congress. When a U.S. congressional committee meets to put a legislative bill into final form it is referred to as a mark-up. Veterans

are encouraged to contact members of these committees prior to the event listed and provide input on what they want their legislator to do at the event. Membership of each committee and their contact info can be found at <http://www.congress.org/congressorg/directory/committees.tt?commid=svete>:

- July 27. HVAC Subcommittee on Oversight and Investigations will hold a mark-up on pending legislation. (10:00 am, 334 Cannon)
- July 27, 2011. The Senate Committee on Veterans Affairs will hold a hearing to discuss the long term costs of war. (Time: TBD. Location: 418 Russell)
- July 28, 2011 (Formerly June 23). HVAC, Subcommittee on Economic Opportunity will conduct an oversight hearing on "Improving Contracting Opportunities for Veteran-Owned Small Businesses Throughout the Federal Government." (Time TBD. 334 Cannon)

[Source: Veterans Corner w/Michael Isam 14 Jul 2011 ++]

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Have You Heard? My New Doctor's Advice.

Q: Doctor, I've heard that cardiovascular exercise can prolong life. Is this true?

A: Heart only good for so many beats... Don't waste on exercise. Everything wears out eventually. Speeding up heart will not make you live longer; it like saying you extend the life of a car by driving faster. Want to live longer? Take nap.

Q: Should I reduce my alcohol intake?

A: Oh no. Wine is made from fruit. Brandy is distilled wine, that means they take water out of fruity bit so you get even more of goodness that way. Beer is also made of grain. Bottoms up!

Q: How can I calculate my body/fat ratio?

A: Well, if you have body and you have fat, your ratio one to one. If you have two bodies, your ratio is two to one.

Q: What are some of the advantages of participating in a regular exercise program?

A: Can't think of single one, sorry. My philosophy: No pain...good!

Q: Aren't fried foods bad for you?

A: YOU NOT LISTENING! Food is fried in vegetable oil. How can getting more vegetables be bad?

Q : Will sit-ups help prevent me from getting a little soft around the middle?

A: Oh no! When you exercise muscle, it get bigger. You should only be doing sit-up if you want bigger stomach.

Q: Is chocolate bad for me?

A: You crazy?!? HEL-LO-O!! Cocoa bean! Another vegetable! It is the best feel-good food around!

Q: Is swimming good for your figure?

A: If swimming good for figure, explain a whale to me.

Q: Is getting in shape important for my lifestyle?

A: Hey! 'Round' is a shape!

Well... I hope this has cleared up any misconceptions you may have had about food and diets. And remember: Life should NOT be a journey to the grave with the intention of arriving safely in an attractive and well-preserved body, but rather to skid in sideways - Chardonnay in one hand - chocolate in the other - body thoroughly used up, totally worn out and screaming "WOO-HOO, what a ride!!"

AND.....

For those of you who watch what you eat, here's the final word on nutrition and health. It's a relief to know the truth after all those conflicting nutritional studies.

1. The Japanese eat very little fat and suffer fewer heart attacks than Americans.
2. The Mexicans eat a lot of fat and suffer fewer heart attacks than Americans.
3. The Chinese drink very little red wine and suffer fewer heart attacks than Americans.
4. The Italians drink a lot of red wine and suffer fewer heart attacks than Americans...
5. The Germans drink a lot of beer and eat lots of sausages and fats and suffer fewer heart attacks than Americans.

CONCLUSION: Eat and drink what you like. Speaking English is apparently what kills you.

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"Better to remain silent and be thought a fool than to speak out and remove all doubt."

- **Abraham Lincoln** (16th President of the United States | 1809 –1865)

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