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# RAO BULLETIN

## 1 September 2010

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**Liberty Museum:** On 11 NOV 18, an Armistice was declared to end the fighting in World War I. Concerned citizens in the United States reflected on the past War and on the losses sustained, and they wondered what could be done to honor and remember. Just two weeks after the Armistice, Kansas City leaders met to discuss the need for the creation of a lasting monument to the men and women who had served in the War, and most notably to those who had died. A community-based fundraising drive in 1919 raised over \$2.5 million in just ten days to establish the Liberty Memorial. This accomplishment for the time reflected the passion of public sentiment for the Great War that had dramatically changed the world. The site for the Liberty Memorial was dedicated on 1 NOV 21. On this day, the supreme Allied commanders spoke to a crowd of more than 100,000 people. It was the only time in history these leaders were together in one place. In attendance were Lieutenant General Baron Jacques of Belgium; General Armando Diaz of Italy; Marshal Ferdinand Foch of France; General John J. Pershing of the United States; and Admiral David Beatty of Great Britain.

Over time the physical structure of the Liberty Memorial deteriorated, and in 1994 it was closed due to safety concerns. In 1998 the public passed a half-cent sales tax for 18 months to support the restoration. While revitalizing the Liberty Memorial, plans took shape for expanding the site by building a museum which was built as an 80,000-square-foot, state-of-the-art facility. In 2004 the Museum was designated by Congress as the United States' official World War I Museum, opening to the public on 2 DEC 06 as the National World War I Museum at Liberty Memorial. The Museum presents a comprehensive interpretation of World War I (1914-1919) and its lasting consequences, providing a vivid and memorable experience for all. The Museum collections and exhibitions tell more than an American story. They cover the entire war from the first shots in 1914 to the last attempts at peace in 1919. All the belligerent nations involved, reflecting both the battlefield and the home front, are represented in over 55,000 items in the museum, library, and archival collections. The Liberty Memorial inspires thought, dialogue, and learning to make the experiences of the World War I era meaningful and relevant for present and future generations.

In AUG 2010 the board of trustees of the Liberty Memorial approved about \$5 million in projects at the site, including rebuilding a stone wall that commemorates the gathering of the five World War I Allied military commanders. The city still has to approve the improvement package. Nearly \$2.2 million of the money to be spent would come from a tax-increment financing district. The rest would come from the Liberty Memorial's maintenance endowment. The National World War I Museum located at 100 West 26th Street, Kansas City, MO 64108 is open Tue through Sun between 1000-1700. The Liberty Memorial Tower, Memory Hall and Exhibit Hall close at 1630. The Museum is closed Mondays, Thanksgiving, Christmas Day and New Years Day except for major holidays. Admission Prices are: Adults \$12; Seniors (65+) \$10; Students (18+ with ID) \$10; Youth (6-17) \$6. For additional info refer to [www.theworldwar.org/s/110/new/index\\_community.aspx](http://www.theworldwar.org/s/110/new/index_community.aspx). [Source: NavyTimes AP article 29 Aug 2010 ++]

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**VA Benefits Advisory Committee Update 01:** Disabled veterans were thrilled in 2007 when the Veterans Disability Benefits Commission asked Congress to enact an immediate "quality of life" increase to disability payments from the Department of Veterans Affairs. The special increase, said commissioners, should be across the board, benefiting all veterans with service-connected health conditions, and it should be as large as 25% for the most severely disabled. The commission argued that current disability pay compensates for average loss in lifetime earnings but fails to provide any added monetary award for diminished quality of life. Quality of life "is

addressed in a limited fashion” by Special Monthly Compensation payable for loss of limbs or lost use of limbs, said the commission. But it called for development of a “systematic methodology” for evaluating and compensating for the effect of disability on quality of life. Meanwhile, Congress should allow an interim increase of up to 25%. What happened to that idea? It fell flat, said retired Lt. Gen. Terry Scott, a former Army Ranger who chaired the benefits commission. “The terms ‘across the board’ and ‘up to 25%’ were not well-received anywhere outside the veterans community,” Scott said.

His own position on an across-the-board increase for diminished quality of life also has changed, Scott said. That’s significant because he not only had chaired the benefits commission through years of hearings and study, but Scott now chairs the Advisory Committee on Disability Compensation. That panel was created by Congress in 2008, part of the Veterans’ Benefits Improvement, which directed that the VA secretary modernize the disability compensation system and address its mammoth backlog of claims. Scott’s fallback position to an across-the-board raise, which the advisory committee also seems to embrace, is to pay something extra to recognize loss in quality of life only for the most seriously disabled veterans. That could be done by expanding the Special Monthly Compensation portion of VA disability pay or by adopting a similarly rigid model for compensating for “noneconomic loss.” “Where I have retrenched, based on this committee’s studies and the things we’ve done, (is to) pretty much agree that the additive monetary benefit for quality of life should be based on really severe disability.”

The good thing about using the Special Monthly Compensation model, Scott said, “is that it is very tightly prescribed. There is not a lot of latitude to deal with. You fit inside the parameters of one of those categories, or you do not. It is not subject to a lot of subjectivity (or) any sort of gamesmanship.” The 11-member advisory committee is a lower-profile entity than was the benefits commission. It has met 20 times since fall 2008 with responsibility both to advise and to pressure the VA secretary on steps, schedules and priorities for modernizing VA’s Schedule for Ratings Disabilities (VASRD). VA claim adjudicators have used the VASRD for more than 60 years to set disability ratings, which in turn determine the size of monthly disability payments. Critics have long argued it needs to be reformed to take into account modern medical knowledge. VA officials last year developed a master plan for overhauling the VASRD over six years. Scott’s committee, which includes medical and scientific experts, is monitoring that effort closely. [Source: military.com Tom Philpott article 29 Aug 2010 ++]

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**Patriot Day:** On 18 DEC 01, President George W. Bush signed into law designating September 11 as Patriot Day. This is an annual observance to remember the nearly 3000 people who died during terrorist attacks in New York, Washington DC and Shanksville, Pennsylvania during the terrorist attacks in the United States on 11 SEP 01. Many Americans refer Patriot Day as 9/11 or September 11 day. On the direction of the President, the flag of the United States of America should be displayed on the homes of Americans, the White House and all United States government buildings in the whole world. A few steps you can take to make the most of this important day of remembrance are:

- Fly the American Flag at your house on 11 SEP. And if possible, fly it at half-staff to remember those who died. If your flagpole doesn't allow a half-staff display, just displaying the flag is a good way to show respect for those who have died both during the attacks and in the wars that have followed. Don't have a flag? Perhaps you can go out and purchase red, white & blue bunting to hang from your porch or red, white & blue decorations to use to display your patriotism on Patriot Day.
- Light a candle (or use an electronic candle) in memory of those who died on 9/11 as a way to celebrate Patriot day.
- Observe a moment of silence at 8:46 AM Eastern Standard Time. This marks the time the the first plane flew into the World Trade Center.
- Take time to remember the heroes in your life. You can use Patriot Day to thank your local firemen and local police officers for the hard work they do. Thank the teacher who inspired you to work just a little bit harder. Thank the men and women in uniform who fight to protect you.
- Take a moment to call family and friends and let them know how much they mean to you. The events of 9/11 remind us of the uncertainty of our future. Use this day to celebrate the important people in your life.

- Celebrate life. Take a walk on the beach or through a park. Enjoy the sunset. Gaze at the stars. Use Patriot Day to remember that every day is a gift.

