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# RAO BULLETIN

## 1 October 2010

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 Attachment - Blue-Brown Water Claim Ships & Diseases

\*\* Denotes Military Times sourced articles. Anyone who cannot access or open the website provided either because they do not have a password or the information has been removed from their site can submit a request to [raoemo@sbcglobal.net](mailto:raoemo@sbcglobal.net) for it to be forwarded to them by email.

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**VA Disclosure Policy:** The Department of Veterans Affairs (VA) policy on disclosure of adverse medical events was praised as a 'valuable resource for all health care institutions' in an article in a recent issue of the New England Journal of Medicine. "At VA we strive every day to deliver superior health care," said Dr. Robert Petzel, VA's Under Secretary for Health. "When mistakes occur, we immediately acknowledge them and learn how we can do better in the future." Adverse events, such as incomplete cleaning of medical instruments, may affect significant numbers of patients over time. However, prompt disclosure also presents an opportunity to quickly assess risk to patients and to learn how to improve health care delivery and processes.

The article, entitled The Disclosure Dilemma, states that although many health care organizations have adopted policies encouraging disclosure of adverse events to individual patients, these policies seldom address large scale adverse events. It adds, however, that VA's own disclosure policy is a notable exception. The authors, including Denise Dudzinski, Ph.D., an associate professor and Director of Graduate Studies at the Department of Bioethics & Humanities at the University of Washington School of Medicine in Seattle, go on to say that VA's policy outlines "a clear and systematic process" for disclosure decisions regarding large scale adverse events -a process that can include convening a multidisciplinary advisory board with representation from diverse stakeholder groups and experts, including ethicists. A co-author of the article is VA employee Mary Beth Foglia, RN, Ph.D., of the National Center for Ethics in Health Care and affiliate faculty at the Department of Bioethics and Humanities the University of Washington.

The VA policy endorses transparency and expresses an obligation to disclose adverse events that cause harm to patients. Its provisions can include the convening of a multidisciplinary advisory board to review large-scale adverse events, recommend whether to disclose and provide guidance on the manner of disclosure. The authors of the article conclude with the following observation, which summarizes VA's philosophy on the matter: "Disclosure should be the norm, even when the probability of harm is extremely low. Although risks to the institution are associated with disclosure, they are outweighed by the institution's obligation to be transparent and to rectify unanticipated patient harm." For additional information, contact the VA Office of Public Affairs at (202) 461-7600. [Source: VA News Release 29 Sep 2010 ++]

**Tricare Suspicious Calls:** Recently there has been a rash of calls to military personnel from individuals who claimed to be with DoD and requested information under the guise of it being a Tricare national survey. If you receive a call that request personal information do not disclose it. Ask the caller basic type questions to help ensure you determine if the call is legitimate i.e. a call back number, there name and employee number, the name of the company needing the information, and why they need your personal information. Remember your personal information is yours and you need to protect it. Following is a Synopsis of one event:

On 15 Sep 2010, an active duty Hurlburt Field (HFLD) Airmen was contacted about a Tricare survey. The member was asked for personal information such as: Social Security Number, home address, Date of Birth. Additionally, the caller asked about deployment status and length of deployments. When the Airmen asked why personal information Tricare already had on file was being asked, the caller immediately hung up. The Airmen attempted to call the number back, but no one answered. The member saved the phone number (312) 258-4260. An online phone look up was conducted the number originates from Chicago, Illinois area. Using whocallsme.com showed there is a blog about the above number and calling others around the United States. The Investigations section called the above number and an answering machine picked-up and spoke about a Tricare survey. The national and local Tricare offices were contacted and verified they do conducted surveys; however, they never request the above type personal information. If you receive a call from anyone about a Tricare and believe it to be false contact your local Tricare office. The below link is contains some added safeguard measures:[www.tricare.mil/mybenefit/home/Medical/RightsAndResponsibilities/ProtectingPersonalInformation](http://www.tricare.mil/mybenefit/home/Medical/RightsAndResponsibilities/ProtectingPersonalInformation). [Source: 1 SOSFS/S2I Intelligence Bulletin 10-001 15 Sep 2010 ++]

**Mobilized Reserve 28 SEP 2010:** The Department of Defense announced the current number of reservists on active duty as of 28 SEP 2010. The net collective result is 1875 more reservists mobilized than last reported in the 15 SEP 2010 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 76,828; Navy Reserve, 6,881; Air National Guard and Air Force Reserve, 15,469; Marine Corps Reserve, 4,013; and the Coast Guard Reserve, 709. This brings the total National Guard and Reserve personnel who have been activated to 103,900 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/d20100928ngr.pdf>. [Source: DoD News Release No. 887-10 dtd 29 SEP 2010 ++]

**HUD-VASH Update 01:** The Indian Veterans Housing Opportunity Act of 2010 (H.R.3553/S.3246), co-sponsored by Sen. John Thune (R-SD), passed the Senate 27 SEP. The legislation would discontinue the practice of counting veterans' disability compensation as income. Because housing assistance provided by the U.S. Departments of Housing and Urban Development (HUD) and Veterans Affairs (VA) is based on income, the practice has often pushed disabled Native American veterans above the income threshold for housing assistance, or actually increased their rent. The bill, which was also sponsored by Sen. Ron Wyden (D-OR) passed the House of Representatives in April. It is now headed to the president's desk for signature. [Source: Rapid City Journal article 29 Sep 2010 ++]

**VA Compensation & Pensions Update 02:** There is a hoax circulating the web that VA comp rates are going up significantly due to recent legislation. What is being sent around is a chopped version of an actual bill, H.R.4667, which has passed both houses and awaits the President's signature. The real bill calls for VA rates to be increased at same rate as SS is increased. However, the increase in SS is determined by the increase in the Consumer Price Index (CPI-W) as determined by the Bureau of Labor Statistics in the Department of Labor. By law, it is the official measure used by SS to calculate the cost-of-living adjustment. If you check SSA's website, here is what they said last year about the COLA. "Monthly Social Security and Supplemental Security Income (SSI)

benefits will not automatically increase in 2010 as there was no increase in the CPI-W from the third quarter of 2008 to the third quarter of 2009.” That is also the current situation this year. The version on the web has erroneous rates showing the 100% is going to double, the 10% rate is going up to over \$400, and others. The information is false. If in doubt you can check the text of H.R.4667 at [www.thomas.gov](http://www.thomas.gov). [Source: DAV Memo 29 Sep 2010 ++]

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**VA Blue Water Claims Update 13:** Following oversight requests from Senate Veterans' Affairs Committee Chairman Daniel K. Akaka (D-HI), the Department of Veterans Affairs has agreed to review the cases of nearly 17,000 Brown Water and other Vietnam Era veterans who claimed disabilities related to Agent Orange. VA had previously denied a number of claims without properly determining whether veterans served in Vietnam's inland waterways (Brown Water) or otherwise served in locations where veterans may have been exposed to herbicides, such as Agent Orange. "I commend VA for responding to data showing that many Navy vessels thought to have stayed at sea actually traveled into the inland waters of Vietnam. As a result, veterans who served on these vessels are eligible for the same benefits as Vietnam veterans who served on land. I urge veterans and advocates to visit the Senate Veterans' Affairs Committee website to determine if evidence of ships in inland waters or service on the perimeter of Air Force bases in Thailand entitles them or someone they know to health care and benefits," said Senator Akaka.

Akaka successfully urged VA to reconsider cases in which claims by Vietnam veterans potentially exposed to Agent Orange were denied without obtaining relevant military records, such as deck logs. These claims had been held in abeyance by VA while litigation was pending concerning so-called "Blue Water" veterans and their exposure to Agent Orange and other herbicides, and were subsequently denied. Akaka discovered that many of these veterans actually served in so-called "Brown Water" or inland waters of Vietnam, and should have received the same presumption of service-connection as veterans who had "boots on the ground" in Vietnam. By law, VA presumes that veterans who served in inland waterways were exposed to Agent Orange or other herbicides. Any of those veterans who suffer from certain diseases, and their survivors, may qualify for monetary benefits and health care.

With this review, certain veterans who were previously considered "Blue Water" veterans will have their claims re-evaluated for evidence of "Brown Water" service, or evidence of service in other locations where VA acknowledges that herbicides may have been used, such as the perimeter of Air Force bases in Thailand. The Senate Veterans' Affairs Committee website provides a list of the ships VA has acknowledged traveled in inland waters, as well as evidence about other ships that the committee has received. A list of the ships identified to have traveled in Vietnam's inland waters by VA is available at [http://veterans.senate.gov/upload/Ships\\_in\\_Vietnam.docx](http://veterans.senate.gov/upload/Ships_in_Vietnam.docx). Akaka's committee staff also has compiled an additional list of ships with evidence or suggestion of service in Vietnam's inland waters. That list is available at [http://veterans.senate.gov/upload/Tracking\\_List\\_Ships.docx](http://veterans.senate.gov/upload/Tracking_List_Ships.docx). For a list of the conditions Vietnam veterans are presumed exposed to, refer to [www.publichealth.va.gov/exposures/agentorange/diseases.asp#veterans](http://www.publichealth.va.gov/exposures/agentorange/diseases.asp#veterans). In addition, monetary benefits and care are provided to Vietnam veterans' offspring with spina bifida, and to children of women veterans who served in Vietnam who have birth defects. For more information refer to [www.publichealth.va.gov/exposures/agentorange/conditions/birth\\_defects.asp](http://www.publichealth.va.gov/exposures/agentorange/conditions/birth_defects.asp). Note: The information from all these websites can be found on the "**Blue-Brown Water Claim Ships & Diseases**" attachment to this Bulletin. [Source: [www.VAWatchdog.com](http://www.VAWatchdog.com) Larry Scott article 28 Sep 2010 +]

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**GI Bill Update 85:** The VA released the Fiscal Year 2011 Montgomery GI Bill payment rates. This year the MGIB rates increased by 4 percent to \$1,426 a month, making the total value of the older GI Bill program over \$51K (for 36 months) for those who have not started using their benefit. Unlike the the Post-9/11 GI Bill, the MGIB rates for full-time, three quarter, half, and less than half-time are relatively straight forward. A student veteran carrying a full load (normally 12 semester hour units) earns the full monthly payment rate of \$1,426 while the halftime-time student would get half that amount (\$713). The VA also released the FY2011 payment rates for the Montgomery GI Bill for Selected Reserve (MGIB-SR), Reserve Education Assistance Program (REAP) and Survivors' and Dependents' Education Assistance Program (DEA). These new payment rates do not go into effect

until Oct. 1, 2010. This means that vets using the MGIB can expect to see the increase in their October payment (the November 2010 check). Follow these links to find the payment rates for each program:

- [www.military.com/education/content/gi-bill/active-duty-gi-bill-payment-rates.html](http://www.military.com/education/content/gi-bill/active-duty-gi-bill-payment-rates.html) Montgomery GI Bill
- [www.military.com/education/content/gi-bill/selected-reserve-gi-bill-payment-rates.htm](http://www.military.com/education/content/gi-bill/selected-reserve-gi-bill-payment-rates.htm) Montgomery GI Bill — Selected Reserve
- [www.military.com/education/content/gi-bill/reserve-education-assistance-program-reap.html](http://www.military.com/education/content/gi-bill/reserve-education-assistance-program-reap.html) Reserve Education Assistance Program
- [www.military.com/education/content/money-for-school/spouse-family/dependents-educational-assistance-dea.html](http://www.military.com/education/content/money-for-school/spouse-family/dependents-educational-assistance-dea.html) Survivors' and Dependents' Education Assistance

[Source: Veterans Report Terry Howell article 27 Sep 2010 ++]

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**VA Contractor Use Update 03:** The House Veterans' Affairs Health Subcommittee, led by Chairman Michael Michaud (D-ME), held a hearing to provide oversight of the contracting and procurement practices by the Veterans Health Administration (VHA) at the Department of Veterans Affairs (VA). The hearing specifically focused on existing deficiencies and explored potential remedies in order to improve practices so they are fair, fiscally responsible, and effective. "Recent reports on VA's contracting activities identified the need for increased transparency and increased fiscal responsibility, while highlighting inadequate competition and lack of accountability and oversight," said Chairman Michaud. "Past hearings have brought to light the difficulties that many private companies face in contracting with the VA. As a result of these deficiencies in VHA's procurement practices, veterans may not have access to the latest innovations or the appropriate equipment when receiving health care." The Committee received the testimonies of private companies that contract with the VA and those that are seeking to contract with the VA, which highlighted the perceived strengths and weaknesses of the Department's acquisition and procurement processes. Witnesses expressed concerns over unfairly award contracts, overly complex contracts, and lack of competition during the bidding process. Some businesses face more extreme challenges. Mark T. Munroe, Senior Vice President of Sales and Marketing for Mobile Medical Corporation testified that "the last thing our company ever expected would be the need to sue the U.S. Government for actions taken during a procurement process."

Contractors suggested the VA strengthen communication lines with contractors by appointing a single contact person for each contractor and sharing important information in a consistent manner with a specific point person. Moreover, they pressed for a simplification of contracts that should to be awarded to one company per industry. Belinda Finn of the VA's Office of the Inspector General discussed findings from late 2009 that "identified systemic issues such as poor acquisition planning, problematic contract award processes, poorly written contracts, and inadequate contract monitoring that impacted VA's efforts to effectively and economically deliver goods and services to VA facilities." She continued that procurement problems led to "inadequate competition for contracts, the misuse of funds, and a general lack of assurance that VA procurements achieved fair and reasonable prices or were in the best interest of the Government. We attributed many of these systemic procurement problems to VA's decentralized organizational structure for procurement activities, inadequate oversight and accountability, and inaccurate and incomplete procurement data. Our work since we testified in December continues to identify systemic weaknesses in procurement practices that negatively impact VA's ability to obtain quality goods and services in a timely manner at fair and reasonable prices."

Bob Filner (D-CA), Chair of the House Committee on Veterans' Affairs, said, "This Committee is committed to providing necessary resources to VA – but those resources are intended for veterans. I am beyond frustrated with the continued lack of due diligence regarding firms that do business with the VA, lack of a clearinghouse for contracting data which results in hidden and invisible contracts, and lack of consequences for abusive firms. For the most part, I support the policy guidelines currently in place, yet clear evidence remains that they are not uniformly applied in the field. VA officials must work with local providers and facility directors to ensure adherence to policy and return accountability to those that fail to ensure patient safety and those that refuse to end waste, fraud, and abuse in the VA's contracting process." [Source: Imperial Valley News article 27 Sep 2010 ++]

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**Debt Settlement Companies:** Ads from debt settlement companies claiming they can help you pay off your credit card balances for pennies on the doll are everywhere these days. Debt settlement involves negotiating with credit card companies and other creditors to lower the principal amount you owe, then paying it off in a single lump sum. This is different than credit counseling, which typically involves negotiating a lower interest rate and payments, then paying off the debt in full over time. Unfortunately too many debt settlement companies are bad apples. These promise things they have no intention of delivering, charge too much to do too little, and utterly vaporize your credit history. Last summer the FTC finally stepped up to the plate and put out new rules for debt settlement companies that will cost them money and probably save hapless consumers from abuse. And now those rules are starting to go into effect. As of 26 SEP the rules require them to tell the truth. They:

- Require debt relief companies to make specific disclosures to consumers;
- Prohibit them from making misrepresentations; and
- Extend the telemarketing sales rule to cover calls consumers make to these firms in response to debt relief advertising.

What this means in plain English is that debt settlement companies can't overstate the success of their programs. They are also required to disclose potential negative side effects of a debt settlement. For example, many debt settlement companies have in the past assured consumers that settling a debt wouldn't negatively impact their credit score. This is complete hogwash. Paying less on a debt than is owed will nearly always lower your credit score. It could also cause an income tax issue. Starting 27 OCT another new FTC rule requires them not to charge you anything until they do something. While telling the truth may prove difficult for some debt settlement companies, it's this new rule that's really going to hurt. Because rather than charge up-front for their services like they typically do now, they'll have to wait until at least one of the following occurs:

- The debt relief service successfully renegotiates, settles, reduces, or otherwise changes the terms of at least one of the consumer's debts;
- There is a written settlement agreement, debt management plan, or other agreement between the consumer and the creditor, and the consumer has agreed to it; and
- The consumer has made at least one payment to the creditor as a result of the agreement negotiated by the debt relief provider.

In other words, until the debt settlement company actually performs, they don't get paid. Another rule that will go into effect on 27 OCT requires them to keep all customer funds in a segregated, insured account. These rules don't apply to all companies, just the for-profits. And don't think that just because there are new rules that prohibit wrong-doing that it won't occur anyway. After all, we're talking about companies that, at least in some cases, employ commissioned salespeople who take complete advantage of the broke, innocent, and desperate – not normally the type to follow rules. Bottom line if you're in debt trouble, it would be prudent to avoid debt settlement companies. Instead, talk to a credit counseling organization, or a bankruptcy lawyer. Consumer Credit Counseling Service agencies, as well as some others, belong to an organization called NFCC, or the National Foundation of Credit Counselors. Another national organization that represents credit counseling agencies is the Association of Independent Credit Counseling Agencies, or AICCCA. You can find NFCC members near you via their Find a Counselor Now page at [www.nfcc.org/FirstStep/firststep\\_01.cfm](http://www.nfcc.org/FirstStep/firststep_01.cfm). You can find AICCCA members near you by using their state by state lists at <http://aiccca.org/find.cfm>. [Source: Money Talks News Stacy Johnson article 24 Sep 2010 ++]

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**FEGLI:** On 22 SEP Rep. Gerry Connolly (D-VA) introduced H.R.6175 which would require participants in the Federal Employees Group Life Insurance (FEGL) program to opt out of receiving lump-sum benefit payouts; the current default payment option is a retained-asset account, where insurance benefits are deposited and from which beneficiaries can withdraw funds using what appear to be checks. The Federal Deposit Insurance Corporation does not protect funds in retained-asset accounts and a financial institution must cash the checks. The account management firm controls the money until beneficiaries' cash out the accounts in full. Concerns about whether beneficiaries and their families are aware of the payout options are behind Connolly's push for an opt-out default.