Patriot Day is not a federal holiday and schools and businesses do not close. Public transit systems run on their regular schedules. Many people and organizations take some time out to hold prayers for the victims of the attacks, but these do not usually affect public life for more than a few minutes. Patriot Day should not be confused with Patriot's Day, also known as Patriots Day (19 APR) which commemorates the battles of Lexington and Concord in 1775, which were two of the earliest battles in the American Revolutionary War. [Source: Various Aug 2010 ++]

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**AcaiPure & Colopure Scam:** At the FTC's request, a U.S. district court has ordered Arizona-based Central Coast Nutraceuticals, Inc. (CCN) and its owners to temporarily halt a scheme that allegedly scammed consumers out of at least \$30 million in 2009 alone through deceptive advertising and unfair billing practices. Since 2007, victimized consumers have flooded law enforcement agencies and the Better Business Bureau with more than 2,800 complaints about the company. The FTC has charged CCN, Graham D. Gibson, Michael A. McKenzie, and four related companies with deceptively advertising AcaiPure (an acai berry supplement) as a weight-loss product and Colopure (a colon cleansing product) as an aid for preventing cancer. The defendants were also charged with deceiving prospective buyers by offering "no cost" or "risk-free" trial offers that opened the door to unauthorized credit card charges. The court order imposes an asset freeze, and appoints a temporary receiver over the defendants while the FTC moves forward with its case to stop the company's improper conduct.

At a press conference announcing the FTC action, a VISA official stated that his company took aggressive action after the number of complaints from dissatisfied customers mounted. Under VISA's regulatory program, when requests for chargebacks (forced refunds) reach 1% of sales, sellers are pressured to modify their sales practices, but the CCN case was complicated because the company changed names several times. In a subsequent interview, another VISA representative told Dr. Stephen Barrett that more than half the companies that generate excessive chargebacks sell "nutraceuticals" (dietary supplements), but VISA's regulatory activity is focused on sales practices rather than product claims. One of CCN's deceptive television ads can be viewed at <http://www.ftc.gov/opa/videos/acai/index.shtm> [Source: FTC News Release 16 Aug 2010 ++]

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**VA Prostate Cancer Program Update 09:** Men who show signs that their disease has returned after prostate cancer treatment are still more likely to die of other causes, a new study in U.S. veterans shows. Nevertheless, researchers say the study underscores the need to find a better way to identify the minority of men who will die of prostate cancer after disease recurrence. "We often don't know what to tell these men in terms of their risk of dying of prostate cancer," Dr. Timothy Daskivich of the University of California, Los Angeles, told Reuters Health. Detecting prostate cancer is most often done with a blood test that measures concentrations of prostate-specific antigen, or PSA, a protein made in the prostate that becomes elevated in men with prostate cancer. After treating prostate cancer with surgery or radiation, PSA levels are monitored. If PSA levels begin to increase, this can serve as an early indicator of disease recurrence. But the effect of a rising PSA after treatment -- also known as "biochemical recurrence" -- on men's subsequent risk of dying from prostate cancer is not clear.

To investigate, Dr. Edward M. Uchio of the VA Connecticut Healthcare System in West Haven and Yale University School of Medicine in New Haven and his colleagues looked at 623 men who had been diagnosed with prostate cancer between 1991 and 1995 and were followed for up to 16 years after treatment. By the end of 2006, 387 of them (62%) had died; 48 of these deaths, or 12%, were due to prostate cancer, the researchers report in the Archives of Internal Medicine. Among the 225 men who had surgery to remove their prostate, 37% had biochemical recurrence (rising PSA) within 15 years of treatment. For these men, the risk of dying was 3% within 5 years of treatment, 10% within 10 years of treatment, and 21% at 15 years' follow-up. Among the 398 men treated with radiation, 48% had experienced recurrence at 15 years. The risk of dying for these men was 11 % at 5 years, 20% at 10 years, and 42% at 15 years. The relatively low probability of dying from prostate cancer "may provide some reassurance, and perhaps improve the quality of life, among men facing this situation," Uchio and his team say.

They add: "The phrase 'most men die with prostate cancer, not of it,' applies to elderly veterans, even after failure of primary treatment."

Efforts, the researchers say, should focus on finding better ways to identify those men who are more likely to die of their disease, for example by looking at how quickly the PSA level doubles over time, the researchers note. "We can't just look at these PSA levels and based upon those jump in and retreat the patient," Dr. Richard J. Ablin, of the University Of Arizona College Of Medicine in Tucson and co-author of an editorial published with the study, told Reuters Health. The time it takes for the PSA level to double, rather than just whether those levels climb above a certain threshold, is a much better way to identify the highest risk men, he said. A man's overall health should also be taken into account in deciding what type of treatment he receives for prostate cancer recurrence, according to Ablin.

Daskivich and his colleagues have developed and tested a questionnaire to do just that. "Our study is really looking at trying to help men who are very sick for other reasons to decide whether they want to pursue treatment in the first place," Daskivich explained in an interview with Reuters Health. He and his colleagues followed for an average of 6 years 2,900 men who had completed the Total Illness Burden Index for Prostate Cancer, or TIBI-CaP, questionnaire, which takes just 15 minutes to complete. During follow up, 420 men (14.5 percent) died, but only 86 (3 %) died of prostate cancer. The investigators found that men with the highest scores on the TIBI-CaP, meaning that they had illnesses that severely impacted their daily lives (for example, shortness of breath with exertion), were 10 times more likely to die of a cause other than prostate cancer than men with the lowest scores. Forty-one percent of the men with the highest TIBI-CaP scores had died from other causes within 6 years of treatment, compared to just 6 % of the healthiest men. This is well before the benefits of aggressive treatment, for example radiation or surgery, would be apparent, the researchers note. These men "may wish to strongly consider conservative over aggressive treatment," Daskivich and his colleagues write in the Archives of Internal Medicine. They conclude that men with other illness in addition to prostate cancer "ought to be offered this simple questionnaire to inform their decision making." [Source: Reuter's Health Anne Harding article 25 Aug 2010 ++]

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**VA Presumptive VN Vet Diseases Update 10:** Veterans groups praised the Department of Veterans Affairs last year when officials announced they would add three new diseases to the list of "presumptive illnesses" connected to the use of the Vietnam-era defoliant Agent Orange. But senators concerned about the cost and precedent of such a change put a 60-day hold on money related to the change, and have asked the VA for more information on why Agent Orange claims should be expanded. On 24 AUG, in a speech before the Veterans of Foreign Wars, VA Secretary Eric Shinseki said he's happy to defend the decision. "It was the right decision, and the President and I are proud to finally provide this group of Veterans the care and benefits they have long deserved." The rules regarding the new recognized illnesses -- Parkinson's disease, Hairy Cell, and other types of chronic, b-cell leukemia, and Ischemic Heart Disease — could open up veterans benefits to 250,000 more Vietnam-era veterans and cost the VA another \$13.4 billion over the next 18 months. Sen. Jim Webb (D-VA) has publicly questioned whether scientific research supports including the three new diseases with other Agent Orange exposure conditions, and if the VA is unnecessarily committing billions in compensation payments for problems that are often simply the result of aging. But Shinseki said he's "happy" to explain the rationale behind the move, and confident lawmakers will support the change. The hearing before the Senate Armed Services Committee is set for 23 SEP. [Source: Stars & Stripes Leo Shane article 25Aug 2010 ++]

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**VA Presumptive VN Vet Diseases Update 11:** Veterans exposed to herbicides while serving in Vietnam and other areas will have an easier path to access quality health care and qualify for disability compensation under a final regulation published on 31 AUG2 010 in the Federal Register by the Department of Veterans Affairs (VA). The new rule expands the list of health problems VA will presume to be related to Agent Orange and other herbicide exposures to add two new conditions and expand one existing category of conditions. "Last October, based on the requirements of the Agent Orange Act of 1991 and the Institute of Medicine's 2008 Update on Agent Orange, I determined that the evidence provided was sufficient to award presumptions of service connection for these three additional diseases," said Secretary of Veterans Affairs Eric K. Shinseki. "It was the right



decision, and the President and I are proud to finally provide this group of Veterans the care and benefits they have long deserved." The final regulation follows Shinseki's determination to expand the list of conditions for which service connection for Vietnam Veterans is presumed. VA is adding Parkinson's disease and ischemic heart disease and expanding chronic lymphocytic leukemia to include all chronic B cell leukemias, such as hairy cell leukemia.

In practical terms, Veterans who served in Vietnam during the war and who have a "presumed" illness don't have to prove an association between their medical problems and their military service. By helping Veterans overcome evidentiary requirements that might otherwise present significant challenges, this "presumption" simplifies and speeds up the application process and ensure that Veterans receive the benefits they deserve. The Secretary's decision to add these presumptives is based on the latest evidence provided in a 2008 independent study by the Institute of Medicine concerning health problems caused by herbicides like Agent Orange. Veterans who served in Vietnam anytime during the period beginning 9 JAN 62, and ending on 7 MAY 75, are presumed to have been exposed to herbicides. More than 150,000 Veterans are expected to submit Agent Orange claims in the next 12 to 18 months, many of whom are potentially eligible for retroactive disability payments based on past claims. Additionally, VA will review approximately 90,000 previously denied claims by Vietnam Veterans for service connection for these conditions. All those awarded service-connection who are not currently eligible for enrollment into the VA healthcare system will become eligible.

This historic regulation is subject to provisions of the Congressional Review Act that require a 60-day Congressional review period before implementation. After the review period, VA can begin paying benefits for new claims and may award benefits retroactively for earlier periods. For new claims, VA may pay benefits retroactive to the effective date of the regulation or to one year before the date VA receives the application, whichever is later. For pending claims and claims that were previously denied, VA may pay benefits retroactive to the date it received the claim. VA encourages Vietnam Veterans with these three diseases to submit their applications for access to VA health care and compensation now so the agency can begin development of their claims. Individuals can go to <http://www.vba.va.gov/bln/21/AO/claimherbicide.htm> to get an understanding of how to file a claim for presumptive conditions related to herbicide exposure, as well as what evidence is needed by VA to make a decision about disability compensation or survivors benefits. Additional information about Agent Orange and VA's services for Veterans exposed to the chemical is available at [www.publichealth.va.gov/exposures/agentorange](http://www.publichealth.va.gov/exposures/agentorange). The new Agent Orange regulation is available on the Office of the Federal Register website at <http://www.ofr.gov/>. [Source: VA News Release 30 Aug 2010 ++]

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**VA Blue Water Claims Update 12:** Veterans who served on open sea ships off the shore of Vietnam during the Vietnam War are sometimes called "Blue Water Veterans." In JAN 09 the Supreme Court effectively let stand an earlier court ruling that requires a Veteran to have served on land or on the inland waterways of Vietnam in order to be presumed exposed to Agent Orange. Some ships offshore also conducted operations on the inland waterways of Vietnam. Veterans are presumed exposed to Agent Orange if they served aboard these ships when the ships were on the inland waterways of Vietnam anytime between 9 JAN 62 and 7 MAY 75. If not, Blue Water Veterans must show on a factual basis that they were exposed to herbicides during military service in order to receive disability compensation for diseases associated with Agent Orange exposure. For help confirming service on the inland waterways of Vietnam or exposure to herbicides contact the nearest VA regional office, call 1(800) 827-1000, or if you are hearing impaired call 1(800) 829-4833. VA has asked the National Academy of Sciences Institute of Medicine (IOM) to review the medical and scientific evidence regarding Blue Water Veterans' possible exposure to Agent Orange. A report should be completed and available by summer 2011. IOM is evaluating:

- Historical background of the Vietnam War comparing Blue Water Navy, "boots on ground" combat troops, and Brown Water Navy (includes inland waters).
- Exposure levels among Blue Water Navy relative to ground troops in Vietnam or other contemporaneous ground troops deployed elsewhere ("era" Veterans).
- Comparative exposures for troops on the ground and troops aboard ships in the context of all possible routes of exposure, including herbicide "overspray," and consumption of contaminated water and food.
- A wide range of potential herbicide and dioxin exposure mechanisms including potential concentrating toxics in drinking water; air exposure possibly from drift from spraying; food; soil; skin, etc.

- Comparative risks for long-term health outcomes comparing Vietnam Veteran ground troops, Blue Water Navy Veterans, and other “Era” Veterans serving during the Vietnam War at other locations (assuming relative herbicide and dioxin exposures can be assessed). This will be based on previous IOM Veterans and Agent Orange study conclusions on long-term health outcomes from herbicide exposure.
- Existing studies of Blue Water Navy Veterans for reported health outcomes.

**VA Benefits for eligible Blue Water Veterans include:**

- Health care benefits: VA health care benefits are open to all Veterans. In order to receive health care benefits for diseases associated with Agent Orange exposure, Veterans who did not serve in Vietnam must show that they were exposed to herbicides during military service.
- Agent Orange registry health examination: A cost-free, comprehensive examination for eligible Veterans. Blue Water Veterans who served aboard ships that operated on the inland waterways of Vietnam are eligible.
- Disability compensation benefits: A monthly payment for eligible Veterans who have diseases associated with Agent Orange exposure. Blue Water Veterans who did not serve aboard ships that operated on the inland waterways of Vietnam must show on a factual basis that they were exposed to herbicides during military service in order to receive disability compensation for diseases associated with Agent Orange exposure.
- Other non-health care benefits: Home loans, vocational rehabilitation, education, and more

[Source: [www.publichealth.va.gov/exposures/agentorange/bluewaterveterans.asp](http://www.publichealth.va.gov/exposures/agentorange/bluewaterveterans.asp) Aug 2010 ++]

**Mobilized Reserve 24 AUG 2010:** The Department of Defense announced the current number of reservists on active duty as of 24 AUG 2010. The net collective result is 405 fewer reservists mobilized than last reported in the 15 AUG 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 76,164; Navy Reserve, 6,699; Air National Guard and Air Force Reserve, 14,964; Marine Corps Reserve, 4,399; and the Coast Guard Reserve, 782. This brings the total National Guard and Reserve personnel who have been activated to 103,008 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/d20100824ngr.pdf>. [Source: DoD News Release No. 769-10 dtd 25 AUG 2010 ++]

**Louisiana Vet Cemeteries Update 01:** The planned Louisiana State Veterans Cemetery at Leesville has been approved for a \$6.14 million Department of Veterans Affairs grant covering the full cost of the proposed burial ground. With official notification of the award, the department has awarded the construction bid to Pat Williams Construction of Leesville, which will begin work immediately. The new cemetery will provide for the burial needs of the approximately 59,500 veterans and their families who live in or near central Louisiana. The cemetery site is adjacent to and west of the Army's Fort Polk and Joint Readiness Training Center. It also is bounded by state Highway 467, Jeane Chapel Road and a tract of land owned by Northwestern State University. The grant will fund construction of a main entrance, a combined administration and public information center, a maintenance facility, roads, an assembly area, a committal shelter, grave sites, crypts, cremains grave sites, memorial and scatter burial areas, columbaria, landscaping, a memorial walkway and supporting infrastructure. The construction will include 595 standard burial plots; 1,190 preplaced crypts; 264 cremains grave sites; and 256 columbarium niches.