"We're all busy, and insurance companies aren't motivated to inform [participants] because they get to make money off of that," he said. "As long as everyone is fully informed and has choices and can make decisions about investments, that's a fairer way to proceed." National Treasury Employees Union President Colleen Kelley said she supports having lump-sum payments as the default option under FEGLI. "For those beneficiaries who prefer another payment option, such as a [total control account], an active election will allow one," Kelley said in a statement. "However, we believe (your) approach with a lump-sum default is the more prudent practice in this federal program, while still affording transparency and choice for the federal workforce family."

Rep. Edolphus Towns (D-NY) in August expressed concern that Prudential Financial, which manages accounts for the Servicemembers Group Life Insurance program and the Veterans' Group Life Insurance program, has failed to inform participants' families about the procedures for receiving benefits. A Prudential spokesman said the company would cooperate fully with Towns' request for information, and the Veterans Affairs Department this month announced improvements to its financial counseling process to clarify benefit payment options. Connolly said his legislation might be considered in Congress' lame duck session, but added he will continue to push the issue. [Source: GovExec.com Emily Long article 24 Sep 2010 ++]

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**State Veterans Home Program Update 03:** Rep. Mac Thornberry's (R-TX-13) bill H.R.4505 to help Gold Star Parents gain access to state-run veterans homes awaits President Obama's signature. The bill legislates away red tape that has kept the parents out of state veterans homes unless every single one of their children has died in military service. "It's the right thing to do," Thornberry, a Republican from Clarendon, said. "It shouldn't have had to take an act of Congress to do it, but it has." Thornberry said he's grateful that even this dysfunctional Congress can make a relatively small but important correction allowing for better care of Gold Star Parents. The measure changes the wording in federal regulations to allow a Gold Star Parent's admission to a state veterans home if the parent has lost at least one child in active military service. Texas Land Commissioner Jerry Patterson, who oversees the state's veteran's homes, said he's proud to finally be able to welcome every Gold Star parent who needs the care into those homes. "Their sacrifice has certainly earned them a place in a home where honor lives," Patterson said. In Texas alone veterans' homes in Amarillo, Big Spring, Bonham, El Paso, Floresville, Temple and McAllen provide skilled nursing, rehabilitation, dementia and Alzheimer's, end-of-life and other types of care to more than 1,000 veterans. Overall the United States and Puerto Rico have 137 state veterans' homes providing care to about 28,500 veterans and dependents, Thornberry has said. The Senate version of the legislation was passed unanimously 20 SEP. The House approved the bill unanimously 30 JUN. Obama is expected to sign the bill. The Veterans Administration determined Thornberry's bill would not mean additional costs for the federal agency. Gold Star Parents admitted to state homes would rely on private insurance and Medicaid. Groups supporting the legislation include the American Legion, Veterans of Foreign Wars of the United States, Iraq and Afghanistan Veterans of America, Vietnam Veterans of America, and the National Association of State Veterans Homes. [Source: San Angelo Standard times Trish Choate article 24 sep 2010 ++]

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**Military Retirement Fund:** For many years, the Defense Department funded military retirement on a "pay-as-you-go" basis, estimating how much money was needed to write checks for current retirees and adding that amount to the budget. This system worked well as far as paying retirees went, but it did not hold policymakers fiscally responsible for today's decisions affecting the size of the future retirement bill, e.g., increasing the force size. To promote better management, in 1984, Congress directed a switch to an accrual method of funding retirement. Under this procedure, each year the services transfer into a fund the amount necessary to pay for future retirements. The amount transferred is a percentage of the service's basic pay. Thus, if a service implements policies that affect the future value of retirement benefits, it sees the budgetary consequences of that decision immediately in the form of an increase in the amount transferred to the retirement fund. Analysis by Arroyo Center researchers William Hix and William Taylor, reported in A Policymaker's Guide to Accrual Funding of Military Retirement, suggests that the current procedures do not fully capture the intent of the legislation and that changes could eventually save the Army as much as \$5-6 billion annually.



When Congress established the retirement fund, it shifted responsibility for service rendered before 1 OCT 84, to the Department of the Treasury; DoD has responsibility to fund service rendered after that date. At the time of the transfer, Treasury accepted an unfunded liability estimated at \$529 billion, which was to amortize over 60 years. Annually the services transfer an amount equal to a percentage of their basic pay accounts for the active and reserve components. The percentage differs by component, but it is identical within components for all services. In FY95, fund transfers equaled 33.5% of the active duty basic pay and 9.7% of the selected reserves. The Board of Actuaries annually calculates the liability for the pre-1984 service, adjusted for changes in assumptions and experience, and transfers an amount equal to one year's amortized payment. The money in the fund is invested in nonnegotiable government securities, and it draws interest. Transfers into the fund and its investment transactions qualify as intra-governmental transfers (even though they represent an outlay to DoD) and thus have no effect on the deficit. Only payments to retirees from the fund represent outlays to the federal government. The fund's liability is not static, and three things can cause what are called actuarial gains and losses:

- Funding assumptions can change: To determine how much money DoD has to transfer to the fund, a Board of Actuaries reviews assumptions about economic and noneconomic factors at the beginning of each year. Economic factors include assumptions about pay raises, cost of living allowance (COLA) increases, and interest rates. An assumed pay raise means that the future liability of the fund will increase because retirees will draw more money. Therefore, the amount transferred into the fund has to increase to account for this future liability. An assumption that the interest rate will increase has the opposite effect. The fund earns interest on nonnegotiable government securities. So if interest rates go up, the fund will earn more interest, thus the amount transferred can be less. The so-called noneconomic assumptions include such things as the rates of retirement and the longevity of retirees. If, for example, higher retirement rates or lower death rates are assumed, funding requirements increase.
- Benefits can change: Benefit changes also affect the size of the contribution. For example, Congress slipped the 1994 and 1995 COLA increases from JAN to later in the year. These delays reduced the actuarial value of the retirement benefit and, hence, the funding required.
- Experience can differ from assumptions: As mentioned, the actuaries review certain economic assumptions at the beginning of the year. Frequently, these differ from what actually happens during the year. For example, if the pay raises or COLAs approved differ from the assumptions, the fund earns more interest than anticipated, or fewer people retire than anticipated, the funding requirements change. Right now only Treasury benefits from any decreases in fund liability. The Treasury would make annual payments to fund this amount amortized over 50 years. If the liability of the fund goes down because it earns more interest or for some other reason, the size of the Treasury payment goes down. The assumptions made by the Board of Actuaries have turned out to be conservative; over its life, the fund has never had an actuarial loss. All the net changes in liability have been downward. These decreases can be substantial. In FY95, for example, the liability was reduced by \$48 billion. The Treasury amortized this amount over 30 years, and reduced its annual payment by that amortized amount. Over the first 10 years of the fund's life, the average annual gain has been almost \$30 billion, and the annual Treasury payment has shrunk from \$25 billion to \$11.5 billion.

Another area of interest pertains to service retirement practices. The intention of the annual transfer from the services is to fund the future retirement liability of the individuals represented in those accounts. This procedure assumes that all services retire people at an identical rate. But they do not. A service's level of seniority directly affects the number of people it retires. The higher the level of seniority, the more retirees. For both the officer and the enlisted forces, the Air Force maintains the most seniority, the Marine Corps the least. Accrual percentages computed with service-specific personnel policies would differ significantly by service. Current policies cause the budgets of the Army, Navy, and Marine Corps to carry several hundred millions of dollars a year of the cost of Air Force personnel policies. Hence, in its retirement budget the Air Force appears several hundred million dollars a year cheaper than its actual cost; the other services appear more expensive. [Source: RAND research brief 'A Policymaker's Guide to Accrual Funding of Military Retirement' 1997 ++]

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**Military Retirement Fund Update 01:** Wartime demands for personnel, and record retention rates due in part to a dismal job market, have left the services with an older, more experienced force — and a surprise \$1-billion-a-year pop in retirement costs. The Department of Defense’s Board of Actuaries in late July overhauled the assumptions used to calculate what the services must budget for annually to cover future retirement obligations to the current force. It acted on analyses from the DoD Office of the Actuary which, for the first time, weighed the effects on retirement costs of Post-9/11 developments including nine years of sustained operations, a deep economic recession and growth in military entitlements of retirees and survivors. The result is an \$800 million jump in accrual retirement costs the Army, Navy, Air Force and Marine Corps have to pay starting 2012 because more service members are staying until retirement. Some of that cost too is a projected 40% increase in disability retirements, the result of a crackdown on the low-balling of disability awards by service through stricter compliance with rating practices of the Department of Veterans Affairs. Another \$200 million in added yearly retirement costs is attributed to retirees living longer. Death rates are falling — and sharply.

“The improvement that military retirees are seeing in their own mortality is just phenomenal,” said Peter Rossi, one of DoD actuaries that worked on revising projected retirement costs. Retiree deaths are “decreasing at such a rapid rate — faster than the American public, faster than anyone else — we are seeing a 2-plus percent a year change for active, reserve. It’s everybody.” Deaths for non-disabled retirees in 2008-2009 were 8% lower than found for non-disabled retirees in 2004-2005. For retired reservists, data showed a 4% drop. No cause has been identified, Rossi added. “Maybe military folks are just in better shape.” The changes in actuarial assumptions reportedly surprised Under Secretary of Defense Robert Hale, the DoD comptroller, who already was under considerable pressure to curb the services’ soaring personnel costs. “The comptroller was not pleased,” said one official. “He now had to go out and find [\$1 billion] when Defense Secretary [Robert] Gates is telling him he needs to save money. That was a contentious issue for a while.”

The retention rate of careerist is so high that in the 2012 budget to be delivered to Congress next February, the services will assume that 19% of all new entrants serve for 20 years, long enough to qualify for retirement. That’s a “huge” change from the 17% previously assumed, said Rossi. Specifically, the probability of newly commissioned officers reaching retirement will climb to 49% from 47. For new enlistees, the assumed retirement rate will be raised to 17% from 15. It forces the services overall to set aside \$20 billion in their 2012 budgets to cover active duty retirement costs, an unplanned for 5% jump. Another \$2.8 billion will have to be set aside for Guard and Reserve retirement but that’s unchanged. Rossi said the Office of the Actuary has not reconsidered assumptions for Guard and Reserve retirement but it soon will. Another way to look at the effect of the new assumptions on retirement costs is by individual member costs. For fiscal 2011 the services will set aside \$32.70 for future retired pay for every \$100 paid in basic pay. That proportion will climb to \$34.30 for every \$100 in basis pay in fiscal 2012. So if a service member draws \$50,000 in basic pay, his or her service will have to pony up \$17,150 that year for future retired pay, or \$800 more than was needed a year earlier.

For many years, the military ignored future retirement obligations, budgeting only to cover payments due each year to current retirees and survivors. That pay-as-you-go method created a huge unfunded liability. Critics also said the services had no incentive to control retirement costs. In 1984 Congress ordered DoD to switch to “accrual accounting” for retirement accounts. The Treasury Department was given responsibility for the unfunded liability and established a military retirement trust fund. The services began to pay into that fund whatever amount was needed to cover retirement costs for the current active, Guard and Reserve forces. So retirement obligations today are paid from two pots. Treasury pays roughly \$50 billion a year to cover annuities of current retirees and survivors. The services pay more than \$20 billion a year in accrual payments. The board of actuaries assumed at its July meeting that military retirees, social security recipients, federal civilian retirees, disabled veterans and survivors will have to wait until at least January 2012 before they see their next cost-of-living adjustment or COLA. That prediction looks even more solid now, to the regret of retirees. No COLA last year eased the unfunded liability of the military retirement system by \$22.3 billion. But it gave no relief to service budgets because Treasury’s pays COLAs of current retirees. Rossi said that over time retirees can expect COLAs to deliver an annual average boost of 3%. [Source: Kitsap Sun Tom Philpott article 24 Sep 2010 ++]

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**Tricare 26 Update 01:** The Patient Protection and Affordable Care Act (PPACA) required civilian health plans that provide medical coverage to children to make that coverage available until the child turns 26 years of age. This particular provision of the health reform law became effective 23 SEP. However, The PPACA did not give DoD the authority to offer this benefit through Tricare. There are provisions in the Senate and House versions of the pending National Defense Authorization Act for fiscal year 2011, S. 3454 & H.R. 5136 (respectively), that would extend dependent medical coverage up to age 26 under a premium-based program. The Tricare Management Authority told the National Association of Uniformed Services they are prepared to implement changes when enacted.

Tricare already meets or exceeds most of the other new health care provisions which took effect 23 SEP under PPACA. The Act provides new or expanded options and consumer protections for those with private health insurance coverage. Most provisions under PPACA, such as restrictions on annual limits, lifetime maximums, "high user" cancellations, denial of coverage for pre-existing conditions, have not been a concern for the active duty military and retiree families under Tricare. Because Tricare is an entitlement provided for by law, Tricare's coverage has no lifetime cap. Under the basic entitlement, Tricare costs are determined by legislation and in general, active duty families and military retirees pay low, or no, annual or monthly fees, unlike coverage under most commercial health insurance plan. There is no cost for medical care for active duty service members. [Source: NAUS Weekly Update 24 Sep 2010 ++]

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**Military Tax Relief Update 02:** On 22 SEP, witnesses from The Military Coalition (TMC) testified before the Senate Finance Committee concerning needed improvements in tax law affecting service personnel and their families and survivors. This is first time the Coalition has been asked to address the Finance Committee which is encouraging for possible TMC input in future hearings. Committee Chairman Max Baucus (D-MT) opened the hearing stating, "This committee will take a hard look at how we can improve tax and fiscal policy to make life better for our military and their families...we did much in 2008...but I know that there's more to do." The Committee heard from witnesses representing the Montana National Guard, a small business owner from Iowa who actively recruits veterans, and the Coalition concerning tax changes needed for reservists and survivors. The hearing focused on tax credits to incentivize employers to hire and retain drilling Guard and Reserve personnel in the face of increased deployment requirements, improving tax deductions for drill-related travel expenses for Guard and Reserve members, and protecting Survivor Benefit plan annuities for children from inadvertent penalties under the Alternative Minimum Tax (AMT). The Coalition proposed making permanent the temporary tax credit, enacted in 2008, for small businesses that pay a wage differential to reservists who are called to active service. All the witnesses expressed concern that out-of-pocket expenses reservists incur in traveling to their training duty stations can be deducted from their income taxes only if the drilling duty station is more than 100 miles from home, vs. the 50-mile standard used for other federal purposes. TMC members had previously met with Sen. John Kerry's (D-MA) staff to seek support for a legislative fix, and were pleased when Kerry and Sen. Blanche Lincoln (D-AR) announced at the hearing that they had just introduced S.3819 to reduce the mileage requirement to 50 miles. Baucus called the proposal "a no-brainer", and also expressed strong interest in the Coalition's proposal to exempt surviving military children's SBP annuities from AMT penalties. [Source: MOAA Leg Up 24 Sep 2010 ++]

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**NDAA 2011 Update 06:** It's looking virtually certain that the Senate will delay action on the FY2011 Defense Authorization Bill until after the elections, which will make for a very raucous November and December on Capitol Hill. The Senate briefly brought the bill up for consideration this week, but leadership withdrew it from the table after debate reached an impasse over potential amendments on the "don't-ask-don't-tell" issue and allowing illegal immigrants to gain citizenship by joining the military. Because action on the defense bill typically consumes a week of debate with over 300-plus amendments, Senate leaders pulled it from the floor to focus on other essential legislation - i.e., approving temporary funding to avoid a government shutdown on 1 OCT, the start of FY2011. Congress will leave Washington to hit the campaign trail within the next two weeks, but will face some very tough slogging when it returns for a "lame duck" session after the November 2nd election. In what's likely to be a short and bitterly debated session, legislators will be faced with:

- Finishing the Defense Authorization Bill

- Preventing a 23.5% cut in Medicare and Tricare payments to doctors from going into effect on Dec. 1, as required under current law
- Approving funds for government operations beyond December
- Initiatives to extend part or all of the Bush-era tax cuts
- Announcement of the recommendations of the President's Commission on Fiscal Responsibility and Reform on Dec. 1

[Source: MOAA Leg Up 25 Sep 2010 ++]

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**Mojave Desert Veteran Memorial Update 06:** A Texas-based nonprofit filed a motion in federal court 21 SEP requesting it intervene in the ongoing legal battle over a steel cross erected in the Mojave National Preserve as a memorial to war veterans. The Liberty Institute, a nonprofit dedicated to protecting Constitutional freedoms, filed the motion in U.S. District Court in Riverside on behalf of the Veterans of Foreign Wars Department of California and VFW Post 385 in Barstow. It argues that the VFW has a vested interest in the legal proceedings and should be included in the existing lawsuit that has been challenged repeatedly over the last 10 years. The VFW installed the approximately 7-foot-tall Latin cross, crafted from concrete-filled welded steel pipe, at Sunrise Rock, about 12 miles south of the 15 Freeway and east of Cima Road, in 1934 as a tribute to soldiers who fought and died in World War I. It has existed there in some form or another ever since. Since then:

- In 2000, the land on which the cross sits was incorporated into the Mojave National Preserve by executive order from the President. In 2001, the American Civil Liberties Union sued the National Parks Service on behalf of Frank Buono, a former assistant superintendent for the Mojave National Preserve. The ACLU contended that it was improper to display a sectarian symbol on public land.
- In 2004, Congress authorized the transfer of the one-acre of public land the cross sits on back to the VFW in exchange for five acres of land elsewhere.
- In April, a divided U.S. Supreme Court ruled that a lower court erred when it invalidated the land transfer.
- In May, the cross was stolen, which prompted a federal investigation.
- In June, a coalition of veterans sent a letter to President Barack Obama asking him to help restore the memorial.

ACLU attorney Peter Eliasberg called the timing of the VFW's action as improper. "Usually you intervene when it's timely. They've had that interest for somewhat between six to eight years," Eliasberg said. He said the VFW made the same effort about a year ago, and the U.S. Supreme Court denied their motion. "The issue isn't just whether you have an interest, but if you do it in an orderly fashion," Eliasberg said. "If their interest is the fact they're going to be the recipients of this land, they knew that in 2004." Ted Cruz, an attorney for the VFW, said the VFW has a legal right to be included in the legal process, regardless of when they decided to engage. He said if the Congressional statute is allowed to go into force, the actual property at the center of the litigation will be owned by the VFW. "It's their land by act of Congress, and intervention exists to allow parties to defend their interests," said Cruz. "At the end of the day, it's their land if the statute is allowed to go into effect." James Rowoldt, state adjutant/quartermaster of the VFW Department of California, in a news release said, "This is our land, our memorial and we want it back," said. "To deny the veterans a chance to defend our own is to continue to dishonor those for whom the memorial stands." The motion has been scheduled to be heard by the court on 25 OCT. The ACLU plans on filing a response to the motion before then, Cruz said.

The U.S. House of Representatives passed a resolution 28 SEP condemning the theft of the Mojave Cross memorial and urging federal officials to allow veterans groups to replace it. Congressmen Jerry Lewis (R-CA-41) along with a number of other representatives jointly proposed the legislative action shortly after the cross was stolen. The resolution calls on the Interior and Justice departments to expedite the completion of a land transfer that would give the VFW ownership of the Sunrise Rock site so it can replace the memorial, in exchange for other land within the Mojave National Preserve. "Legislation was approved by Congress and signed into law that would resolve this problem by removing the land from government ownership, and it is time to complete this process that has gone on for more than a decade now," Lewis said. "It is time to give our veterans groups the ability to replace this important

memorial to those who gave their lives to defend our nation and freedoms.” [Source: A San Jose Mercury News Joe Nelson article 22 Sep 2010 ++]

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**Vietnam Veterans Memorial Update 08:** At a recent defense forum, a soldier raised a question about whether the names of Agent Orange victims will be allowed to be placed on the wall in light of a Veterans Affairs Department policy change that greatly expands the presumption of service connection for several health conditions linked to Agent Orange exposure...

**Note:** “We were contacted by Military Times Managing Editor who informed us that to disseminate any additional information on the RAO website pertaining to this or any other subject taken from their publications will infringe on the copyright of the material contained within their Army/Navy/Air Force/ Marine Corps newspapers and/or provided on their websites. Their interpretation of any exclusion extended to us as a non-profit entity under Title 17 U.S.C. section 107 to use their material does not extend to posting it on a public website. The repository of all Bulletin articles for those who cannot receive the Bulletin directly is

[http://post\\_119\\_gulfport\\_ms.tripod.com/rao1.html](http://post_119_gulfport_ms.tripod.com/rao1.html) which is considered a public website even though it is maintained by a non-profit military fraternal organization. Military Times’ interpretation of Title 17 exclusion does allow us to disseminate the information via direct communication to individual subscribers. Since we cannot afford the time nor expense to deal with their implied legal action, readers who want to obtain this information can attempt to access it at

<http://armytimes.va.newsmemory.com/default.php?token=9b26271a62d9f9f900f4e399479c130d&pSetup=armytime> s . Those who are unable to do so or who cannot access it because they do not have a password or it has been removed from their website can obtain the information directly via email request to [raoemo@sbcglobal.net](mailto:raoemo@sbcglobal.net).

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**USFSPA & Divorce Update 15:** Unable to get traction on the federal front, some military retirees and veterans seeking to stop state courts from requiring veterans to share disability compensation with ex-spouses are turning to state legislatures...

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**Foreclosure Update 06:** Some of the nation's largest mortgage companies used a single document processor who said he signed off on foreclosures without having read the paperwork - an admission that may open the door for veterans owning homes across the country to challenge foreclosure proceedings. The legal predicament compelled Ally Financial, the nation's fourth-largest home lender, to halt evictions of homeowners in 23 states this week. Now it appears hundreds of other companies, including mortgage giants Fannie Mae and Freddie Mac, may also be affected because they use Ally to service their loans. As head of Ally's foreclosure document processing team, 41-year-old Jeffrey Stephan was required to review cases to make sure the proceedings were legally justified and the information was accurate. He was also required to sign the documents in the presence of a notary. In a sworn deposition, he testified that he did neither. The reason may be the sheer volume of the documents he had to hand-

sign: 10,000 a month. Stephan had been at that job for five years. In sworn depositions taken in December and June for two separate court cases involving families trying to keep their homes, Stephan revealed his shortcuts when reviewing the files. He said he would glance at the borrower's names, the debt owed and a few other numbers but would not read through all the documents as legally required. He would then sign them. The files were packed up in bulk and sent off for notarization several days later.

How the nation's foreclosure system became reliant on the tedious work of a few corporate bureaucrats is still a matter that mortgage lenders are trying to answer. While the lenders may have had legitimate cause to foreclose, the mishandling of the paperwork has given homeowners ammunition in their fight against foreclosure and has drawn the attention of state law enforcement officials. Ally spokesman James Olecki called the problem with the documents "an important but technical defect." He said the papers were "factually accurate" but conceded that "corrective action" may have to be taken in some cases and that others may "require court intervention." Olecki said the company services loans "from hundreds of different lenders," but he declined to provide names. Spokesmen for Fannie and Freddie confirmed 21 SEP that they use Ally, formerly called GMAC, to oversee some mortgages. The companies have launched internal reviews to assess the scope of any potential issues. Ally, Fannie and Freddie - all troubled mortgage companies that received extraordinary bailouts by the federal government during the financial crisis - declined to say how many loans might be affected. The Treasury Department, which owns a majority stake in Ally and seized Fannie and Freddie in 2008, also declined to comment.

Fannie and Freddie, created by Congress to finance mortgages and encourage homeownership, have in recent years been repossessing houses at record numbers. Fannie alone reported recently that 450,000 of its single-family loans were seriously delinquent or in the foreclosure process as of 30 JUN. That's nearly 5% of the loans it guarantees. Lawyers defending homeowners have accused some of the nation's largest lenders of foreclosing on families without verifying all of the information in a case, but it has been hard for them to stop foreclosure proceedings. Ally's moratorium comprises only the 23 states that mandate a court judgment before a lender can take possession of a property. But if Stephan signed documents related to foreclosures in states without this requirement (it's unclear whether he did), it could help a much broader range of borrowers. Iowa Assistant Attorney General Patrick Madigan, chair of a national foreclosure prevention group composed of state attorneys general and lenders, said the fallout from the Ally review could be enormous because Stephan's actions could be considered an unfair and deceptive practice. "If servicers are submitting court documents that aren't true or that have not been verified, that is of great concern," Madigan said. At the rate Stephan was reviewing files, if he worked an eight-hour day he would have had an average of only 1.5 minutes for each document. [Source: Washington Post Ariana Eunjung Cha article 22 Sep 2010 ++]

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**Tax-exempt Status:** Military fraternal organizations stand to lose their tax-exempt status if they have not filed Form 990N with the Internal Revenue Service by 15 OCT 2010, or have not filed any other 990s for three consecutive years, regardless of their annual revenues and expenses. The filing requirement, previously unnecessary for entities with \$25,000 or less in annual revenue, is imposed as part of the Pension Protection Act of 2006. Those entities that have not filed a 990 for a number of years may find that their Employer Identification Numbers (EIN) have been removed from the IRS system. In that occurs you will have to take one of the following actions:

- File a form SS-4 and apply for a reinstatement or new number.
- Appeal to the Department of Treasury with a letter of justification for not obeying the law. The secretary of the Treasury has discretion to grant tax-exempt status.
- File for one online at [www.irs.gov/businesses/small/article/0,,id=102767,00.html](http://www.irs.gov/businesses/small/article/0,,id=102767,00.html)

The replacement EIN you obtain is your permanent number and can be used immediately for most of your business needs, including opening a bank account, applying for business licenses, and filing a tax return by mail. However, no matter how you apply (phone, fax, mail, or online), it will take up to two weeks before your EIN becomes part of the IRS' permanent records. You must wait until this occurs before you can file an electronic return, make an electronic payment, or pass an IRS Taxpayer Identification Number matching program. [Source: American Legion Online Update 21 Sep 2010 ++]

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**Health Care Reform Update 39:** Proposed regulations unveiled 20 SEP seek to crack down on Medicare and Medicaid fraud by subjecting operators of certain medical firms to fingerprinting and stopping payments when credible fraud allegations are made, documents show. The rules would give federal health officials key powers to identify fraud early and reduce the estimated \$55 billion in improper payments made each year in the Medicare and Medicaid programs, said Peter Budetti, director of the new anti-fraud office at the federal Centers for Medicare & Medicaid Services. "Our initiative will allow us to go beyond what we've always called 'pay and chase' and to actually have the tools and mechanisms to prevent much of the fraud we've seen in recent years," Budetti said. The proposed rules are part of the nation's new health law, which plans to expand coverage to millions of Americans in part by saving money on waste and fraud in the public and private health care systems. It's not known how much money these proposed rules would save, Budetti said. They would provide increased scrutiny to \$900 billion in annual spending in federal Medicare, and the state-federal Medicaid and Children's Health Insurance Program (CHIP) by:

- Suspending payments to a provider as soon as there's been a "credible allegation" of fraud that merits further investigation, including tips from consumers.
- Requiring state Medicaid programs to stop using medical providers that have been kicked out of Medicare or another state's Medicaid or CHIP program.
- Visiting more medical firms to ensure they are legitimate.
- Rating all types of medical providers by their risk for engaging in fraud. Those at highest risk would undergo fingerprinting and criminal background checks. New home-health agencies and suppliers of home-health equipment that are not publicly traded companies would initially get this increased screening, Budetti said.

Such firms have been prosecuted by a federal strike force, which since 2007 has obtained indictments against more than 800 people for falsely billing Medicare more than \$1.85 billion. The proposed rules were published 23 SEP, beginning 60 days for comments. Budetti expects final regulations by year's end. The regulations can be previewed at: [www.oig.gov/inspection.aspx](http://www.oig.gov/inspection.aspx). Louis Saccoccio, who heads the National Health Care Anti-Fraud Association, praised the proposed rules. "It's long overdue," said Saccoccio, whose group represents private insurers, law enforcement and other government agencies. "It shows there's a focus now on prevention as opposed to we pay these folks and then we try to get the money back and prosecute them." [Source: USA Today Alison Young article 21 SEP 2010 ++]

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**VA Home Loan Update 22:** The home mortgage interest rate is now at the lowest it has been in decades. In view of this favorable rate, you may be considering the purchase of a home or perhaps refinancing your existing home loan. In either case you may want to consider a loan guaranteed by the Veterans Administration. The basic eligibility requirements are active military service and discharge or release under conditions other than dishonorable. There are also certain service requirements — for instance, a veteran who enlisted after 7 SEP 80 or who entered active duty after 16 OCT 81 must have served 24 continuous months or the full period for which they were called to active duty in order to be eligible. The widow of a veteran whose death was declared to be the result of a service-connected disability is also eligible. A VA home loan can be used for a variety of actions, including buying or building a home; buying a condominium unit; repairing, altering, or improving a residence owned by the veteran and occupied as a home; refinancing an existing home loan; or buying a manufactured home and/or lot, to mention just some of the more common uses for a VA-backed home loan.

The first step in obtaining a VA-backed loan is to obtain a Certificate of Eligibility. This certificate can be obtained by submitting a VA Form 26-1880 to VA Eligibility Center, Winston-Salem, N.C. Your Veterans Service Officer has this form in stock and it can also be obtained by visiting [www.va.gov/forms](http://www.va.gov/forms). After you have obtained your certificate of eligibility your next action should be to find the property you wish to buy or a contractor to build your home. When you have made your decision as to what you want you then must find a lender. As a reminder, VA does not pay the mortgage. It will be necessary for you to establish credit with the firm that is making the mortgage loan. To qualify for a VA home loan the applicant must be able to pay the monthly mortgage and property

insurance. The veteran or the spouse of an active duty service member, or widow of a veteran whose death was declared to be the result of a service-connected disability, must certify that he or she intends to occupy the home. When refinancing a VA-guaranteed loan solely to reduce the interest rate, a veteran need only certify to prior occupancy.

Veterans obtain VA-guaranteed loans through the usual lending institutions and negotiate the interest rate and terms of the mortgage. The loans can have either a fixed interest rate or an adjustable rate, where the interest rate may adjust up to 1% annually and up to 5% over the life of the loan. VA does not set the interest rate. Veterans may also choose a different type of adjustable rate mortgage called a hybrid ARM, where the initial interest rate remains fixed for three to 10 years. If the rate remains fixed for less than five years, the rate of adjustment cannot be more than 1% annually and 5% over the life of the loan. If the lender charges discount points the veteran may negotiate with the seller as to who will pay the points or if they will be split between the buyer and the seller. Points paid by the veteran may not be included in the loan. A funding fee must be paid to VA unless the veteran is exempt from such a fee because he or she receives VA disability compensation. The fee may be paid in cash or included in the loan. Closing costs such as VA appraisals, credit report, loan processing fee, title search, title insurance, recoding fees, transfer taxes, survey charges, or hazard insurance may not be included in this loan. [Source: The News & Advance VSO Don Mustard article 20 Sep 2010 ++]

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**USO Update 01:** The USO Center at the (ONT) located down from the main terminals in old Terminal One, Building F is operational year round M-F 0600-2200, and Saturday, Sunday and Holidays. Directions can be obtained in baggage claim and at Travelers Aid. The Airport shuttles are available to move around the terminals. Visitors who fly in can catch the Shuttle Bus to the center. The Center offers a welcoming place to come between flights, and offers the following services at no charge:

- A place to rest, sleep, nap, recharge
- Snacks, drinks, meals
- Computers with internet connection
- Library with many books to read there or take with you when you leave
- Recreation Room with pool table, air hockey, basketball game, puzzles, and more
- Media room with hundreds of DVDs to watch while you wait
- Family and kids room with toys, TV, crib and child's bed
- Outdoor patio area for fresh air eating, or smoking (if you must!)
- Volunteers who can help arrange transportation, hotel stays, and other services.

All service members - active duty, Guard/reserves as well as retired - and their families are invited to stop by on their next visit to the Ontario International Airport. The goal of the United Services Organization is to serve the needs of our troops and their families. The Center's physical address is: 1940 East Moore way - West Wing. The Center can be contacted at: USO - Ontario, P.O. Box 4256, Ontario, CA 91761-8956 Tel: (909) 390-4274 Fax: (909) 390-4380 Web: [www.usoontario.org](http://www.usoontario.org) . For information about the USO located in the Palm Springs airport call (760) 833-1100 and for information about the Bob Hope Hollywood USO at LAX call (310) 645-3716. [Source: [www.usoontario.org](http://www.usoontario.org) Sep 2010 ++]

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**Veterans Relationship Management:** The Department of Veterans Affairs is launching a multi-year initiative called Veterans Relationship Management (VRM) that will greatly improve Veterans' access to health care and benefits information. "VRM will transform Veterans' interactions with VA by using innovative 21st century technologies," said VA Secretary Eric K. Shinseki. "Veterans will have a better experience when they contact VA for assistance, and our employees will be able to quickly convey accurate, up-to-date information through call centers and the Internet." Ultimately, Veterans will find enhanced self-service capabilities, and VA employees will have the best tools to serve Veterans, their families and survivors better. By the end of 2010, VRM will deliver improved telephone services to enable Veterans to reach a call center agent faster. Recording and review of calls

will ensure the quality of services provided to Veterans. To help guarantee success, VRM enhancements will be rolled out in six-month increments.