The military service requirement for burial in Louisiana state veterans cemeteries is in accordance with the eligibility standards as set by the U.S. Department of Veterans Affairs, National Cemetery Administration; at a minimum, one must meet one of the following:

- Veteran was discharged from active duty under other than dishonorable conditions,



- Veteran died while on active duty
- Veteran served at least 20 years in the National Guard or Reserves and qualified for military retirement pay (or would have qualified, except death occurred before age 60)

Spouses and dependent children of veterans who were eligible for burial may also be interred in state veterans cemeteries. Burial benefits may include the following: gravesites for casket or cremation remains, headstones or markers, opening and closing of the graves, and continued perpetual care. Burial of an eligible veteran is at no cost to the veteran. A fee is charged at the time of interment for spouses and dependent children of eligible veterans. For more information on eligibility, please go to the U.S. Department of Veterans Affairs website at: [www.cem.va.gov/bbene/eligible.asp](http://www.cem.va.gov/bbene/eligible.asp). At present veterans can obtain burial services at the state's Northwest LA Veterans Cemetery, 7970 Mike Clark Road, Keithville, LA 71047 Tel: (318) 925-0612/5521F or Email: [nlvc@vetaffairs.la.gov](mailto:nlvc@vetaffairs.la.gov) or at one of the three federal cemeteries located at:

- Alexandria National Cemetery, 209 East Shamrock Ave., Pineville, LA 71360
- Baton Rouge National Cemetery (No new interments), 220 North 19th Street, Baton Rouge, LA 70806
- Port Hudson National Cemetery, 20978 Port Hickey Road, Zachary, LA 70791 Tel: (225) 654-3767

[Source:" Shreveport Times article 24 Aug 2010 ++]

**Postal Rates Update 02:** The USPS has filed to increase the cost of postage effective 2 JAN 2011. The request is for 4% for most products and services and to increase first class postage from 44 cents to 46 cents (~4.55%). You can do a little something by stocking up on those "Forever" stamps at current prices. The USPS request is still subject to Congressional approval. [Source: Tip of the Day Herbert Hayes article 24 Aug 2010 ++]

**Flu Prevention Update 02:** Flu season is fast approaching. The swine flu pandemic is considered over, but both the seasonal and H1N1 flu strains are still a threat. Each year, the seasonal flu vaccine is different. The Center for Disease Control takes note of flu strains that are originating overseas and can forecast with some reasonable assurance the form of the flu that will impact the USA in sufficient time to manufacture vaccine. This years' vaccine is not yet available, but children over six months of age should normally (check with your doctor) receive the swine flu shots now and the seasonal shots when the vaccine is available. Check with your doctor about which immunizations should be administered; and check with the day care or school about what immunizations are required for children to attend those facilities. When one child in the family comes down with something, be sure to monitor and be prepared for the other children (and the adults) in the family to deal with the same problem -- strep throat, ear infections, flu, and other communicable diseases. [Source: Tip of the Day Herbert Hayes article 24 Aug 2010 ++]

**Urinary Incontinence:** Research suggests that urinary incontinence affects women about twice as often as it does men. But the new findings, researchers say, underscore the fact that despite their relatively lower risk, men commonly deal with the condition as well. The study found that among 5,300 U.S. men age 20 or older who participated in a government health survey, 4.5% reported symptoms of moderate to severe urinary incontinence -- defined as having leakage at least once a week, or once a month at volumes "more than drops." Among men age 75 and older, 16% met that definition. In all, that translates to an estimated 8.2 million U.S. men with moderate to severe urinary incontinence, the researchers report in the Journal of Urology. "It's a common problem," said lead researcher Dr. Alayne D. Markland, of the Birmingham VA Medical Center and the University of Alabama at Birmingham. Yet, she told Reuters Health, doctors and patients alike may not think to bring up urinary incontinence symptoms. "Older patients often think that it is just part of aging," Markland noted. But she advised men to discuss any incontinence problems with their doctors, as there are a number of effective treatments.

The options include Kegel exercises -- a set of exercises that help strengthen the muscles of the pelvic floor -- as well as behavioral changes, such as scheduled bathroom trips and limiting fluids at certain times of the day. There are also a number of medications that help treat incontinence, and two of Markland's co-authors had relationships with companies that sell or research such drugs. In more severe cases, surgery may be an option. Men with urinary incontinence will have the added step of needing a prostate check, because prostate-gland enlargement is a common cause of urinary symptoms. Markland and her colleagues also found that several factors were linked to an increased risk of moderate to severe urinary incontinence. One, not surprisingly, was older age. Another was major depression. Among men who screened positive for major depression, about 11% had moderate to severe urinary incontinence, versus 4% of men who did not screen positive. When the researchers accounted for other factors -- including age and the presence of chronic physical diseases -- depressed men had between two and three times the risk of moderate to severe urinary incontinence that non-depressed men had.

Other studies have seen a similar link between depression and urinary incontinence in both men and women, according to Markland. "But we don't know if that's a cause-and-effect relationship," she said. On one hand, it's possible that serious problems with incontinence contribute to social isolation and depression in some people. Alternatively, there could be physiological effects connected to depression -- such as alterations in the brain chemical dopamine -- that impair bladder function. Another possibility is that some of the medications used to treat depression cause incontinence as a side effect. Markland noted, however, that there is no evidence that the widely used SSRI antidepressants cause urinary incontinence. In what Markland said was a rather surprising finding, the researchers also found that men with high blood pressure had an increased risk of incontinence. Roughly 9% had moderate to severe symptoms, versus 3% of men without high blood pressure. With other factors taken into account, high blood pressure was linked to a 30% increase in the risk of urinary incontinence. As with depression, Markland said, the reasons for the connection between high blood pressure and incontinence are not yet clear. Again, she said it's possible that medications used to treat high blood pressure cause bladder control problems in some men, but that has yet to be shown. [Source: Reuters Health Amy Norton article 23 Aug 2010 ++]

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**Arlington National Cemetery Update 14:** Veterans groups and members of Congress are questioning whether management of Arlington National Cemetery should be transferred from the Army to the Department of Veterans Affairs. The discussions come after investigators found dozens of unmarked or mislabeled graves, millions of dollars wasted on technology contracts and mismanagement that stretched from the cemetery's leadership to the upper echelons of Army leadership in the Pentagon. "Let's let the experts take over," said Joe Davis, a spokesman for the Veterans of Foreign Wars. Running cemeteries "is a primary task of the VA, whereas the Army's primary task is to fight and win our wars." The American Legion has also called for the VA to be more involved at Arlington, the nation's busiest military cemetery, which has an average of 27 funerals a day and 4 million visitors annually. And several members of Congress, including Rep. Ike Skelton (D-MO), chairman of the Armed Services Committee, have asked whether the VA, which manages 131 cemeteries nationwide with 3 million graves, would be better suited to operate Arlington.