An important component of VRM is the Internet site, which puts the Veteran in the driver's seat for information. VA collaborated with the Department of Defense to provide a single sign-on capability for both Servicemembers and Veterans. Single sign-on will quickly establish an individual's identity and allow that person to complete transactions without having to re-enter information. Self-service access through the Internet site [www.ebenefits.va.gov](http://www.ebenefits.va.gov) is already available in some benefit areas, including military personnel records, VA home loan eligibility certificates, and status information on compensation and pension claims. VRM is just one of the many initiatives VA is launching to help Veterans get timely access to health care and benefits. VA provides tax-free compensation, pension, education, loan guaranty, vocational rehabilitation, employment and insurance benefits to eligible Veterans, their families and survivors through 57 VA regional offices. Disability compensation is paid to a Veteran for disabilities that are a result of -- or made worse by -- injuries or diseases that happened while on active duty, active military, naval or air service. Pension is a benefit paid to wartime Veterans with limited income, and who are permanently and totally disabled or age 65 or older. For additional information, go to [www.va.gov](http://www.va.gov) or call VA's toll free benefits number at 1-800-827-1000. [Source: VA News Release 21 Sep 2010 ++]

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**Reserve Benefits Update 03:** The House Veterans Affairs Committee has sent to the House a bill that would add to the definition of a veteran someone who has served at least 20 years in the National Guard or Reserve and qualified to earn retirement pay, but did not spend at least 180 consecutive days on federal status. Currently, that person is technically not recognized as a veteran, although he or she receives all benefits accrued through service. The bill, H.R. 3787, is sponsored by Rep. Timothy Walz (D-MN). At the hearing last week, Walz described the bill. "The purpose of this legislation is very clear," he said. "It's to honor the members of the National Guard and Reserve who volunteered for service, wore the uniform proudly, were subject to the Uniform Code of Military Justice, learned their trade, kept up with their training and stood ready to answer the call for as long as they were asked by this nation. But through no fault of their own, as the law is written ... if they are not called up to a period of qualified federal service, we deny them the right to be called 'veteran.' As a 24-year Guardsman and veteran, I know this to be an injustice." The change in law would have zero cost, he said, because these people are already receiving benefits for which they are eligible, such as retirement pay and Tricare health care. "Let me be clear. This is about honor, not about monetary benefits," Walz said. When Rep. Henry Brown Jr. (R-SC) asked about including people who served for fewer than 20 years, Walz said he supported that idea if he could be sure it would not come with any monetary costs. He said Brown's question would be looked at after H.R. 3787 becomes law. [Source: NGAUS Washington Report 21 Sep 2010 ++]

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**CHAMPVA Update 02:** Sen. Daniel Akaka (D-HI) on 16 SEP introduced legislation that would expand eligibility requirements for children who receive health care under the Civilian Health and Medical Program of the Veterans Affairs Department. "I believe it is only fair to afford children who are CHAMPVA beneficiaries the same eligibility as dependent children whose parents have private sector coverage," Akaka said in a floor speech. More than 336,000 people are enrolled in the program, which was established in 1973 to provide health care services to dependents and survivors of disabled veterans. The bill, S.3801, would raise CHAMPVA eligibility for dependent children to age 26. Coverage for children under the insurance program currently expires when they turn 18 unless they are full-time students, in which case they continue to receive care until they turn 23 or stop attending school on a full-time basis. It was referred to the Senate Veterans' Affairs Committee for consideration.

CHAMPVA is similar to the Defense Department's Tricare health insurance program for active-duty and retired military personnel and their dependents. Those eligible for CHAMPVA include spouses and children of permanently and totally disabled veterans with service-connected disabilities and surviving dependents of veterans who die from service-related disabilities. The legislation Akaka introduced is similar to bills presented last spring in the House and Senate that would extend Tricare coverage to adult children up to age 26. Those bills are now under consideration in the House and Senate Armed Services committees. The aim of all three bills is to give CHAMPVA and Tricare beneficiaries the same benefits now available to other Americans established by the Patient Protection and

Affordable Care Act (P.L. 111-148) President Obama signed into law on 30 MAR. "Thanks to the Patient Protection and Affordable Care Act, families with private health insurance coverage can keep their children on their plans until age 26," Akaka said in a statement. "Surely coverage for veterans' family members in need should meet this new national standard." [Source: GovExec.com Katherine McIntire Peters article 17 Sep 2010 ++]

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**DIC Retroactive Award:** Anytime a taxpayer single-handedly takes on the IRS and comes out the victor, it's worth mentioning. Such was the case in *Remedios E. Ebert v. The United States* (US-CL-CT, 2005-2 USTC para. 50,495) when Ebert, a Philippines resident and widow of a U.S. military veteran, stepped into the U.S. Court of Federal Claims in pursuit of a tax refund. In mid-2001, Ebert, a nonresident alien residing in the Philippines, received notice from the U.S. Department of Veterans Affairs (DVA) that she was entitled to DIC payments, retroactive to 1999. The SBP payments were thus discontinued at that point and the larger, nontaxable DIC benefit began, retroactive to FEB 99. Ebert then wrote the IRS requesting a refund for taxes paid on her SBP income for 1999, 2000, and 2001. The letter was accompanied by Form 1042-S (Foreign Person's U.S. Source Income Subject to Withholding), which detailed her gross income and the amount of U.S. tax withheld. The total refund requested was \$4,887, plus interest. In a motion for summary judgment, the IRS contended that Ebert had not satisfied the requirements for a tax refund claim.

The case is a reminder that the little guy can win, and it offers instructive lessons to taxpayers on tactics the IRS may employ to oppose taxpayer refund claims. The case also provides an opportunity to consider both the formal refund claim requirements and the judiciary's informal refund claim doctrine. At issue in *Ebert* was whether the taxpayer was entitled to a refund for taxes paid on survivor benefit payments (SBP) that were retroactively converted to dependency and indemnity compensation benefits (DIC). The former is taxable income while the latter is not—a fact about which there was no disagreement. The IRS, however, denied the refund for the following reasons:

- The taxpayer failed to satisfy the requirements for a refund claim.
- Payments received under the SBP program are “closed transactions” and cannot be later recharacterized for tax purposes.
- The taxpayer failed to prove she was not already reimbursed for the taxes paid under the SBP program.
- An unpublished disposition of a similar case was decided in favor of the IRS.

**The formal Refund Claim Requirements for this case were;**

1. The taxpayer bears the burden of proving entitlement to a refund. That burden must meet the requirements of Treasury Regulations section 301.6402-2(b). In theory, the claim “must set forth in detail each ground upon which a credit or refund is claimed and facts must be verified by a written declaration that it is made under the penalties of perjury.”
2. Timely submission of an appropriate claim form is required to obtain a refund. IRC section 6511 requires that requests be within three years from the time the return was filed or two years from the time the tax was paid, whichever is later. The limit is two years from the time the tax was paid if no return was filed.
3. Generally, taxpayers claim refunds on tax returns when originally filed. For those who first filed Form 1040, 1040A, or 1040EZ, subsequent refund claims must be made on Form 1040X, as required by Treasury Regulations section 301.6402-3(a)(2). This procedure will meet the requirements of IRC section 6402 (which authorizes the Treasury Department to issue refunds, subject to other liabilities that might be owed to other federal agencies). Taxpayers who elect to have overpayments refunded may not thereafter change the election to have the overpayment applied as a payment of estimated income tax.
4. With respect to nonresident aliens such as Ebert, the tax return must contain the tax identification number and the entire amount of income subject to tax, “even if the tax liability for that income was fully satisfied at the source through withholding under chapter 3 of the Internal Revenue Code” [Treasury Regulations section 301.6402-3(e)]. A copy of Form 1042-S must be attached to the return. Nonresident aliens may not

claim refunds if the withholding agent has already reimbursed them. Treasury Regulations section 1.1461-2 sets forth the procedure to ensure that the IRS is informed of any such reimbursement.

5. For taxpayers who have agreed to an over assessment of tax as determined by the IRS, a timely filed Form 870 or Form 890 is considered a valid refund claim. Grounds for the over assessment are considered the basis for the claim.
6. Refund claims are filed with the IRS service center for the district in which the tax is paid. For tax paid to the Director of International Operations, the refund claim, along with supporting evidence, is filed with the director. For taxpayers who successfully prevail in court, the Justice Department issues documents to the IRS authorizing a refund.

Ebert provides some insight into how the IRS can dispute a refund claim. The first thing the IRS did was attempt to discredit the claim on the basis that all technical requirements were not met. Tax preparers are cautioned to “cross all the T’s and dot all the I’s” when requesting taxpayer refunds, especially if the refund may be challenged by the IRS. It is highly unlikely the IRS would employ the judiciary’s informal claim doctrine to circumvent formal refund requirements. Next, when past transactions are recharacterized, expect the IRS to challenge the refund claims on the basis of the transactions being closed, even if they are within the limitation period. Third, the IRS may expect taxpayers to bear the burden for proving that the refund has not already been realized, even though that information is already available to the IRS. This seems to be a particularly disingenuous tactic to derail refund claims. Finally, in Ebert, the IRS offered support for its position in the form of cases that followed a similar but not identical fact pattern. It is not clear whether this was a deliberate attempt to undercut the refund claim or simply the result of poor research. Ebert provides insight into IRS tactics in challenging taxpayer refund claims. It is surprising how easily the court dismissed each IRS argument to rule in favor of the taxpayer. It is equally surprising that this case found its way to court, given the seeming weakness of the IRS’s arguments and the relatively small amount of money involved. For additional info on this case refer to [www.nysscpa.org/cpajournal/2006/906/essentials/p44.htm](http://www.nysscpa.org/cpajournal/2006/906/essentials/p44.htm) . [Source: The CPA Journal Mark A. Turner article Sep 06 ++]

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**Vet Gun Control Update 03:** The House Veterans Affairs Committee on 15 SEP approved H.R.2547, authored by rep. Jim Moran (D-VA-8) in May 2009, to protect the Second Amendment rights of veterans. The bill would change the Veteran Affairs’ current practice of revoking the gun rights of veterans and their families if they receive assistance in managing their finances. “I introduced this legislation to make sure veterans are not unfairly denied the rights they fought so bravely to defend,” Moran said. “It is wrong to take away veterans’ gun rights simply because they cannot manage their finances.” The VA’s current practice labels veterans who have a fiduciary appointed to act on their behalf financially are labeled “mentally defective” and are reported to the FBI’s National Instant Criminal Background Check System (NICS). Being listed on the NICS prevents veterans from owning or purchasing a firearm. According to Moran’s office, since 1998, more than 117,000 veterans and members of veterans’ families have been reported to the NICS because they have a fiduciary appointed on their behalf. The legislation was approved as an amendment to a veteran benefits measure. The bill is supported by the National Rifle Association and Gun Owners of America. Similar legislation was introduced in the Senate by Sen. Richard Burr (R-NC). That bill introduced in MAR 09 (S.669) with 18 co-sponsors, would prohibit VA from submitting names to the National Instant Criminal Background Check database unless a judicial authority finds the individuals to be a danger to themselves or others. [Source: The McPherson Sentinel article 16 Sep 2010 ++]

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**Vet Toxic Exposure ~ Lejeune Update 13:** In the decades that poisonous chemicals tainted the drinking water at Camp Lejeune, N.C., hundreds of thousands of Marines filed through the base, but so far, only 200 veterans have asked the Department of Veterans Affairs to link their illnesses to the poisons. Of those, only 20 have been told "yes." A Veterans Affairs official told Congress on 16 SEP that despite the evidence of widespread contamination of drinking water at Camp Lejeune, the agency doesn't think that the science yet exists to link exposure to the toxic water led to a host of cancers and other diseases suffered by former base residents. "Establishing presumptive diseases at this point would be premature," said Thomas J. Pamperin, the associate deputy undersecretary for policy and program management at Veterans Affairs. Instead, the VA has awarded



benefits on a case-by-case and isolated basis. As the military, federal scientists, congressional officials and Veterans Affairs try to sort out how closely to link the toxins in the water with a variety of illnesses and cancers, Marines and their families continue to struggle for their health care.

"The degree of contamination was extraordinary at Camp Lejeune," testified Richard Clapp, an epidemiologist and professor emeritus at Boston University. The amount of trichloroethylene, or TCE, recorded in one sample in 1982, he noted, was 1,400 parts per billion - more than 280 times what would be allowed by today's standards. "This is the largest (TCE) exposure in our country's history," said Clapp, who also serves on an advisory panel for federal scientists studying the issue. "Congress needs to act." He said there's plenty of science - going back to the early 1980s - to show that TCE and other contaminants have impacts that can include a variety of cancers and, for newborns, birth defects. No presumption yet exists, however. Marine Corps Maj. Gen. Eugene G. Payne said the military relies on scientists to make a determination about whether the contamination can be connected to veterans' illnesses. "We would love for the scientific community to tell us that there is one, if there is one," Payne said in an interview. Meanwhile, federal scientists at the Agency for Toxic Substances and Disease Registry in Atlanta are continuing a water modeling study that aims to figure out how much of the contaminants residents might have been exposed to during their time at Camp Lejeune.

The model would be used to inform a handful of epidemiology studies at the agency to offer further detail on the potential health impacts, said Chris Poitier, who became last month became the director of the agency, which is part of the Department of Health and Human Services. But Poitier, like Clapp, said the science showing impacts of the poisons already exists. "It's not just these studies (at the agency) that should be used," Poitier said. "It's the broader scientific knowledge." Still, Poitier said the agency doesn't have the role to decide whether any links between the toxic water and the diseases would amount to the kind of presumption the Department of Veterans Affairs could use to award health benefits. "That's a societal question," Poitier said in an interview. In this case, he said, that means Congress. Rep. Brad Miller, D-N.C., the chairman of the oversight panel, has introduced legislation that would establish an assumption that if service members were at Camp Lejeune from the mid-1950s through the mid-1980s, they will be presumed to have been exposed to the toxic water. The legislation also provides health care for veterans and family members with diseases that could be associated with the exposure. Miller says there's a precedent for handling toxic exposures in the military this way - it's how the VA handles many Vietnam veterans presumably exposed to Agent Orange.

About a million people are estimated to have been exposed to TCE; perchloroethylene, also known as PCE or tetrachloroethylene; benzene; and other chemicals until the wells were shut down in 1984 and 1985. It's unknown how many could be ill, but 163,000 people have registered with the Marine Corps for more information. If Congress passes Miller's legislation, thousands of people could be eligible to get their health care through the VA - at a potential cost of millions of taxpayer dollars. "There is a great deal of concern at (the Office of Management and Budget) and the Pentagon about the expense (of compensation)," Miller said. [Source: McClatchy Newspapers Barbara Barrett article 16 Sep 2010 ++]

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**POW VA Benefits Update 05:** Secretary of Veterans Affairs Eric K. Shinseki wants former American prisoners of war (POWs) to be aware of the benefits and services available to them as Americans across the nation showed respect and appreciation for this special group of men and women during the recent POW/MIA National Recognition Day. "These Veterans made great sacrifices for their country in time of war, and it is our Nation's turn to honor them by reinforcing to them the full range of compensation, health care and benefits they have earned," he said. The Department of Veterans Affairs (VA) has expanded policies to cover increasing numbers of former prisoners of war. Special benefits for former POWs include:

- Enrollment in medical care for treatment at VA hospitals and clinics without copayments, as well as disability compensation for injuries and diseases that are associated with internment.
- Presumption of service-connection for certain diseases, based on the length of captivity and the severity of their conditions is generally given.
- No cost dental treatment for any dental condition. These benefits are in addition to regular Veterans' benefits and services to which they are already entitled.



- Dependency and Indemnity Compensation (DIC), which is a monthly benefit which may be payable to the surviving spouse, children and, in some cases, parents.

Currently, more than 15,000 POWs are receiving VA benefits for service-connected injuries, diseases, or illnesses. VA is asking former POWs not currently utilizing VA benefits to contact the agency at 1(800) 827-1000 to find out if they may be eligible for disability compensation and other services. Veterans can also apply online at <http://vabenefits.vba.va.gov/vonapp/main.asp> or contact their coordinator for former POWs located at each VA regional office. More information about VA services for former POWs is available at <http://www.vba.va.gov/VBA/benefits/factsheets/misc/formerpow.doc>. [Source: VA News Release 20 Sep 2010 ++]

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**Vet Jobs Update 22:** Federal agencies increased the hiring of veterans by about 3.5 percentage points in the first half of fiscal 2010 compared to the same period of the previous year, senior Obama administration officials said 16 SEP. During a meeting of the Council on Veterans Employment, a federal partnership chaired by the secretaries of Labor and Veterans Affairs, government leaders said agencies hired more than 32,800 veterans during the first six months of fiscal 2010. Veterans were 30.2% of total new hires during that time compared to 26.8% in the first half of fiscal 2009. "These employment outcomes show how seriously agencies are taking this initiative," said Ray Jefferson, assistant secretary for veterans employment and training at the Labor Department. "There is still much work to do, but it's clear that the federal government is up to the task." The council also announced a new model to guide employment initiatives. Benchmarks will be based on agencies' current percentage of veterans hired, and those with lower percentages will face higher goals. The Veterans Employment Council and Veterans Employment Initiative were established under a NOV 09 executive order to increase interagency collaboration on veterans hiring, match them with job openings and help them navigate the application process. The council developed a strategic hiring plan and in January launched [www.FedsHireVets.gov](http://www.FedsHireVets.gov), an information portal on veterans employment. "The jobless rate among veterans returning from Iraq and Afghanistan is unacceptably high," VA Deputy Secretary Scott Gould said. "The federal government wants to hire veterans because of their experience, leadership skills and commitment to our country. Working together, we can do a lot of good for our veterans and for our nation." [Source: GovExec.com Emily Long article 16 Sep 2010 ++]

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**Arlington National Cemetery Update 15:** The remains of Marine Corps Pvt. Heath Warner, who was 19 when he was killed in Iraq four years ago, were positively identified after his coffin was exhumed from the grounds of Arlington National Cemetery. The exhumation came after the cemetery discovered last month that two sets of remains had been buried in the wrong place. On 15 SEP Army spokesman Gary Tallman said three sets of remains had been involved in that mix-up but revised his statement later, saying he had been provided incomplete information by Army officials. After finding inaccurate information in burial records, Scott Warner of Canton, Ohio, had grown concerned that his son might be interred in the wrong place and asked that his body be exhumed. Warner said he lost faith in the cemetery's leadership after the Army's inspector general released a report in June that found widespread record-keeping problems at the nation's most important military burial site, including 211 mislabeled or unmarked grave sites and at least four burial urns that had been dug up and dumped in a pile of excess dirt. After the report was released, Warner demanded proof from the cemetery that his son was in the correct spot. But the paperwork provided by the cemetery had inaccuracies that made him doubt the location of his son's remains, he said. He said he had no choice but to exhume his son. Once his son's remains were positively identified, cemetery officials took them to the mortuary and placed them in a new coffin. Heath Warner was reburied at noon in the same plot. Three weeks ago, the cemetery took the extraordinary step of opening the grave of an Army staff sergeant after his wife heard about the cemetery's problems and worried that her husband was buried in the wrong place. When officials opened his grave, they found that someone else's remains had been interred there, Tallman said. The cemetery found the sergeant in another plot, his wife said in an interview. Tallman declined to explain how the mix-up occurred. [Source: Washington Post Christian Davenport article 16 Sep 2010 ++]

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**Arlington National Cemetery Update 16:** The secretary of the Army would have to provide Congress with a full accounting of all of the more than 320,000 grave sites at Arlington National Cemetery under a Senate bill introduced 28 SEP. The bill, which comes on the heels of a growing scandal at the nation's most hallowed military burial ground, would also require a review of the contracts issued to digitize the cemetery's paper records and a study to determine whether the cemetery should be transferred to the Department of Veterans Affairs. In a statement, Sen. Scott Brown (R-MA), who introduced the legislation with Sen. Claire McCaskill (D-MO), said the bill would "make sure that those responsible for managing the cemetery are being held accountable and meeting the highest standards when it comes to ensuring the proper burials of America's fallen men and women." The bill also calls for a review of whether the cemetery is adequately communicating with families whose loved ones are buried at Arlington. If the bill were enacted, Army Secretary John McHugh would have one year to specify whether every grave site at Arlington is "correctly identified, labeled and occupied." If graves are found to have problems, the Army would have to detail its plan to fix them. [Source: Washington Post Christian Davenport article 28 Sep 2010 ++]

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**Veterans' Court Update 07:** A New York veteran of the wars in Iraq and Afghanistan, charged with making death and bomb threats, may end up avoiding prison, his lawyer said. The case of Britten M. Walker, 33, of Eden is the first federal criminal case in the United States to be transferred to a veterans' court. Walker returned to the United States last year after having been in the Army and having seen horrific incidents in the wars, and encountered trouble readjusting to civilian life. In January, Walker allegedly threatened to kill a counselor at Buffalo's Veterans Affairs Medical Center, threatened to bomb several places in the city and threatened suicide. He was charged with assaulting a security officer and a doctor at the VA facility. Walker's case was recently transferred from Buffalo's federal court, where he would have faced a prison sentence of up to 10 years if convicted, to the Erie County Veterans Treatment Court at Buffalo's City Court. "It is the first (transferred case of this kind), and we're very pleased with the result. From the beginning, our position is that this is a young man who needs counseling for (post-traumatic stress disorder) and other issues, not prison time," said Walker's lawyer, Tracy Hayes of the Federal Public Defender's Office. "We are seeking a better way to provide justice to those veterans who, despite the sacrifices they made for our country, sadly find that they have brought the war home with them," said U.S. Attorney William J. Hochul Jr., who added his office has been working with the Veterans Court and Veterans Affairs officials to give assistance to veterans charged with crimes rather than having them go to prison. [Source: UPI.com | U.S. News article 14 Sep 2010 ++]

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**VA Financial Management System:** White House officials announced on 15 SEP they have canceled upgrades to financial management systems at the Small Business Administration and the Veterans Affairs Department as part of a strategy to save about \$1 billion a year. The Obama administration is reviewing the financial systems of major agencies -- worth a combined \$20 billion -- to identify where they can save money. The review is a component of a reengineering of the federal information technology procurement process, which historically has delivered systems that are late, over budget and do not work as planned. Of the projects it has assessed to date, the Office of Management and Budget (OMB) has decided the two agencies' systems do not yet require upgrades. The White House will save \$113 million by terminating SBA's loan management and accounting system and \$423 million by shelving VA's project, officials said. Meanwhile, SBA and VA will continue to rely on old financial management systems that have produced clean audits. On 28 JUN the White House suspended about 30 financial system modernizations in the first step of an initiative to redo the way government buys and uses IT. For the past few months, agencies have slowed spending on the systems so they could scale down planned computing functions and speed up installation schedules.

Financial systems, in particular, have experienced major setbacks because project managers add too many sophisticated functions to requirements, Danny Werfel, controller of OMB's Office of Federal Financial Management, said during a call with reporters. The purpose of the systems is to collect data in a central location from daily financial transactions that take place throughout a department so that agencies can produce a set of statements that then can be independently audited. "The effort is still under way, but we're already getting results," said OMB acting Director and Chief Performance Officer Jeffrey Zients, who also was on the call. "This is an

example of how we're taking proven best practices from the private sector and applying them to government." OMB expects to wrap up its reviews this fall. In the meantime, the contracting community whose projects -- and income -- have been interrupted is growing concerned, say some industry groups. TechAmerica officials recently warned the uncertainty could cause companies to raise government prices as insurance against the risk that project spending could stop. Stan Soloway, president of the Professional Services Council, another contractor trade group, said the affected vendors should be allowed to participate in appraisals of suspended projects and other systems the government has categorized as high risk.

Sen. Thomas Carper (D-DE), chairman of the Federal Financial Management Subcommittee, praised the administration for curbing spending by refining IT investments. He urged the House to approve a bill he sponsored, S.920, which the Senate passed in June to mandate similar efforts. "The announcement by the administration that they will be pulling the plug on over \$300 million worth of IT investments that time and again have failed to deliver on their promises was a welcome step in the right direction," said Carper, "In fact, this should have happened a long time ago. For years my colleagues and I urged the previous administration to hold agencies and contractors accountable for the skyrocketing costs and extended time lines on these failing investments." [Source: NextGov.com Aliya Sternstein article 15 Sep 2010 ++]

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**HVAC Update 13:** The House Committee on Veterans' Affairs led by Chairman Bob Filner (D-CA) approved six bills on 16 SEP that would improve benefits and services to veterans provided by the Department of Veterans Affairs (VA). The bills will next be considered by the U.S. House of Representatives. The bills are:

- **H.R.6132 – The Veterans Benefits and Economic Welfare Improvement Act of 2010** (Filner). This comprehensive bill would establish a transition program for new veterans not eligible for other employment aid programs and who had a military occupational specialty of limited transferability to the civilian job market. The bill includes provisions to improve the disability claim system by extending the 120-day limit for the filing of an appeal to the Court of Veterans Appeals after a final decision of the Board of Veterans' Appeals upon a showing of good cause for such time as justice may require. The bill would also increase the pension amount for Medal of Honor recipients; establish an award program that will permit the VA to recognize businesses for their contributions to veteran's employment, and protect veterans from losing their non-service connected pension benefits because they received payments to cover expenses incurred after an accident, theft, loss or casualty loss.
- **H.R.3685 – Promotion of the VetSuccess Internet Website** (Stearns). This bill would require the Secretary of Veterans Affairs to include on the home page of the Department of Veterans Affairs website a hyperlink to the VetSuccess website.
- **H.R.5360, as amended – The Housing, Employment, and Living Programs for Veterans Act of 2010** (Herseth Sandlin). This comprehensive bill improves vocational rehabilitation, internship, work-study and on-the-job training programs offered by VA. The bill provides support for programs and facilities that provide services for homeless women veterans and their families. The bill also improves specially adapted housing assistance.
- **H.R.5630 – Qualification for Vocational Rehabilitation Counselors and Employment Coordinators** (Boozman). This bill would provide qualifications for vocational rehabilitation counselors and vocational rehabilitation employment coordinators employed by the Department of Veterans Affairs.
- **H.R.3787, as amended – Veteran Status for Certain Reserve Components** (Walz). This bill would recognize the service in the reserve components of certain persons by honoring them with status as veterans under law.
- **H.R.5993, as amended – SAVINGS Act of 2010** (Halvorson). This bill would ensure that beneficiaries of Servicemembers' Group Life Insurance receive financial counseling and disclosure information regarding life insurance payments.

[Source: Washington Post Sgt. Shaft article 28 Sep 2010 ++].

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## VA Presumptive VN Vet Diseases Update 13:

The Department of Veterans Affairs published its final regulation Aug.31 for compensating Vietnam veterans with ischemic heart disease, Parkinson's disease or B-cell leukemia, or their surviving spouses. Veterans diagnosed with these diseases only will have to show they stepped foot in Vietnam sometime from Jan. 9, 1962 through May 7, 1975, to qualify for service-connected disability ratings and compensation. The first batch of payments will be made immediately after 30 OCT, when a required 60-day review period for Congress will expire. As many as 93,000 veterans and survivors who filed claims previously for these conditions are in line for retroactive payments. Another 60,000 claims have been filed since 13 OCT, when VA Secretary Eric Shinseki announced that these diseases would be added to the list of ailments VA presumes are caused by wartime exposure to Agent Orange. VA projects that at least 150,000 more claims will be filed over the next 12 to 18 months. To stop payments, both the Senate and House in this election year would have to pass a joint resolution to block the regulation. President Obama then would have to sign the resolution, after his own Office of Management and Budget spent the past two months studying the VA rule before finally approving it. So VA officials are preparing to make payments.

Here's a rundown of how payments will be handled for categories of veterans and survivors. This information came from an interview 1 SEP with Thomas Pamperin, associate deputy under secretary for policy and program management for the Veterans Benefit Administration, and Diana Rubens, associate deputy under secretary for field operations. Veterans are advised to gather medical records from private doctors so VA won't need to schedule new exams to confirm their diseases:

**Retroactive Pay** - Because of a 25-year-old court ruling, *Nehmer v. Department of Veterans Affairs*, VA must review claims previously filed for these diseases and make payments retroactive to the claim date, or to the date of the *Nehmer* ruling, 25 SEP 85, whichever is later.

- The 93,000 veterans and survivors so far identified as having filed a claim for one of these diseases don't need to file another, said Pamperin. "We are going to review those cases on our own...back to the earliest date they claimed that disability -- but not earlier than *Nehmer* -- and will award benefits from that date."
- If the veteran is deceased, VA will award back pay to the surviving spouse. If no surviving spouse is found, the National Veterans Legal Services Program, which litigated the *Nehmer* decision, will help to identify someone else who might be eligible for the benefits. Besides disability pay, back payments could include Dependency and Indemnity Compensation for the widow, enhanced burial benefits if a veteran's death was due to a service-connected condition, and 36-months of education benefit to a spouse or a child, no matter what age the child is today, if the veteran was 100-percent disabled at time of death.
- If veterans or survivors are worried the VA will not identify them as eligible for retroactive payments, they can file a new claim, Pamperin said. "We are doing a data run against our corporate record, and some of these corporate records are limited to six diagnostic codes. So we've done the best we can with the resources we have to identify people," he said. Diana Rubens said 1000 staffers at 13 regional offices, including 326 specially-trained rating specialists, are working only on *Nehmer* claims, which can involve complex calculations and long searches for next of kin.

**Recent Claims** - 60,000 veterans and survivors who have filed claims for the three diseases since last October also will receive *Nehmer* protection in that payment will be made back to the date of the claim. Every VA service center and regional office is working to develop and process these claims for payment sometime after 30 OCT. "Our goal is to spend the next couple of months setting up as many claims as possible for payments as quickly as possible," Rubens said.

**Future Claims** - If veterans or survivors planning to submit a new Agent Orange claim can show they had one of these diseases diagnosed on or before 31 AUG 2010, and if they file their claim before 30 AUG 2011, it will be payable back to 31 AUG 2010, the date the regulation took effect. Otherwise, payment date will be the date an approved claim was filed.

[Source: Stars and Stripes TOM PHILPOTT article 3 Sep 2010 ++]

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## **VA Presumptive VN Vet Diseases Update 14:** Secretary of Veterans Affairs Eric K.

Shinseki announced on 28 SEP the publication of a final regulation in the Federal Register that makes it easier for Veterans to obtain Department of Veterans Affairs (VA) health care and disability compensation for certain diseases associated with service in Southwest Asia (including Iraq) or Afghanistan. The final regulation establishes new presumptions of service connection for nine specific infectious diseases associated with military service in Southwest Asia beginning on or after the start of the first Gulf War on 2 AUG 90, through the conflict in Iraq and on or after 19 SEP 01 in Afghanistan. The final regulation reflects a determination of a positive association between service in Southwest Asia or Afghanistan and nine diseases and includes information about the long-term health effects potentially associated with these diseases: Brucellosis, Campylobacter jejuni, Coxiella Burnetii (Q fever), Malaria, Mycobacterium tuberculosis, Nontyphoid Salmonella, Shigella, Visceral leishmaniasis and West Nile virus.

With the final rule, a Veteran will only have to show service in Southwest Asia or Afghanistan and that he or she had one of the nine diseases within a certain time after service and has a current disability as a result of that disease, subject to certain time limits for seven of the diseases. Most of these diseases would be diagnosed within one year of return from service, though some conditions may manifest at a later time. For non-presumptive conditions, a Veteran is required to provide medical evidence to establish an actual connection between military service in Southwest Asia or Afghanistan and a specific disease. The decision to add these presumptives was made after reviewing the 2006 report of the National Academy of Sciences Institute of Medicine (NASIOM), titled, "Gulf War and Health Volume 5: Infectious Diseases." The 2006 report differed from the four prior reports by looking at the long-term health effects of certain diseases determined to be pertinent to Gulf War Veterans. Secretary Shinseki decided to include Afghanistan Veterans in these presumptions because NAS found that the nine diseases are also prevalent in that country. The 1998 Persian Gulf War Veterans Act requires the Secretary to review NAS reports that study scientific information and possible associations between illnesses and exposure to toxic agents by Veterans who served in the Persian Gulf War.

While the decision to add the nine new presumptives predates VA's Gulf War Veterans' Illnesses Task Force (GWVI-TF), the overarching responsibility of the GWVI-TF is to regain Gulf War Veterans' confidence in VA's health care, benefits, and services and reconfirm VA is 100 percent committed to Veterans of all eras. The GWVI-TF began in fall 2009 and is not a static, one-time initiative but will continue to build on its work with annual reports issued every August. The group's focus centers on unanswered Gulf War Veterans' health issues, improving access to benefits, ensuring cutting edge research into treatments, and to make sure Veterans' concerns are heard and addressed. This includes continuing to solicit Veterans, experts, advocates and stakeholders to share their views to better inform the important work of the GWVI-TF. The GWVI-TF Report can be found at [www.VA.gov](http://www.VA.gov). For information about health problems associated with military service in Southwest Asia and Afghanistan, and related VA programs, go to [www.publichealth.va.gov/exposures/gulfwar/](http://www.publichealth.va.gov/exposures/gulfwar/) and [www.publichealth.va.gov/exposures/oeoif/index.asp](http://www.publichealth.va.gov/exposures/oeoif/index.asp). For information about how to apply for disability compensation, go to [www.va.gov](http://www.va.gov) or [www.publichealth.va.gov/exposures/gulfwar/compensation\\_benefits.asp](http://www.publichealth.va.gov/exposures/gulfwar/compensation_benefits.asp). To review a list of questions and answers regarding presumptions of service connection for Southwest Asia and Afghanistan service refer to the attachment to this Bulletin titled "*Q&A for Vietnam Service Connection*". [Source: VA News Release 28 Sep 2010 ++]

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## **Stop-loss Pay Update 06:** On 15 SEP, the White House, Department of Defense and Department of Veterans Affairs jointly released a new web video in which President Obama encourages active duty troops and veterans whose service in Iraq or Afghanistan was involuntarily extended or retirement was suspended due to 'stop loss' to apply for the special retroactive pay to which they are entitled. Under legislation President Obama signed into law last year, servicemen and women who served between September 11, 2001 and September 30, 2009 and whose service was extended due to 'stop loss' are eligible for \$500 per month in retroactive pay for each month their service was extended. "As your Commander in Chief, I'm here to tell you that this is no gimmick or trick," President Obama says in the video. "You worked hard. You earned this money. It doesn't matter whether you were Active or Reserve, whether you're a veteran who experienced 'stop loss' or the survivor of a service member who did-if your



service was extended, you're eligible." To see the full video, refer to [www.whitehouse.gov/blog/2010/09/15/president-obamas-message-veterans-retroactive-pay-due-stop-loss](http://www.whitehouse.gov/blog/2010/09/15/president-obamas-message-veterans-retroactive-pay-due-stop-loss) .