The VFW called the VA "a recognized expert in the maintenance and operation of national cemeteries." In a statement, the American Legion said it was heartened to hear that the Army has appointed a top VA cemetery official as interim superintendent of Arlington. If the VA "can fix the problems at Arlington, then that option should be on the table," said Paul Rieckhoff, the founder and executive director of Iraq and Afghanistan Veterans of America. VA officials would not comment in the absence of a formal request to transfer authority over the cemetery. But since the scandal broke, the department has been lending its expertise, and staff, to help the cemetery remedy its problems. When asked at a recent congressional hearing led by Skelton whether the VA should take over, he said it is the Army's "responsibility to carry those fallen heroes, particularly in time of war, to their final resting place." McHugh said the department did not want to "burden others because of the shortcomings of the United States Army." Through a spokeswoman, Skelton said that the committee "respects the Army's connection to the cemetery and is inclined to support its desire to remain in control, but we will continue to exercise full oversight to ensure that they live up to the high standard that is expected of them."

In 1973, all but two of the Army's cemeteries -- Arlington and the Soldiers' and Airmen's Home National Cemetery -- were transferred to the VA, which officials thought could better manage them. Arlington stayed with

the Army in part because "a bond has evolved through the years between those who have dedicated their lives to the military profession and all those who rest in Arlington's hallowed grounds," according to a 1974 study of the national cemeteries. The VA started keeping digital records of all new interments in its cemeteries in 1994. In 2003, it launched a five-year, \$1.5 million project to digitize its older records, which date to 1862. Its burial records are now searchable online. The Army, in contrast, failed to digitize records at Arlington despite spending as much as \$8 million and still uses the paper records that led to the burial problems. One of the problems, officials have said, is that during a time of war, the cemetery, with its \$40 million budget, became an afterthought in a department that spends \$140 billion annually. [Source: Washington Post Christian Davenport 23 Aug 2010 ++]

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**USFSPA & Divorce Update 15:** Jerry Bohr, a State of Iowa Veteran's Service Officer with an office in Winneshiek County, has been ordered to report to jail on 4 SEP to begin serving a 30 day sentence for contempt of court. The sentence was handed down 2 weeks ago by Judge Richard D. Stochl, 1st Judicial District Court of Iowa, for noncompliance of a previous child support order. He refused to comply with his divorce settlement agreement which wrongly calculated his VA disability compensation into his divorce as 'income' and therefore a 'divisible asset'. Bohr was found in contempt of court for not honoring the attachment of his veteran's benefits to his divorce settlement. This in spite of the fact that according to Federal Code this practice by state court judges is a violation of the Federal laws which protect veteran's benefits from the claim of creditors, from attachment, levy, or seizure by or under any legal or equitable process whatever, either before or after receipt by the beneficiary. Bohr, as an Iowa VSO had many years of experience dealing with the needs of Iowa veterans and is very well versed in the laws and regulations contained within USC, Title 38, which is the Federal Code that regulates and protects the benefits and entitlements earned by our men and women in uniform after they are discharged from the military. He is also an Honorably Discharged disabled U.S. Army veteran with a service connected VA disability rating. Between his VA disability compensation and his job with the state, Bohr has no other assets.

The disagreement between Judge Stochl and Jerry Bohr centers around USC, Title 38, 5301, which clearly states that veteran's disability compensation, is protected from attachment under any circumstances, and by/under any legal or equitable process whatsoever. Unable to acquire an attorney willing to go up against the judge, Bohr was forced to represent himself in court. Although he was well prepared and presented his case in a respectable manner, it did seem to matter with the judge who would have had to reverse himself. Bohr was ordered to serve 30 days in jail with work release and to pay all of his ex-spouse's attorney's fees. If Bohr doesn't pay the court ordered support by the 30 days, he will be sentenced to another 30 days, or more, until he pays the court ordered support. According to Judge Stochl the federal law carries no weight in his courtroom and Jerry Bohr was merely attempting to hide behind a very old outdated federal law. Jerry Bohr has never refused to pay child support. However, Bohr has stated he will only pay the court order if the amount of support is calculated without the inclusion of his veteran's benefits as income.

According to Operation Firing for Effect (OFFE), National Chairman, Gene Simes the judge got part of it right, 5301 is a very old law - which dates back to the founding of our nation. Unfortunately, civil courts across this nation are choosing to totally ignore this pledge to our combat disabled veterans. If indeed Federal law takes precedence over State law, then a majority of civil courts across the U.S.A. are in direct violation of federal code by forcing a disabled veteran to use his/her tax-free VA disability compensation as income to pay alimony, spousal support, child support, or to pay third party attorney fees, or face jail. OFFE is following over 100 cases nationwide where disabled veterans have been unjustly stripped of their veteran's benefits by civil courts judges. [Source: OFFE News release 77 dtd 19 Aug 2010 ++]

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**VA Service Dogs Update 01:** A Consistent policy that can sometimes bar a veteran from entering a Veterans Affairs Department hospital or clinic accompanied by a service dog — even one approved by VA — has prompted a Florida lawmaker to demand a change in regulations. The problem, according to Rep. Ron Klein (D-FL), is that current law and policy prohibits animals other than guide dogs for the blind from entering VA facilities without written permission. Rules require exceptions to be approved on a case-by-case basis, and some medical

centers and clinics have been reluctant to provide permission. In a 18 AUG letter to VA Secretary Eric Shinseki, Klein said VA's restrictions seem especially outdated because the Americans with Disabilities Act (which does not apply to VA) requires civilian hospitals and clinics to allow guide dogs and other service animals to accompany disabled people if the animals are specially trained. Service dogs are different than guide dogs for the blind or deaf. Instead of hearing or seeing, service dogs are trained to help with mobility, to help pick up or set down objects, to provide warnings for some medical conditions such as seizures, and to do daily chores. They also can be trained to get help in an emergency. "I believe that this regulation is outdated and does not reflect the needs of veterans with service dogs" Klein said in the letter. "It would be shameful if veterans with service dogs could access any public building in the United States except for VA."

Christina Roof, national deputy legislative director for the veterans group AmVets, said she knows of a paralyzed veteran who was prohibited in March from bringing a service dog into Charlie Norwood VA Medical Center in Augusta GA, although he had been allowed to bring the dog into other VA facilities. After Klein interceded, the Augusta hospital has rescheduled an appointment for September where the dog will be allowed to enter, Roof said. Roof, who has helped 11 veterans receive partial reimbursement for service dogs in the last month, agreed that the policy is outdate, especially in an era when VA approves of having dogs help severely disabled veterans and even pays for part of the costs. "VA needs to not just implement new laws but to make sure old laws remain up to date" Roof said. "Everyone needs to understand that it creates problems and hurdles for veterans seeking care when policies vary from facility to facility. There should be one policy, it should apply everywhere and it should allow service dogs to accompany disabled veterans." Roof and Klein suggest that a simple change in regulations would fix the problem by issuing new rules that treat service dogs the same as guide dogs. [Source: ArmyTimes Rick Maze article 19 Aug 2010 ++]

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**Saving Money:** Following are some tips on how to shave dollars and dimes from your daily expenses:

- **Cooking.** Use up to 60% less energy by boiling water in a microwave rather than on an electric stovetop. When you do use the stovetop, make sure pots and pans fully cover the heating element. A 6-inch pan on an 8-inch element translates to an energy waste of more than 40%.
- **Freezing.** Improve freezer efficiency by keeping it as full as possible - with bags of ice if necessary, But keep 1-inch open space on each side of the interior for better air exchange.
- **Heating.** Lower your thermostat in the winter. For each degree that you drop, you cut your heating bill by 3%. To feel more comfortable at lower temperatures, place pans of water near heating outlets or radiators. Water-filled air retains heat better, and the added humidity reduces itching and dry skin.
- **Gardening.** Mix your own garden dirt. Those enriched bags of soil boost flower and vegetable growth at about \$8 a bag. Instead for each one part of dirt or topsoil mix in about two parts of compost shredded from leaves and branches. This is available at no charge from many municipal recycling centers.
- **Gardening.** Buy torn bags of mulch. Home centers usually set these torn bags aside, then sell the day's mishaps at a bid discount. Your best chance to get these deals is at the end of a weekend shopping day. Bring duct tape to close them and a tarp to keep your car clean.
- **Water.** Save on flush in an old toilet by putting a plastic bottle full of water, weighted with pebbles, in your tank.
- **Water.** Connected to your storm gutters, it will collect water for later use on you lawn, vegetable garden, or car.
- **Water.** Sixty drips a minute will waste 6,426 gallons of water per year according to the U.S. Geological Society. Most water companies charge by the CCF (hundred cubic feet = 748 gals). In southern California this equates to \$10 a year or more per dripping faucet.
- **Water.** Shower quickly and save. A 15 minute shower a day costs about \$310 per year, even with a low flow head.
- **Rent extra space.** Rent that extra room or space on your garage, basement, or back yard. Visit [www.storeatmyhouse.com](http://www.storeatmyhouse.com) to list its availability and your asking price at no charge.

- **Printer ink.** Save on printer ink by using Century Gothic font, which a recent study showed consumes about a third less ink than the standard Arial. that saves about \$20 a year for a home user printing 25 pages a week.
- **Do it yourself** or hire someone? You can get estimates of the difference in cost for a home improvement project at [www.diyornot.com](http://www.diyornot.com) as well as advice on whether or not you should go it alone.
- **Furniture disposal.** Get your castoffs picked up at no cost by more than 60 nonprofit furniture banks nationwide. Items generally need to be in good condition. Find one near you at [www.nationalfurniturebank.com](http://www.nationalfurniturebank.com).
- **Education.** Obtain online college courses at no charge. However, you may have to buy books or download special software. Yale, MIT, and Stanford are among dozens of universities offering no-cost knowledge. Visit [www.education-portal.com](http://www.education-portal.com) and click on "OpenCourseWare for a list of offerings by topic.
- **Sell your junk,** but first get an idea of what it's really worth by going to [www.itaggit.com](http://www.itaggit.com) for packrats and collectors. The site analyzes recent sales at online markets.
- **Photos.** No cost photo editing is available online at [www.citrify.com](http://www.citrify.com), where your uploaded photos can be tweaked with effects like teeth-whitening and wrinkle removing. [www.Pixorial.com](http://www.Pixorial.com) provide no cost video online editing and up to 10 gigabytes of storage.
- **Sell your books.** At [www.cash4books.net](http://www.cash4books.net) or [www.sellbackyourbook.com](http://www.sellbackyourbook.com) you type in an unwanted book's ISBN number to get an offer. If you like what you see fill out a prepaid mailing label, box the books and send them off. Payment comes by check or as a credit to your PayPal account.
- **Computer.** Save on common computer problems at [www.fixya.com](http://www.fixya.com) where volunteer techies give no cost advice.
- **Don't dump, recycle.** Join the local bulletin board at [www.freecycle.org](http://www.freecycle.org) and post what you want to give away or something you are looking for. No money changes hands.

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

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**Congressional Hearings Update 01:** Congressional hearings are the principal formal method by which committees collect and analyze information in the early stages of legislative policymaking. All hearings share common elements of preparation and conduct. They can be confirmation hearings (a procedure unique to the Senate), legislative, oversight, investigative, or a combination of these. Hearings usually include oral testimony from witnesses, and questioning of the witnesses by members of Congress. They provide a goldmine of information for all the public problems of the United States. Following are a list of several veteran related hearings scheduled immediately after their return on September 13 and 14. by the Veterans Affairs committees of the House and Senate:

- September 15. HVAC will hold a hearing entitled, "Personality Disorders Discharges: Impact on Veterans' Benefits."
- September 16. The Subcommittee on Economic Opportunity will hold a hearing to receive an update on the Post-9/11 G.I. Bill.
- September 16. HVAC, Subcommittee on Disability Assistance and Memorial Affairs will hold a hearing on "VBA Claims Processing Training Requirements."
- September 22. The American Legion will give its annual briefing on its legislative agenda before a joint hearing of SVAC and HVAC.
- September 23. SVAC Oversight Hearing: "VA Disability Compensation: Presumptive Disability Decision-Making."
- September 23. HVAC, Subcommittee on Health, will conduct a hearing on "VHA Contracting and Procurement Practices."
- September 29. HVAC, Subcommittee on Health will hold a hearing on pending legislation.

[TREA Washington Update 20 Aug 2010 ++]



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**Vet Insurance ~ Life Update 04:** There has been a controversy swirling around how SGLI policies are being paid out. Servicemembers' Group Life Insurance (SGLI) and Veterans' Group Life Insurance (VGLI) are both underwritten by Prudential Life Insurance. They cover both active duty deaths as well as the veterans' life insurance policy. As first reported the method of payment sounded as if this was unique to military policies and a disadvantage to those who have lost so much on behalf of our country and who we must protect. It is now clear to The Retired Enlisted Association (TREA) that this is standard operating procedure throughout the entire insurance business. It is done for all civilian insurance policies. However, the question still existed as to whether or not this was fair for everyone. There was concern that the interest Prudential was paying was not equivalent to what the beneficiary could receive with other institutions and that the money not was insured by the FDIC. After researching the issue at length and having three meetings with representatives of Prudential (the first an individual meeting and then two more in groups) it does NOT look like this method is a serious or systemic problem. It often seems like a real benefit to the beneficiary.

For the last 11+ years all SGLI payouts have been made through an "Alliance Account" which is a retained asset account. The beneficiary is notified that Prudential has opened an account with the full amount of the policy payout + interest earned in his or her name. The beneficiary is sent a checkbook from which he or she can immediately withdraw all or any part of the funds. The checks are really drafts, not checks, but anyone who uses checks from a Credit Union or a Money Market Fund is also using drafts not checks. The business community is used to dealing with them. There is also free financial counseling available for anyone trying to decide how to handle their money. The beneficiary can call FinancialPoint at 1(888) 243-7351 or e-mail them at [fcs@financialpoint.com](mailto:fcs@financialpoint.com). This is a very good service especially for widows or widowers who know very little about financial planning and are making very important decisions at a terribly upsetting time. Unfortunately, presently only 9% of beneficiaries take advantage of this useful service for which no service fee is assessed.

The retained asset account immediately earns interest There are no monthly administration fees for the account.. For the second quarter of 2010 it earned 0.5% which is very low but is much higher than what is being earned at Money Market or interest earning checking accounts or other "daily access accounts". It is presently earning more than 1 year Treasury Bills. An advantage of this type of account is that the money can be withdrawn immediately and at any moment that the beneficiary wants it. Although not covered by the FDIC accounts are covered by State Life and Health Insurance Guaranty Associations. If an insurance company like Prudential was liquidated the State Associations cover at least \$250,000 like FDIC. At present 49 states cover at least \$300,000 and some go up to \$500,000 of coverage. Often when beneficiaries lose loved ones they don't know what to do with money coming into their house and so they do nothing. A check just sits, can be misplaced or lost, and draws no interest. Since this procedure immediately starts to draw interest, can be taken out in full at any time and seems to be well protected from loss, this seems to be a good procedure. Approximately 84,000 drafts were cleared last year. About 30 drafts a year are refused for non-matching signatures. The VA sent a letter out this month to all holders of these Alliance Accounts to see if there were many problems. The VA has had very little response. So it seems that the Prudential's retained asset account system on the whole is working well. [Source: TREA Washington Update 20 Sep 2010 ++]

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**Vet Insurance ~ Life Update 05:** Lawmakers from both sides of the aisle are putting Prudential Financial under the congressional microscope for the company's policy of placing the death benefit payments of fallen troops and veterans into interest-earning accounts instead of immediately turning the money over to the deceased's next-of-kin. A "ton of documents" was turned over to the House Committee on Government Oversight on 23 AUG as part of its investigation and the ranking member of the Senate Banking, Housing and Urban Affairs Committee has called for hearings next month to investigate the practice. The documents turned over to the House oversight committee were requested by committee Chairman Rep. Edolphus Towns (D-NY) in an 10 AUG letter to Prudential. Requested documents include copies of standard Servicemembers Group Life Insurance and Veterans Group Life Insurance policies and of all materials sent to the deceased's next-of-kin.