Eligible servicemen and women should submit their applications for this retroactive pay to [www.defense.gov/stoploss](http://www.defense.gov/stoploss). While by law, service members who received a bonus for voluntarily reenlisting or extending their service are not eligible, it is strongly recommended that all who may be eligible submit an application before the deadline. The deadline to apply is October 21, 2010. The tens of thousands of veterans who have already been approved have received an average of \$3,700 each and there is still money to be claimed by thousands of vets who have not yet applied.. Special retroactive pay for servicemen and women impacted by 'stop loss' is just one of the many ways the Obama Administration is working to serve the men and women who have served our country. Since President Obama took office, the Administration has:

- Provided one of the largest funding increases in decades to help create a 21st century VA that provides our veterans better health care, better services, and better support, including in rural communities.
- Eliminated inpatient, outpatient and prescription co-pays for the catastrophically disabled, which today account for a historically large percentage of our veterans coming home from war.
- Worked to break the back of benefit claims backlog so vets don't have to wait years for the benefits they need, and continues to work to improve and modernize VA's delivery of services.
- Helped our veterans transition back to civilian life by helping them get jobs and sending them to college through the post-9/11 GI Bill, which has already helped more than 300,000 veterans or their family members pursue their dream of a college education.
- Provided unprecedented resources to treat the wounds of today's wars -- traumatic brain injury and post traumatic stress disorder - and provided additional resources to help family members and caregivers who put their own lives on hold to care for their loved one.
- Made it easier for those suffering from PTSD to qualify for VA benefits. A veteran can now establish a claim based on his or her own testimony of events that caused PTSD without the requirement of corroborating evidence -- no matter which war they served in.
- Eliminated obstacles for about 200,000 Vietnam veterans who may have been exposed to Agent Orange to get the health care and benefits they need.

[Source: White House Press Release 15 Sep 2010 ++]

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**Ohio Vet Bonus Update 01:** The Internal Revenue Service will not tax bonuses that Ohio is paying to thousands of veterans who served outside a combat zone during the Persian Gulf, Iraq and Afghanistan wars, according to U.S. Sen. Sherrod Brown. Ohio veterans are eligible to receive \$100 for each month of service in combat zones in any of the three wars, up to \$1,000. Those who served outside combat zones could get \$50 a month, up to \$500, while family members of veterans who died during the recent conflicts are eligible for as much as \$6,500. Applications for these bonuses are available at [www.veteransbonus.ohio.gov](http://www.veteransbonus.ohio.gov), at any of Ohio's county Veterans Services offices, or by calling 1-877-OHIO-VET. [Source: Military.com Veterans Report 13 Sep 2010 ++]

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**Vet Insurance ~ Life Update 08:** The Department of Veterans Affairs (VA) has reviewed the account administered by Prudential that includes Servicemembers' Group Life Insurance (SGLI) and Veterans' Group Life Insurance (VGLI) programs to ensure beneficiaries are protected, being treated fairly, and accorded the utmost care and respect. VA is also ensuring that benefits are delivered in a transparent way that clearly outlines all available options. Since 1965, VA has successfully delivered life insurance benefits to survivors of our Nation's Servicemembers and Veterans. "The most important thing we can do is ensure that beneficiaries have options that are clear, competitive, and come at no personal cost during a time of emotional stress," said Veterans Affairs Chief of Staff John R. Gingrich. "Providing clear and concise options for the beneficiary is a top priority." VA will continue to provide a full explanation of terms up-front, increase clarity of options and more actively promote



current financial counseling to assist in decision making. These efforts will further enhance the transparency that will continue to ensure confidence in this important program.

The department will provide better clarity of payment options by using new documents that ask the beneficiary to choose one payment option, including a lump sum check, or a lump sum Alliance Account (retained asset account) that allows beneficiaries the option to immediately write a check for the entire payment or any lesser amount. VA will also continue to offer the option for payment in 36 monthly installments. VA worked with beneficiaries, regulators, and subject matter experts to determine appropriate improvements to provide beneficiaries all benefits due under current life insurance programs to include Alliance Accounts in a secure and timely manner. "Prudential has agreed to implement these adjustments, and the department will continue to carefully monitor this program to ensure that Servicemembers' and Veterans' beneficiaries are well-protected," said Gingrich. VA is also taking the following actions:

- All SGLI/VGLI related information, including frequently asked questions, website information and handbooks will be modified to clearly and completely explain all aspects of the Alliance Account and all options available to the beneficiary.
- VA will require Prudential to conduct a follow up contact with beneficiaries whose accounts remains open after six months to confirm the beneficiary understands the terms of the account.
- VA will clearly designate the source of correspondence by removing the SGLI seal from all checks, forms, and correspondence and replacing it to show that it is from Prudential, with the subtitle of "Office of Servicemembers' Group Life Insurance".
- VA will identify additional opportunities to encourage beneficiaries to use the free financial counseling service.
- VA will, in coordination with the Department of Defense (DoD), improve support to Casualty Assistant Officers and Transition Assistance Program (TAP) Personnel by helping to prepare additional training materials and instruction.

SGLI provides group life insurance for the Uniformed Services, such as Servicemembers on active duty, ready reservists, and members of the National Guard, among others. More information on the SGLI/VGLI program is also available at <http://www.insurance.va.gov/sglisite/sgli/sgli.htm>. [Source: VA News Release 14 Sep 2010 ++]

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**Vet Insurance ~ Life Update 09:** Prudential Financial has sent a letter to a number of military and veteran advocacy groups saying it “deeply resents” allegations that the company has devised “some elaborate scheme to make money from the deaths of fallen service members.

**Note:** “We were contacted by Military Times Managing Editor M. Scott Mahaskey who informed us that to disseminate any information on the RAO website pertaining to this or any other subject taken from their publication will infringe on the copyright of the material contained within their newspapers and/or provided on their website. Their interpretation of any exclusion extended to us as a non-profit entity under Title 17 U.S.C. section 107 to use their material does not extend to posting it on a public website. The repository of all Bulletin articles for those who cannot receive the Bulletin directly is [http://post\\_119\\_gulfport\\_ms.tripod.com/rao1.html](http://post_119_gulfport_ms.tripod.com/rao1.html) which is considered a public website even though it is maintained by a non-profit military fraternal organization. Military Times’ interpretation of Title 17 exclusion does allow us to disseminate the information via direct communication to individual subscribers. Since we cannot afford the time nor expense to deal with their implied legal action, readers who want to obtain this information can attempt to access it at [www.armytimes.com/news/2010/09/military-prudential-SGLI-letter-092410w/](http://www.armytimes.com/news/2010/09/military-prudential-SGLI-letter-092410w/). Those who are unable to do so or who cannot access [raoemo@sbcglobal.net](mailto:raoemo@sbcglobal.net) it because they do not have a password or it has been removed from their website can obtain the information directly via email request to [raoemo@sbcglobal.net](mailto:raoemo@sbcglobal.net).

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**Saving Money:**

- **Scratch and dent** stores sell groceries and appliances discounted by 50% or more. They buy up truckloads of items that are damaged, are near or beyond their sell-by dates or season (think Halloween in November), or just didn't sell well. Go to [www.andersoncountrymarket.net/directory](http://www.andersoncountrymarket.net/directory) for a state -by-state list. For info on what the dates mean and how long you can anticipate the items will be good refer to [www.cbsnews.com/stories/2009/04/18/earlyshow/health/main4953898.shtml](http://www.cbsnews.com/stories/2009/04/18/earlyshow/health/main4953898.shtml) and <http://homecooking.about.com/library/weekly/aa102102a.htm> .
- **Cellphone minutes.** Save by skipping long-winded voice-mail greetings and instructions. Press \* when call Verizon users, 1 for Sprint users, or the # sign for AT&T and T-mobile users. If you're not sure of the provider, try this prudery: 1, then \*, then #. When you hear a beep, you've got the right one.
- **Groceries.** To save check out [www.mygrocerydeals.com](http://www.mygrocerydeals.com) where you can compare process in supermarkets in your area by product, category or store. Another site is [www.groceryguide.com](http://www.groceryguide.com). You must register to use the sites, but both are no-charge.
- **Electronic trade-ins.** Trade in electronics like old cell phones and computers at [www.wireflytradeins.com](http://www.wireflytradeins.com) and get a charity write-off, cash, or gift cards. Costco, Best buy and Sears also have electronics trade-in programs.
- **Gift cards.** Buy for up to 30% off their face value at [www.plasticjungle.com](http://www.plasticjungle.com) and [www.giftcardsagain.com](http://www.giftcardsagain.com), where the cards are sold by gift-getters who don't want them.
- **Group coupon websites.** Provide your email and city and you'll get a daily local offer. If a set of people sign up, you get the deal. Sites include [www.groupon.com](http://www.groupon.com) , [www.socialbuy.com](http://www.socialbuy.com), and [www.angieslist.com](http://www.angieslist.com).
- **Plays.** See plays at no cost by volunteering as an usher. Many theaters will let you see the show of you help[ with the paying patrons. Check with your local theater, and wear comfortable shoes – you may end up standing for the performance.
- **Yard sales.** Those in your area can be found at [www.yardsaletreasuremap.com](http://www.yardsaletreasuremap.com). The site tracks sales that have been posted on craigslist, then gives you the when, where, and driving directions.
- **Owners manuals.** These are often missing when you buy bargain electronic devices or appliances at online auctions or garage sales. Manufacturers may charge for the manuals, but you can get many at no cost by going to [www.retrevo.com](http://www.retrevo.com) ormanuelsonline.com or [www.usersmanualonline.com](http://www.usersmanualonline.com) .
- **Online shopping rewards.** Obtain at [www.ebates.com](http://www.ebates.com) . You register and then click to visit any of about 1000 partner retailers. You can collect a reward of from 1 to (very occasionally) 40% of your purchase amount. The money arrives as a check or a credit to you PayPal account.
- **Promotional codes.** Get discounts of up to 50% when you check out at online shopping sites. Though some codes are for returning loyal customers, others are up for grabs – you just have to know where to find them. Try these websites: [www.retailmenot.com](http://www.retailmenot.com), [www.couponchief.com](http://www.couponchief.com), [www.currentcodes.com](http://www.currentcodes.com), and [www.freeshipping.org](http://www.freeshipping.org).
- **Secondhand shops.** Donations are often local so head to wealthier neighborhoods. Find stores at [www.thriftshopper.com](http://www.thriftshopper.com) or [www.thrift-shop-directory.com](http://www.thrift-shop-directory.com). Also, shop early in the week – many donations come in over the weekend. And watch for hidden bargains. Thrift stores often set process by category, say \$3 per shirt no matter what the brand.
- **Plays, concerts, sports matched exhibits and other events.** Avoid high ticket prices in eight major cities by getting a membership at [www.goldstar.com](http://www.goldstar.com) at no charge. This online seller of half-price tickets levies a service charge of \$4.50 per ticket. The theater chooses the seats. Other websites such as [www.ticketloot.com](http://www.ticketloot.com) can also get you through the doors at a lower price.
- **Supermarket registers.** Keep your eyes glued to the register. Some stores have a scan guarantee policy, which means you get the item at no cost or at a discount of the price the register displays is higher than the real price.
- **Organization discounts.** Take advantage of discounts offered through your membership at AAA, AFL-CIO unions, AARP and college alumni organizations.

- **Phone numbers.** Call 1-800-GOOG-411, give your location, and speak a name or business category. You'll get a list of matches, and the service then will dial your choice. The big advantage over 411 is that it does not cost you anything.

[Source: AARP Bulletin Jul-Aug 2010 ++]

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## Medicare Fraud Update 49:

- **Manhattan NY** - On 14 SEP Khosrow Moghaddam, the owner of two pharmacies agreed to pay \$700,000 to settle a civil lawsuit filed after a Medicare fraud case. Both companies were based in Manhattan, New York and are no longer in business. In 2001, Moghaddam enrolled his two businesses in the Medicare program. The defendant received a provider number in order to submit reimbursement requests for various kinds of durable medical equipment. The, from 2001 to 2004, he submitted false claims to Medicare seeking reimbursement for medical equipment. Moghaddam repeatedly billed Medicare for powered pressure-reducing air mattresses that were not actually provided to Medicare beneficiaries. He also billed for mattresses that were not prescribed by physicians or were not medically necessary, contrary to Medicare rules.
- **Miami FL** - A federal jury on 15 SEP found Antonio Ochoa guilty of conspiracy to commit health care fraud and soliciting and receiving kickbacks and bribes. He was a patient recruiter and home health aide for ABC Home Health and Florida Home Health Care Providers. The agencies purported to provide physical therapy and home health services to Medicare beneficiaries. Ochoa solicited and received \$1,300 per Medicare beneficiary in exchange for referring them to ABC and Florida Home Health. The agencies then billed Medicare for services that were either not necessary or never provided. His partner, Eduardo Romeo, pleaded guilty in July and testified at the trial. Ochoa was one of numerous suspected rounded up last December during a Medicare fraud sweep. Last month, five nurses, who worked at ABC Home Health Care and/or Florida Home Health Care, pleaded guilty to their part in the scheme, which authorities say resulted in the filing of millions of dollars in false and fraudulent Medicare claims. Ochoa faces a maximum of 10 years in prison for the conspiracy to commit health care fraud count, and five years in prison for each of the three kickback counts.
- **Los Angeles CA** - Dr. Gershon Hepner faces loss of his medical license for a second time after his conviction in a \$15 million health-fraud scheme where Orange County residents of board-and-care facilities were recruited for unnecessary respiratory treatments. Hepner was among 66 doctors who were the subject of a June Register investigation into the reinstatement of medical licenses, often after conviction of a crime. Late last year, he pled guilty to health care fraud and conspiracy to pay kickbacks. Hepner and 16 others targeted the elderly and mentally ill for unnecessary respiratory treatments that were billed to Medicare and Medi-Cal. In some cases, no treatment was provided. The fraud took place at board-and-care facilities throughout Orange and Los Angeles counties. Residents were bribed with soda, candy, donuts and cigarettes. Hepner was paid more than \$400,000 in Medicare funds, with one-third going to illegal kickbacks to keep a steady stream of patients. He was sentenced to 21 months in prison and nine months of home detention. Hepner, 72, is imprisoned at Taft Correctional Institute in the central valley. Board records show Hepner lost his license after his 1991 guilty plea to 25 counts of insurance fraud. Hepner earned \$1.7 million a year by hiring "cappers" to bring him personal injury patients. He submitted inflated bills to insurers, often for work he never did. He was sentenced to eight years in prison for that conviction. In 2002, his medical license was reinstated.
- **El Centro CA** - The El Centro Regional Medical Center in Imperial County, Calif., has agreed to pay the US government \$2.2 million, plus interest, to settle allegations it defrauded Medicare. The case was brought by a whistleblower, protected under federal law. The 165-bed acute care hospital fraudulently inflated its charges to Medicare patients to obtain larger reimbursements from the federal health care program. The settlement covers claims submitted by the hospital for short inpatient admissions, usually of

one day or less, when the services should have been billed on an outpatient “observation” basis or as emergency room visits. The lawsuit was brought under the qui tam — whistleblower — provisions of the False Claims Act, which allow private citizens to bring an action on behalf of the federal government and share in any recovery. The whistleblower in this case, Pietro Ingrande, a former employee of El Centro Regional Medical Center, will receive \$375,000 as his share of the recovery.

- **Torrington CT** — The Arthritis And Allergy Associates has entered into a civil settlement agreement with the government to resolve allegations that the medical practice violated the False Claims Act by submitting false claims to the Medicare program. From 2004 through 2009 they improperly billed the Medicare program for facet joint blocks/injections (treatment relating to back pain) that were not performed using fluoroscopic guidance (real-time radiologic imaging). Also, from 1999 through the first quarter of 2009 they improperly billed the Medicare program for services rendered by unlicensed individuals. During the relevant time period, Medicare paid, on average, approximately \$250 for facet joint injections and approximately \$49 for single tendon injections. To settle allegations under the False Claims Act, Arthritis And Allergy Associates agreed to pay \$247,036.72, which covers conduct occurring from 1999 through the first quarter of 2009. The whistleblower, Ms. Chwee Cass, a former employee of Arthritis And Allergy Associates, will receive a share of the proceeds of the settlement in the amount of \$41,996.24. People who suspect health care fraud are encouraged to report it by calling 800-HHS-TIPS, or the Health Care Fraud Task Force at (203) 785-9270.
- **Brooklyn NY** - Dr. Boris Sachakov was arrested 22 SEP and accused of bilking \$3.5 million through phony bills from his Colon and Rectal Care of New York in Brighton Beach. The red flags included \$60,020 in bills for 85 hemorrhoidectomies Sachakov claimed he had performed on one unfortunate patient in 20 months. Sachakov, a solo practitioner, often billed for working more than 24 hours a day. He was supposedly so busy he claimed to have performed 6,593 hemorrhoidectomies and other procedures between FEB 09 and JJAN 2010. The next busiest proctology clinic in the country billed Medicare for a mere 381 procedures in the same time period, a criminal complaint said. Sachakov, 41, was released on \$500,000 bond. He faces up to 10 years in prison and a \$250,000 fine if convicted. He maintains he did nothing wrong.
- **Houston TX** - Melvin Jean Barnes, 60; Johnnie Lee Andrews, 58; and Monica Renee Perry, 42, pleaded guilty 24 SEP to conspiracy to commit health care fraud. In their pleas, Andrews and Perry admitted that they were paid kickbacks in exchange for referring Medicare beneficiaries to the durable medical equipment [DME] company, Luant & Odera Inc. Luant & Odera submitted false and fraudulent claims to Medicare for medically unnecessary DME, including power wheelchairs, wheelchair accessories, and motorized scooters. In his plea, Barnes admitted that he was paid kickbacks in exchange for delivering the medically unnecessary DME. After Hurricanes Katrina, Rita, and Ike, Medicare relaxed its normal operating procedures to speed provision of healthcare services to elderly and disabled persons and created the CR Modifier. Under the CR Modifier, DME companies and other healthcare providers that furnished replacement DME in good faith, could be paid by Medicare for services provided, even if the companies could not comply with normal program requirements because of the hurricanes. According to court documents, Andrews and Perry agreed to refer Medicare beneficiaries to Luant & Odera in exchange for kickbacks. Luant & Odera then used the beneficiaries’ information to bill Medicare under the CR Modifier for DME such as wheelchairs or scooters that were neither destroyed by a hurricane nor medically necessary. Barnes accepted kickbacks in exchange for delivering the DME for Luant & Odera. Andrews, Perry, and Barnes admitted that they specifically knew that the DME was not destroyed in a hurricane and not medically necessary. Luant & Odera submitted approximately \$3 million in false and fraudulent claims to Medicare using the CR Modifier for the DME.
- **Minneapolis MN** - A federal lawsuit filed in NOV 07 and unsealed in SEP 2010 accuses the Mayo Clinic of fraudulently billing for surgical services that weren't performed. The complaint alleges that over the course of the last ten years, Mayo has routinely billed Medicare, Medicaid and other federally sponsored

health care programs for surgical pathology services that have not been performed. The Department of Justice declined to litigate allegations that Mayo improperly obtained laboratory accreditation and didn't retain slides for a decade as required, but those claims have not been dropped from the suit. In a statement the Mayo Clinic denied the allegations and said, "Upon discovering a billing error in 2007, Mayo corrected it and voluntarily refunded \$242,711 to the federal government. The error was identified and corrected long before Mayo became aware that a sealed complaint had been filed and well before Mayo was notified that the Department of Justice was evaluating whether to become involved in the complaint. Mayo has fully complied with the law, and we believe our response to the billing error and our approach to surgical pathology represents a 'best practice.' Mayo's strong culture of compliance allowed us to identify the error, correct and refund the money."

- **Jacksonville FL** - Miami-area residents Alejandro Hernandez Quiros, 33, Vicenta Tellechea, 64, Carlos Castaneda, 44, were sentenced to prison 24 SEP for their participation in a \$22 million Medicare fraud scheme operated through two Miami home health agencies, ABC Home Health Care Inc. and Florida Home Health Care Providers Inc. A fourth individual Javier Zambrana, 25, was sentenced to three years of probation, including 12 months of home detention. for his participation in the scheme. Tellechea, Castaneda, Quiros, and Zambrana each pleaded guilty in 2009 to one count of conspiracy to commit health care fraud. In addition, Tellechea pleaded guilty to one count of paying kickbacks and Quiros pleaded guilty to three counts of paying kickbacks. Quiros was sentenced to 78 months in prison and three years of supervised release; Tellechea was sentenced to 69 months in prison and three years of supervised release; and Castaneda was sentenced to 40 months in prison and three years of supervised release. ABC fraudulently billed more than \$17 million to the Medicare program of which Medicare paid more than \$11 million of the claims. Florida Home Health submitted more than \$5.5 million of which Medicare paid more than \$4 million of the claims.
- **Detroit MI** - Hassan Akhtar, 26 pleaded guilty 27 SEP to one count of conspiracy to commit health care fraud in connection with a \$4.65 million home health care fraud scheme and faces up to 10 years in prison and a \$250,000 fine. Akhtar admitted to federal investigators he and co-conspirators at Oak Park-based All American Home Care Inc. billed Medicare for home health-care visits that were medically unnecessary and/or never provided. Akhtar worked as All American's office administrator and ran the company's day-to-day operations. Akhtar also admitted to a scheme that paid cash kickbacks to Medicare beneficiaries in exchange for their Medicare numbers and signatures on documents that falsely indicated they received services from All American. The scheme took place between JUN 08 and OCT 09. It also relied on physical therapists and physical therapy assistants who signed documents required to bill Medicare. A second individual, Muhammad Shahab, pleaded guilty to the same charge and is awaiting sentencing.

[Source: Fraud News Daily reports 15-30 2010 ++]

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## Medicad Fraud Update 22:

- **Covington KY** - Omnicare, Inc., the nation's leading provider of medications for nursing home residents, has paid \$21,050,000 to settle allegations brought by a whistleblower that it defrauded the Medicaid programs of the Commonwealth of Massachusetts and the State of Michigan by knowingly charging more for drugs for the indigent than it charges private insurers. Massachusetts and Michigan are among a select group of states that expressly require drug providers like Omnicare to give the Medicaid program, the federal-state health care program for the indigent, their most favored customer price for pharmaceuticals. While the federal government agrees to contribute to state Medicaid programs only if the states pay no more than a pharmacy's usual and customary charge to the general public, some states like Michigan and Massachusetts go the extra step to protect taxpayer funds and require pharmacies to give Medicaid their best available price. Despite these stringent state laws Omnicare charged Medicaid patients in

Massachusetts and Michigan (as well as other states) far higher prices for drugs than it charged private insurers, thereby reaping hundreds of millions of dollars in illegal profits at the expense of the taxpayers.

- **Houston TX** - Fred Jessie Cole, an owner of a durable medical equipment (DME) company, has been sentenced to prison for defrauding the Medicaid health care program of approximately \$1 million by submitting false and fraudulent claims for incontinence supplies. On 15 SEP he was given 46 months in federal prison. Cole, 44, who was a co-owner of Crusade Integrated Health Services was indicted in JAN 2010 and pleaded guilty to 14 counts of health care fraud. Cole has admitted that between MAY 03 through SEP 06, he submitted false and fraudulent claims to the Texas Medicaid Program for incontinence supplies such as diapers and briefs that were not delivered to Medicaid beneficiaries, not wanted by Medicaid beneficiaries and not medically necessary. Judge Rosenthal ordered Cole to pay \$937,567.54 to the Medicaid program which represents the amount he was paid for the false and fraudulent claims he had submitted to the health care program and to serve a three-year term of supervised release upon completion of his prison term.
- **Richmond VA** - The owner of a company that provided in-home therapy for children will spend more than four years in prison for Medicaid fraud. Denise C. McCreary, 43, also must pay \$601,580 in restitution to the Virginia Medicaid program. McCreary was convicted in June of submitting fraudulent claims for reimbursement to the Medicaid program. She owned Camp Hope Youth Services, which provided therapy to children with mental health, behavioral or emotional issues who were at risk of being removed from their homes. McCreary submitted bills to Medicaid for services that weren't reimbursable or weren't provided.
- **Marlborough MA** - Fe Filart, 60, was one of 42 people indicted by a federal grand jury in JUN 09. The indictment alleged that unlicensed nurses provided services to disabled California Medicaid patients, many of them children with cerebral palsy or other developmental disabilities, from 2004 to 2007. Filart was one of the unlicensed nurses who operated out of southern California. She changed her plea in May and is due in U.S. District Court in Los Angeles on 24 JAN for sentencing. She faces up to 10 years in prison. The organizer of the ring, Priscilla Villabroza, pleaded guilty in federal court to five counts of health care fraud. Authorities said Villabroza and others hired unlicensed nurses to provide care to disabled patients and then billed Medi-Cal nearly \$4.6 million as if they were licensed. U.S. Attorney Thomas O'Brien said he thinks the case is the largest alleging fraud of Medi-Cal, the California Medicaid program, ever filed in the state.

[Source: Fraud News Daily reports 15-30 Sep 2010++]

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**State Veteran's Benefits:** The state of Delaware provides several benefits to veterans. To obtain information on these refer to the “**Veteran State Benefits – DE**” 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
- Employment Benefits
- Education Benefits
- Other State Veteran Benefits

[Source: [www.military.com/benefits/veteran-benefits/delaware-state-veterans-benefits](http://www.military.com/benefits/veteran-benefits/delaware-state-veterans-benefits) Sep 2010 ++]

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**Military History:** The Battle of Britain was one of the first major battles of WW2. It lasted officially from July 10th until October 31st 1940. It is known for two very important reasons in the annals of modern history. First it was the only battle to be staged in military warfare that was ever to be fought entirely in the air, even to this day. Secondly it was to turn the tide for the whole future of the Second World War, because if the Battle of Britain had



been lost German forces would have invaded Great Britain and would then have had total domination of Northern Europe and possibly have succeeded in being a world power. But, because of the outcome, we shall never know. After continued successful 'Blitzkrieg' invasions of Poland, Denmark, Norway, Holland, Belgium and France, Germany, under Adolf Hitler's Nazi rule he needed only to defeat and complete a successful invasion of Great Britain to stand fast as a world power to be taken notice of. As the last of the tired and exhausted allied personnel had been taken from Dunkirk, Hitler's armies were busy marching towards Paris and the claim that France had been defeated and now belonged to Germany. The British Prime Minister Winston Churchill included in his speech at the fall of France: "....the Battle of France is over, I expect that the Battle of Britain is about to begin. Upon this battle depends the survival of Christian civilization. Upon it depends our own British life, and the long continuity of our institutions and our Empire."

Germany's swift 'Blitzkrieg' attacks to date had a devastating effect on the enemy and gave them successes in a very short period of time. Hitler and his Generals believed that the same methods would work for an invasion of Great Britain, the only difference being that because the English Channel formed a natural defense between the French and British coasts the Luftwaffe would have to destroy the Royal Air Force both in the air and on the ground. Reichsmarschall Hermann Göring, believing that the RAF was weak and demoralized after the defeat in France, thought it could be destroyed in just three weeks. Hitler gave him four weeks and made plans for an invasion of Great Britain by mid-August. Göring's plan was to attack British convoys in the English Channel thus demoralizing the British people, and depriving them of food, coal and supplies while at the same time it would lure the fighters of the RAF into the air where they could be attacked by, what Göring thought to be his superior Messerschmitt Bf109 fighter. Those early days of July 1940 saw many hard fought combats in the air and casualties were high on both sides. As well as the convoys, the Luftwaffe also attacked Britain's Channel ports as well as spasmodic bombing attacks in the west, the Midlands and along the east coast.

Fighter Command responded well, even though at this stage there was a shortage of fighter aircraft and a desperate shortage of good pilots. At first, a number of pilots from the Fleet Air Arm had been transferred to Fighter Command but this was not enough to bring them up to full strength. Soon, Fighter Command was strengthened by Belgian, Polish and Czechoslovakian pilots that had fled their respective countries that had been taken over by Germany plus nine Americans. The training period for new pilots was shortened to boost squadron strength, but this was to place further burdens on squadron commanders who had to teach 'green' pilots the art of combat and how to survive. Luftwaffe pilots were now complaining that convoys and ports could have been successfully attacked, but the British fighters were always there. Often they were being scattered by squadrons of Hurricanes and Spitfires before they could attack their targets. Reichsmarschall Göring believed that it was this radar that the British were using was informing them of any enemy activity, and that before any attack could be mounted on RAF airfields and other targets inland, this radar would have to be destroyed.

Now into August and the preparation of an invasion drawing even closer, the Luftwaffe was nowhere near to destroying the RAF as it was in early July. On 12 AUG at 0730 hours the Luftwaffe made its first all out attack on the radar stations along the southern English coast. Bombs fell on Dover, Pevensey and Rye, while Ju87 dive bombers attacked two convoys in the Thames Estuary. Six radar stations were attacked, but only Ventnor was put out of action. It had been the busiest day since the Battle began with Fighter Command flying 732 sorties. August was now the height of activity. Squadrons were flying four or five sorties a day, combat action was relentless day after day. Pilots were now becoming exhausted, often being transferred north for rest, but this was not always the case as they were often called into combat to intercept enemy activity that were targeting northern airfields and industry. Down south, came the first signs of attacks on Fighter Command aerodromes. Manston, Hawkinge, Lympne, Croydon, Hornchurch, North Weald, Kenley and Biggin Hill all suffered extensive damage with many lives lost. The four weeks that Göring had thought that he could destroy the RAF was now well past, and the Luftwaffe was again no closer to achieving victory.

The invasion date for mid August now had to be put back to mid-September, after that the unfavorable weather conditions of a British winter would set in. The Luftwaffe was losing superiority in the air, the young pilots of Fighter Command was now proving far too good a match for them. German aircraft and pilot casualties were now three times greater than that of Fighter Command, but although AVM Keith Park was pleased with these results, he was very much concerned that many enemy aircraft were still getting through and reaching their targets. Even though it appeared that Fighter Command was getting the upper hand, the experience of flying in battle was playing on the minds of the young pilots. The Battle was now taking its toll. Although the number of pilots was increasing in numbers those that had fought with Fighter Command since the Battle of Britain began were tired, Hurricanes and Spitfires were being destroyed as fast as new ones were being delivered, and airfields had not recovered since the attacks on the bases had begun. But if anything, there was one glimmer of hope.....the Luftwaffe had not destroyed them as they had planned, late August was the lowest ebb for Fighter Command.

Then, on 7 SEP 1940 the Luftwaffe turned its attacks on London itself. One hundred plus Heinkel's, Dornier's and Junkers, fully laden with bombloads and escorted by as many Bf109 fighters headed the capital. From 1115 hours until the morning of the next day wave after wave of enemy bombers came across the Channel, the night operations being guided by the huge fires in London's East End. Fighter Command scrambled squadron after squadron but they were outnumbered on every raid. London docks suffered terribly, Silvertown was a blazing inferno, the oil tanks at Thameshaven and Purfleet were ablaze and so was every borough along the Thames to London. This day goes down as the first day of "The Blitz" which was to continue well into 1941. AVM Keith Park did not like what he saw, but he was a relieved man. "At least they're leaving my airfields alone." The opportunity came to make all the necessary repairs to the Fighter Command aerodromes. Communications were restored, water and gas mains repaired and in the days that followed it gave ACM Hugh Dowding and AVM Keith Park time to build up the squadrons to combat strength with pilots and aircraft. Within a week, Fighter Command was back to almost full strength.

On 15 SEP1940, the largest concentration of enemy aircraft ever seen came across the English coast from all directions. One pilot searching for the invaders called out upon sighting them; "It's the whole bloody Luftwaffe!!" The raids continued throughout the day with the Luftwaffe flying over 1,000 sorties against London. 11 Group put up its entire force of squadrons and called for assistance from 12 Group and 10 Group. In all nearly forty fighter squadrons, that's 480 aircraft that were in the air in fierce combat between London and the Thames Estuary, south of London to the South Coast and in areas north of the capital. Luftwaffe bombers were seen scampering in all directions, releasing their bombs at random. Most of the bombers were without fighter escort as they were forced to return back to their bases. The Luftwaffe lost 59 aircraft further adding to their frustration while Fighter Command lost 26 aircraft and 13 pilots. Considering the days events, this was a good result giving the pilots greater confidence for future combats. Within two days Adolf Hitler realized that an invasion of Great Britain was now impossible. His Luftwaffe had failed to destroy the Royal Air Force and any landing in Britain was now out of the question. Fighter Command had proven themselves masters of the air, young and inexperienced, outnumbered in both men and machines they added another yet another chapter to the history of WW2, as this was the very first time that Germany had failed to accomplish what it had set out to do, they had been defeated.

The Battle of Britain was to continue through until 31 OCT 1940, but after 15 SEP most raids were on a far lesser scale. The "Blitz" continued with constant night attacks for 57 consecutive days after 7 SEP, but the bombing of British towns and industrial centers continued until 1944. Of almost 3,000 British and Allied pilots who flew in the battle, more than 544 were killed. Almost 800 more died before the end of the war. It is thought that about 100 Battle of Britain veterans survive today. Those that have no known grave are remembered on the RAF Runnymede Memorial near Windsor. A total of 20,514 tons of high explosive and 23,543 tons of incendiary bombs were dropped by the German Air Force between 1 AUG and 31 OCT. During the 113 day battle the UK lost 1,065 aircraft (including 1,004 fighters) and Germany lost 1,922 aircraft (including 879 fighters, 80 Stukas and 881 bombers). UK civilian losses in the German Blitz that ended in May 1941 totaled 43,381 killed and 50,856 injured. September 15th is now celebrated each year in Britain and the commonwealth countries as Battle of Britain Day. Dedicated and courageous, sometimes tired and exhausted they would not be beaten and turned the tide in favour of the Allied forces. [Source: [battleofbritain1940.net/bobhsoc/index.html](http://battleofbritain1940.net/bobhsoc/index.html) Sep 2010 ++]

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**Military History Anniversaries:** Significant October Events in U.S. Military History are:

- Oct 01 1951 - 24th Infantry Regiment, last all-black military unit, deactivated
- Oct 01 1957 - Cold War: B-52 bombers begin full-time flying alert in case of USSR attack.
- Oct 02 1835 - The Texas Revolution begins with the Battle of Gonzales: Mexican soldiers attempt to disarm the people of Gonzales, Texas, but encounter stiff resistance from a hastily assembled militia.
- Oct 02 1864 - American Civil War: Battle of Saltville - Union forces attack Saltville, Virginia, but are defeated by Confederate troops.
- Oct 02 1944 - WWII: Battle of Aachen Germany begins. Fighting for the city took place between 13–21 October.
- Oct 03 1940 - U.S. Army forms airborne (parachute) troops.
- Oct 03 1993 - Somalia Intervention: Battle of Bakhara Market, Mogadishu, Somalia