In his letter to Prudential, Towns said he was "concerned that some beneficiaries of active duty service members and veterans life insurance may not fully understand their right to obtain immediate, lump-sum payment of their benefits. Moreover, these retained asset accounts are essentially low interest bank accounts that, unlike bank deposits, are not insured by the Federal Deposit Insurance Corporation, although they may be protected by state insurance guaranty funds." Towns also pointed out the company's policy of paying the beneficiary 0.5 percent on investment earnings while keeping more than 4 percent. Depending on what investigators find among the documents, Towns could call for hearings into the retained asset accounts next month. The Senate is already headed that way. Sen. Richard Shelby (R-AL), the ranking member of the Senate banking committee, said he will hold a hearing when Congress returns from its August break in September. In a letter to committee Chairman Sen. Chris Dodd, D-Conn., Shelby said he was concerned over media reports suggesting that insurance companies may be unjustly profiting through retained asset accounts. He noted the claim that the accounts allow insurance companies to earn interest on the proceeds from the accounts -- which the insurers invest -- at a higher rate than they pay to the beneficiaries.

Prudential concedes that it earns more on the investments it makes using the accounts than the survivor owner of the account. Prudential earns 4.5 percent while the survivor earns 0.5 percent. Prudential spokesman Bob DeFillippo said that the retained asset accounts are no different in this way than any bank savings account. In these, too, he said, the account owner receives a smaller percentage in interest on the money than the bank, which is investing it. "It shouldn't come as a surprise to anyone that the way we're able to provide interest to the family is to invest it," he said. "We provide a fairly competitive interest [rate] to beneficiaries." He also said the beneficiaries can take out the entire amount of the death benefit immediately. "If you write a check for the entire amount to yourself and go to your bank, you have taken all the money from the death benefit and it's yours," he said. "Also, the idea that it's not your money when it's in the [retained asset] account is wrong. It is yours." In a 29 JUL press release, meanwhile, Prudential acknowledged that the retained asset accounts are not FDIC insured, but said the funds are covered by state guaranty funds "of at least \$250,000 in most states." Unless a service member opts to reduce the amount, however, he is automatically insured under SGLI for \$400,000. [Source: Military.com Bryant Jordon article 26 Aug 2010 ++]

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**Retiree Seminar Schedule:** Retiree seminars are periodically scheduled at military and civilian facilities throughout the U.S. and around the world. The following seminars are currently scheduled for 2010 with DFAS Retired and Annuity Pay participation. Representatives will be on hand to provide information and answer questions regarding military retirement pay and annuities.. Contact the RSO or RAO serving your area for more information on seminar details.

- | <u>Date</u>        | <u>Location</u>       | <u>Point of Contact</u> |
|--------------------|-----------------------|-------------------------|
| JUL 17, 2010       | USAG Humphreys, Korea |                         |
| JUL 31, 2010       | N. New England        | 207-921-2609            |
| AUG 19, 2010       | Des Moines, IA        | 515-283-7013            |
| AUG 27, 2010       | Rosemount, MN         | 763-566-2219            |
| AUG 28, 2010       | Camp Ripley, MN       | 763-441-2630            |
| SEP 1 & 2, 2010    | 29 Palms, CA          | 760-830-8456            |
| SEP 10, 2010       | Twin Ports/Duluth, MN | 218-722-0071            |
| SEP 10, 2010       | Fort McCoy, WS        | 608-388-3716            |
| SEP 11, 2010       | Fort Drum, NY         | 315-772-6434            |
| SEP 11, 2010       | Fort Leonard Wood, MO | 573-596-0131            |
| SEP 16 to 18, 2010 | Fort Sill, OK         | 580-442-2645            |
| SEP 18, 2010       | NAS Lemoore, CA       | 559-998-4038            |
| SEP 18, 2010       | Selfridge ANGB, MI    | 586-239-5580            |
| SEP 18, 2010       | Fort Bragg, NC        | 910-396-8591            |
| SEP 25, 2010       | NAS Willow Grove, PA  |                         |

- OCT 1, 2010 Fort Meade, MD 301-677-9603
- OCT 1 & 2, 2010 Redstone Arsenal, AL 256-876-2022
- OCT 2, 2010 Fort Hamilton, NY 718-630-4552
- OCT 14, 2010 Fort Monroe, VA 757-788-2093
- OCT 15, 2010 Mannheim, Germany DSN: 379-6029
- OCT 16, 2010 NAS Pensacola, FL 850-452-5990
- OCT 16, 2010 Fort Monmouth, NJ 732-532-4673
- OCT 16, 2010 Fort Carson, CO 719-667-5222
- OCT 16, 2010 Kaiserslautern, Germany DSN: 379-6029
- OCT 16, 2010 Baumholder, Germany DSN: 379-6029
- OCT 20, 2010 Spangdahlem AB, Germany DSN: 379-6029
- OCT 21, 2010 Schinnen, Germany DSN: 379-6029
- OCT 22, 2010 Grafenwohr, Germany DSN: 379-6029
- OCT 23, 2010 Schweinfurt, Germany DSN: 379-6029
- OCT 25, 2010 Ramstein AB, Germany DSN: 379-6029
- OCT 26, 2010 Wiesbaden, Germany DSN: 379-6029
- OCT 28, 2010 Vincenza, Italy DSN: 379-6029
- OCT 30, 2010 Benelux, Belgium DSN: 379-6029
- OCT 30, 2010 Fort Leavenworth, KS 913-684-2425
- OCT 30, 2010 Rock Island, IL 563-322-4823
- OCT 30, 2010 Fort Hood, TX 254-287-5210
- OCT 30, 2010 Fort Campbell, KY 270-798-5280
- NOV 6, 2010 NAS San Diego, CA 619-556-7412
- NOV 6, 2010 NAS Norfolk, VA 757-322-9105
- NOV 6, 2010 Fort Huachuca, AZ 520-533-5733
- NOV 10, 2010 Fort Detrick, MD 301-619-9948

[Source: DFAS Newsletter Aug 2010 ++]

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**ALS Update 09:** Researchers with the Department of Veterans Affairs (VA) and the Center for the Study of Traumatic Encephalopathy (CSTE) at Boston University School of Medicine have provided the first pathological evidence of a link between repeated head injuries—such as those experienced by athletes in contact sports such as boxing, football, and hockey—and a disease (chronic traumatic Encephalomyopathy) that resembles amyotrophic lateral sclerosis (ALS), also known as Lou Gehrig’s disease. The results will appear in the September issue of the Journal of Neuropathology and Experimental Neurology. “This initial research shows great promise for further understanding what people go through after a traumatic brain injury, whether sustained on the battlefield, during a contact sport, or from other injury,” said Secretary of Veterans Affairs Eric Shinseki. “Advancing our knowledge in this area is the key to better treatment outcomes.” The brain has long kept scientists baffled, as its elaborate structure makes it uniquely difficult to study. Brain biopsies are too risky as general practice, and diagnostic images often fall short of providing the desired details for full understanding of brain function. So, neurology researchers rely heavily on brain banks, including some housed at the Bedford (Mass.) VA Medical Center, for collecting clues about the biological nature of brain-related medical conditions.