- Oct 05 1813 - War of 1812: U.S. victory at the Battle of the Thames in Ontario broke Britain's Indian allies with the death of Shawnee Chief Tecumseh and made the Detroit frontier safe.
- Oct 05 1965 - Korea: U.S. forces in Saigon receive permission to use tear gas
- Oct 05 1966 - Vietnam: Hanoi insists the United States must end its bombings before peace talks can begin.
- Oct 05 2001 - GWOT: Operation Enduring Freedom began in Afghanistan.
- Oct 06 1971 - Vietnam: Operation Jefferson Glenn ends. The last major operation in which US ground forces participated.
- Oct 07 1777 - American Revolution: Americans beat Brits in 2nd Battle of Saratoga aka. Battle of Bemis Hts.
- Oct 07 1864 - Civil War: Battle of Darbytown Road: Confederate forces' attempt to regain ground that had been lost around Richmond is thwarted.
- Oct 07 1864 - Civil War: U.S.S. Wachusett captures the C.S.S. Florida Confederate raider ship while in port in Bahia, Brazil.
- Oct 07 1940 - WW II: the McCollum memo proposes bringing the United States into the war in Europe by provoking the Japanese to attack the United States.
- Oct 07 2001 - GWOT: The U.S. invasion of Afghanistan starts with an air assault and covert operations on the ground.
- Oct 08 1918 - WW I: In the Argonne Forest in France, U.S. Corporal Alvin C. York leads an attack that kills 25 German soldiers and captures 132.
- Oct 08 1950 - Korea: Chinese Communist Forces begin to infiltrate the North Korean Army.
- Oct 08 1862 - Civil War: The Union is victorious at the Battle of Perryville, the largest Civil War combat to take place in Kentucky.
- Oct 08 1968 - Vietnam: U.S. forces in launch Operation Sealord, an attack on North Vietnamese supply lines and base areas in the Mekong Delta.
- Oct 09 1950 - Korea: The invasion of North Korea begins when U.N. forces led by the 1st Cav Div cross the 38th parallel and begin attacking northward towards the capital of Pyongyang.
- Oct 10 1812 - War of 1812: In a naval engagement on Lake Erie, American forces capture two British ships: HMS Detroit and HMS Caledonia.
- Oct 10 1845 - The U.S. Naval Academy is founded at Annapolis MD.
- Oct 10 1861 - Civil War: Battle of Santa Rosa Island - Union troops repel a Confederate attempt to capture Fort Pickens.
- Oct 10 1864 - Civil War: Battle of Tom's Brook - Union cavalymen in the Shenandoah Valley defeat Confederate forces at Tom's Brook, Virginia.
- Oct 10 1941 - WWII: German U-boat torpedoes U.S. destroyer Kearney.
- Oct 10 1944 - WWII: U.S. takes Okinawa
- Oct 10 1966 - Vietnam: U.S. Forces launch Operation Robin in Hoa Province south of Saigon to provide road security between villages.
- Oct 11 1776 - American Revolution: Benedict Arnold's Lake Champlain fleet defeated by the British.
- Oct 12 1861 - Civil War: Confederate ironclad Manassas attacks Union's Richmond.
- Oct 12 1942 - WWII: In the Battle of Cape Esperance near the Solomon Islands (Guadalcanal) U.S. cruisers and destroyers decisively defeat a Japanese task force in a night surface encounter.
- Oct 12 1943 - WWII: The U.S. Fifth Army begins an assault crossing of the Volturno River in Italy.
- Oct 12 2000 - Bombing of the USS Cole by Al-Qaeda terrorists
- Oct 13 1775 - American Revolution: The US Navy was established when the Continental Congress authorizes construction of two warships.
- Oct 13 1812 - War of 1812: At the Battle of Queenston Heights a Canadian and British army defeats the Americans who have tried to invade Canada.

- Oct 13 1942 - WWII: In the first of four attacks two Japanese battleships sail down the slot and shell Henderson field on Guadalcanal in an unsuccessful effort to destroy the American Cactus Air Force.
- Oct 14 1773 - American Revolution: The United Kingdom's East India Company tea ships' cargo are burned at Annapolis, Maryland.
- Oct 14 1863 - Civil War: Battle of Bristoe Station - Confederate General Robert E. Lee forces fail to drive the Union Army out of Virginia.
- Oct 14 1943 - WWII: U.S. 8th Air Force loses 60 B-17 Flying Fortresses during an assault on Schweinfurt.
- Oct 14 1952 - Korea: Battle of Hill 598 (Sniper Ridge).
- Oct 14 1962 - Cuban Missile Crisis begins: A U-2 flight over Cuba takes photos of Soviet nuclear weapons being installed.

[Source: Various Sep 2010 ++]

### **Military Trivia 13:**

- The U.S. Army physician who headed the "Yellow Fever" research project in the 1890s was Major Walter Reed.
- The first U.S. Infantry ground combat unit committed to Vietnam came ashore at Da Nang 8 March 1965.
- The rabid anti-communist senator, known as "Tail-Gunner Joe", who served in the US Marines was Senator Joseph McCarthy.
- The American flying unit in WWI that had more aces than any other was the 94th Aero Squadron.
- The unique operational feature of the WWI "Davis Gun" (an aircraft gun invented by US Navy Commander Davis) was that it was recoilless.
- Between 1834-1841 the U.S. Army, Navy and Marine units fought a bitter war with the Seminole Floridian Indian tribes.
- General Eisenhower's Chief of Staff for the 1944 Normandy Invasion was General Walter Bedell Smith.
- During WWII despite earlier experiences and after elaborate preparation, U.S. forces assaulted the Aleutian island Kiska only to discover that the Japanese had pulled out weeks before?
- The insignia adopted by the heroic World War II US Army airborne 503rd Parachute Infantry regiment was a white eagle descending on a blood-red outline of Corregidor island.
- The U.S. 82nd Airborne Div for Operation "Market-Garden" was commanded by General Maxwell Taylor.
- The 1739-1748 war named for a part of the human anatomy fought in the eastern US was the War of Jenkin's Ear.
- The WWII U.S. Navy admiral that said: "Hit hard, hit first, hit often was Admiral William F. Halsey Jr.
- The island in the Marianas where US aircraft launched to carry out the A-bomb attacks on Japan was Tinian.
- The U.S. Marine Corps maintains musical affiliations with the British Royal Welch Fusiliers (23rd of Foot).
- The World War II U.S. made single-shot partisan's pistol "Liberator" actually took longer to load than to produce (7 1/2 seconds).
- The "Senior Service" of the US armed forces is the Army.
- The city that suffered the worst firebombing in history was Tokyo on 10 May 1945.
- U.S. Navy sailors affectionately call their round white caps a "dixie cup".
- Fort Lewis, Washington, was named for the American explorer Merriweather Lewis.
- The Austro-Hungarian Aviatik B-1 aircraft was the first aircraft shot down in aerial combat.
- The man-pack anti-aircraft missile carried by U.S. Army and Marine infantry is called the "Redeye"

- The inflatable life vest used in World War II was named after the popular American movie star Mae West

[Source: [http://members.cox.net/mrboone/mil\\_trivia.html#set1\\_a](http://members.cox.net/mrboone/mil_trivia.html#set1_a) Sep 2010 ++]

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**Tax Burden for Oregon 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 Oregon:

#### **Sales Taxes**

**State Sales Tax:** none

**Gasoline Tax:** 25 cents/gallon. Tax rates does not include local option taxes of 1 to 2 cents.

**Diesel Fuel Tax:** 24.3 cents/gallon. Tax rates does not include local option taxes of 1 to 3 cents.

**Cigarette Tax:** \$1.18/pack of 20

#### **Personal Income Taxes**

**Tax Rate Range:** Low - 5%; High - 11%. Starting in tax year 2009 the personal income tax rate is 10.8% on taxable income over \$125,000 but not over \$250,000, and 11% on taxable income over \$250,000. For tax years after 2011, the highest rate will be 9.9% on taxable income over \$125,000.

**Income Brackets:** \*\* 3. Lowest - \$3,050; Highest - \$250,000. For joint returns, the taxes are twice the tax imposed on half the income.

**Personal Tax Credits:** Single - \$169; Married - \$348; Dependents - \$169

**Additional Credits:** Credit equal to 40% of federal credit

**Standard Deduction:** Single - \$1,865; Married filing jointly - \$3,735; Additional Deduction: Single over 65 - \$1,200; Married over 65 filing jointly \$2,000

**Medical/Dental Deduction:** Full only for age 59 or older, if itemized. Oregon allows a tax credit on long-term care insurance premiums. The credit is the smaller of 15% of premiums paid or \$500.

**Federal Income Tax Deduction:** \$5,000 (\$2,500 if married filing separately)

#### **Retirement Income:**

**Retirement Income Taxes:** Federal income tax rules generally determine the amount of your pension that is taxed by Oregon. However, you may subtract some pensions on your Oregon return that were taxed on your federal return. Pensions not taxed are Social Security benefits, Veterans Administration benefits and Railroad Board benefits. Oregon allows a subtraction for part or all of the payments you receive from the federal pension system. Generally, retirement income is subject to Oregon tax. A tax credit of up to 9% of taxable pension income is available to recipients of pension income, including most private pension income, whose household income was less than \$22,500 (single) and \$45,000 (joint), and who received less than \$7,500/\$15,000 in Social Security or Railroad Retirement benefits. The credit is the lesser of tax liability or 9% of taxable pension income. For more information on the Oregon retirement income credit, refer to [www.oregon.gov/DOR/PERTAX/docs/101-673.pdf?ga=t](http://www.oregon.gov/DOR/PERTAX/docs/101-673.pdf?ga=t).

**Retired Military Pay:** Federal retirees, including military personnel, may be able to subtract some or all of their federal pension income. This includes benefits paid to the retiree or to the surviving spouse. The subtraction amount is based on the number of months of federal service before and after October 1, 1991. Retirees can subtract their entire federal pension if all the months of federal service occurred before October 1, 1991. If there are no months of service before October 1, 1991, retirees cannot subtract any federal pension. If service included months before and after October 1, 1991, retirees can subtract a percentage of their pension income.

**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**

Oregon does not grant homeowners a homestead exemption. Tax rates are set by the counties and any special considerations are levied by county officials. Homeowners 62 or older may delay paying property taxes based on certain income criteria. The state offers a Disabled Citizen Property Tax Deferral Program and a Senior Citizen Property Tax Deferral Program. Both deferral programs allow qualified taxpayers to defer payment of their property taxes on their homes. The state pays the taxes to the county, maintains the account, and charges 6% simple interest, which also is deferred. Taxes are owed when the taxpayer receiving the deferral dies, sells the property, ceases to live permanently on the property, or the property changes ownership.

To qualify for either program, the taxpayer must live on the property and have a total household income of less than \$36,500 for the year before application. Participants may remain on either program as long as their federal adjusted gross income does not exceed that amount. If a participant's income exceeds the \$36,500 limit, part of the taxes still may be deferred. Participants can come in and out of the programs if their income changes. In addition to meeting the income limitation and property ownership requirement, disabled persons must be receiving or be eligible to receive federal Social Security Disability benefits to qualify. Residents must be 62 years old or older to qualify for the Senior Citizen Property Tax Deferral Program. Call 800-356-4222 or 503-376-4988 for details refer to [www.oregon.gov/DOR/SCD/faq.shtml](http://www.oregon.gov/DOR/SCD/faq.shtml) . For other property tax information refer to [www.oregon.gov/DOR/PTD](http://www.oregon.gov/DOR/PTD).

**Inheritance and Estate Taxes** - An Oregon inheritance tax return is required to be filed whenever a federal estate tax return (Form 706) is required to be filed. For a resident decedent, Oregon taxes real property and tangible personal property located in Oregon and intangible personal property wherever it is located. For a nonresident decedent, Oregon taxes real property, tangible personal property, and intangible personal property located in Oregon. An exemption is allowed for intangible personal property located in Oregon if a like exemption is allowed by the state of residence.

For further information, visit the Oregon Department of Revenue site [www.oregon.gov/DOR](http://www.oregon.gov/DOR) or call 503-378-4988. [Source: [www.retirementliving.com](http://www.retirementliving.com) Sep 2010 ++]

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**Congressional Alphalist:** To better understand what is happening to veteran legislation as it proceeds through Congress it is useful to know the language used by our representatives as they conduct business. Following are some of the words or expressions you will see while reading about or listening to House and Senate sessions:

- **MACE.** The ebony and silver rod on the House rostrum which symbolizes the authority of the House. As its custodian, the Sergeant-at-Arms carries it into the Chamber at the start of each day's session.
- **MAJORITY LEADER.** The individual elected by his/her party members in the House or Senate to lead them, to promote passage of the party's issue priorities, and to coordinate legislative efforts with the Minority Leader, the other chamber, and the White House. The Majority Leader also seeks unity among Members on the policy positions taken by the party, and works to put together coalitions to create voting majorities.
- **MAJORITY-MINORITY DISTRICTS.** Districts in which a majority of residents who are part of an ethnic minority.
- **MANAGER'S AMENDMENT.** A package of numerous individual amendments agreed to by both sides in advance. The managers are the majority and the minority member who manage the debate on a bill for their side.

- **MANDATORY SPENDING.** Refers to funds not controlled by annual decision of Congress. These funds are automatically obligated by virtue of previously-enacted laws.
- **MARK-UP.** Refers to the meeting of a Committee held to review the text of a bill before reporting it out. Committee members offer and vote on proposed changes to the bill's language, known as amendments. Most mark-ups end with a vote to send the new version of the bill to the floor for final approval.
- **MEMBER.** The individuals serving as senators or representative in Congress.
- **MINORITY LEADER.** The individual elected by his/her party members in the House or Senate to lead them, to promote passage of the party's issue priorities, and to coordinate legislative efforts with the Majority Leader, the other chamber, and the White House. The Minority Leader also seeks unity among Members on the policy positions taken by the party, and works to put together coalitions to create voting majorities.
- **MODIFIED CLOSED RULE.** It allows only those amendments specified to be offered to a bill. It also describes a rule which bans amendments to only part of the bill, but allows amendments to the rest.
- **MODIFIED OPEN RULE.** Permits all relevant amendments to be offered, subject to one or two restrictions. An overall time limit may be put on the amendment process or amendments may have to be printed in advance
- **MORNING BUSINESS.** An hour reserved for 5-minute speeches on any subject and for routine business. It includes introducing bills, filing committee reports, and the receipt of Presidential or House messages. In daily practice, the Senate uses this time in bits and pieces during the course of a day's session.
- **MORNING HOUR SPEECHES.** Speeches held 90 minutes before the House convenes on Mondays and Tuesdays. Members must reserve them in advance. They may speak up to 5 minutes on any subject they wish.

[Source: C-SPAN Congressional Glossary Sep Oct 2010 ++]

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**Veteran Legislation Status 28 SEP 2010:** For or a listing of Congressional bills of interest to the veteran community that have been introduced in the 111<sup>th</sup> Congress refer to the Bulletin's "**House & Senate Veteran Legislation**" attachments. 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](http://www.thecapitol.net/FAQ/cong_schedule.html) for dates that you can access your legislators on their home turf. [Source: RAO Bulletin Attachment 29 Aug 2010 ++]

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**Have You Heard?**

A "paraprosdokian" is a figure of speech in which the latter part of a sentence or phrase is surprising or unexpected in a way that causes the reader or listener to reframe or reinterpret the first part. It is frequently used for humorous or dramatic effect. Examples are:

- Do not argue with an idiot. He will drag you down to his level and beat you with experience.
- I want to die peacefully in my sleep, like my grandfather. Not screaming and yelling like the passengers in his car.
- The last thing I want to do is hurt you. But it's still on the list.
- Light travels faster than sound. This is why some people appear bright until you hear them speak.
- If I agreed with you, we'd both be wrong.
- We never really grow up; we only learn how to act in public.
- War does not determine who is right -- only who is left.
- Knowledge is knowing a tomato is a fruit; Wisdom is not putting it in a fruit salad.
- The early bird might get the worm, but the second mouse gets the cheese.
- Evening news is where they begin with "Good evening," and then proceed to tell you why it isn't.
- To steal ideas from one person is plagiarism. To steal from many is research.
- A bus station is where a bus stops. A train station is where a train stops. My desk is a work station.
- How is it one careless match can start a forest fire, but it takes a whole box to start a campfire?
- Dolphins are so smart that within a few weeks of captivity, they can train people to stand on the very edge of the pool and throw them fish.
- I thought I wanted a career; turns out I just wanted pay checks.
- A bank is a place that will lend you money if you can prove that you don't need it.
- Whenever I fill out an application, in the part that says "If an emergency, notify:" I put "DOCTOR."
- I didn't say it was your fault, I said I was blaming you.
- Why does someone believe you when you say there are four billion stars, but check when you say the paint is wet?
- Why do Americans choose from just two people to run for president and 50 for Miss America?
- Behind every successful man is his woman. Behind the fall of a successful man is usually another woman.
- A clear conscience is usually the sign of a bad memory.
- You do not need a parachute to skydive. You only need a parachute to skydive twice.
- The voices in my head may not be real, but they have some good ideas!
- Always borrow money from a pessimist. He won't expect it back.
- A diplomat is someone who can tell you to go to hell in such a way that you will look forward to the trip.
- Hospitality: making your guests feel like they're at home, even if you wish they were.
- Money can't buy happiness, but it sure makes misery easier to live with.
- I discovered I scream the same way whether I'm about to be devoured by a great white shark or if a piece of seaweed touches my foot.
- Some cause happiness wherever they go. Others whenever they go.
- There's a fine line between cuddling and holding someone down so they can't get away.
- I used to be indecisive. Now I'm not sure.
- When tempted to fight fire with fire, remember that the Fire Department usually uses water.
- You're never too old to learn something stupid.
- Nostalgia isn't what it used to be.
- A bus is a vehicle that runs twice as fast when you are after it as when you are in it.
- If you are supposed to learn from your mistakes, why do some people have more than one child?
- Change is inevitable, except from a vending machine.

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"A young man who does not have what it takes to perform military service is not likely to have what it takes to make a living."

--- **John F. Kennedy (1917-63)** 35th US President

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