For the new study, Dr. Ann McKee and colleagues at the CSTE examined the brains and spinal cords of 12 athletes donated by family members to the CSTE Brain Bank at the Bedford VA Medical Center. The researchers found that all 12 athletes showed evidence of chronic traumatic encephalopathy (CTE), a progressive neurodegenerative disease caused by repetitive trauma to the brain. The condition can result in large accumulations of tau proteins, killing cells in regions of the brain responsible for mood and emotions. In addition to CTE, three of the athletes had been afflicted by motor neuron disease, with severe and progressive muscle weakness and

deterioration for several years before their death. The brains from patients with CTE and motor neuron disease showed a unique pattern of tau and deposits of another protein, TDP-43, in the spinal cord and brain. The pattern was different from that found in the most common form of ALS. Previous epidemiological studies have suggested a possible link between repetitive head trauma experienced by athletes and combat veterans and the development of motor neuron diseases such as ALS.

McKee said, "This is the first pathological evidence that repetitive head trauma might be associated with the development of an ALS-like disease," said . "Although much more work is necessary to completely understand this association, if repetitive head trauma can trigger this kind of neurodegeneration, then by studying the effects of repetitive mild brain trauma, we can learn about the early triggers of ALS and how to slow, reduce and reverse them. Future work based on these observations offers a significant opportunity to develop treatments to benefit Veterans and all Americans well into the future." McKee and her colleagues are also studying whether military troops with traumatic brain injury from blasts or other exposures on the battlefield experience the same types of effects. "We can't treat what we don't understand," says McKee. "The idea with these brain banks is to learn as much as possible about brain diseases, including their origins and any environmental or genetic triggers." McKee is director of neuropathology at the Bedford (Mass.) VA Medical Center, where this research was conducted. She is also director of the Bedford-based VA brain banks, and CSTE co-director, as well as an associate professor of neuropathology and neurology at Boston University School of Medicine.

ALS affects about 30,000 people in the United States. It is relentlessly progressive and is nearly always fatal. The disease causes degeneration of nerve cells in the brain and spinal cord that leads to muscle weakness, muscle atrophy, and spontaneous muscle activity. The cause of ALS is unknown and there is no effective treatment. In 2008, VA established ALS as a presumptive compensable illness for all Veterans with 90 days or more of continuously active service in the military. [Source: VA News Release 19 Aug 2010 ++]

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**Agent Orange Stateside Use Update 03:** Sen. Benjamin L. Cardin (D-MD) sent a letter to the Department of Defense 16 AUG asking the agency to look into contamination at Fort Detrick and devise a plan by 1 DEC to remedy the situation. "This is an important step in getting the facility cleaned up," said Susan Sullam, a spokeswoman for the Maryland Democrat. "This is nothing new. This has been in the works for some time. Fort Detrick is on the Superfund list." Superfund is the federal program to clean up hazardous waste sites. From 1943 through 1969, Fort Detrick was the leading site for biological warfare research. Cardin urged Assistant Army Secretary Katherine Hammack to commit to his 1 DEC deadline to have the plan ready. "There was not a deadline and the senator feels there should be a deadline," Sullam said. "It's a legally enforceable agreement, and a deadline needs to be in place." Some residents who live near Fort Detrick fear that Agent Orange and other chemicals are leaching into the ground, contaminating local wells and water supplies.

Cardin, who once asked for a deadline for a languishing investigation at Fort Meade, wrote: "With recent concerns raised about the experimental use of Agent Orange at the Fort decades ago, base command at Fort Detrick has indicated that it intends to conduct additional comprehensive research into historical uses of the facility and the potential for other legacy pollutants. I urge the Army to conduct this work with all deliberate speed." He also asked that the Army commit to being transparent with surrounding communities and to expand its plan for public participation and information. Agent Orange, a defoliant used in the Vietnam War, has been associated with nervous system problems, certain types of leukemia, diabetes, Hodgkin's disease, multiple myeloma, non-Hodgkin's lymphoma and prostate cancer, among other health problems. Six landfill sites on Area B at Fort Detrick were capped in 2009. This area was used to store chemical, biological and radiological material in the 1950s and 1960s. Chuck Gordon, spokesman for Fort Detrick, said in an e-mail that the final remedial investigation report for Area B is 18 months to two years off. The Federal Facilities Agreement, which Cardin has asked for, is expected to be issued by the end of this year. "We're responding to our regulatory partners," Gordon said. That includes EPA and the Department of the Army. [Source: Frederick News-Post Karen Gardner article 17 AUG 2010 ++]

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**Wisconsin Veterans Homes Update 03:** A report from the Legislative Audit Bureau highlights the rising cost for veterans to live in state veteran's homes. The report says that at least a dozen veterans and spouses moved out of facilities in Union Grove and King because of the rising costs. Jim Fonte, a 9 year resident who currently lives at the Union Grove home said, "...this is terrible because I just don't have enough money." Fonte explained that many veterans now have to pull money out of savings to cover the difference between Social Security payments and their cost of living at the home. For veterans who do not want to deplete their savings, or do not have savings and cannot find another source of funding, the only choice is to move out. "The original purpose was to give something to take care of the veterans at a reduced rate," said Bob Lindmark, who moved out of the Union Grove veteran's home last month. He said his rates went up 82%. In a statement, the Wisconsin Department of Veterans Affairs defended the increase. Their spokesman said in a statement, "These rate increases were absolutely necessary and overdue, and that we took the difficult step of raising rates in a way that was as protective as possible of our members." [Source: Milwaukee TMJ-4 Mick Trevey article 17 Aug 2010 ++]

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#### HVAC GWI Findings

**Gulf War Syndrome Update 12:** On 27 JUL 2010, Subcommittee Chairman Harry Mitchell (D-AZ) conducted the third hearing in a series of Oversight and Investigations hearings focused on Gulf War Illness (GWI). The final in the series was intended to gauge the outlook going forward for veterans suffering from GWI, specifically examining how the Department of Veterans Affairs (VA) administers healthcare and benefits to this group of veterans. The first hearing focused on Vietnam-era veterans and their struggle for healthcare and benefits for service-related maladies, often related to Agent Orange. The second thoroughly reviewed the existing scientific evidence related to GWI. Both hearings found that veterans are suffering from acute and chronic symptoms attributed to their military service and experience barriers to care and services from the VA. "Next month will mark the 20th Anniversary since the United States deployed almost 700,000 troops to the Persian Gulf," said Chairman Mitchell. "With a growing number of these veterans developing undiagnosed and multi-symptom illnesses, they have looked to the people who promised them the care worthy of their sacrifices when they returned home. Still to this day, many of our Gulf War Veterans have yet to see this care and are finding themselves fighting the VA for service connected compensation."

An Advisory Committee on Gulf War Veterans was established by Secretary Peake in APR 08 and the committee submitted a report on 29 SEP 09. Advisory Committee Chairman Charles Cragin discussed the findings of the Advisory Committee Report which specifically analyzed access issues for veterans suffering from GWI, difficulty in diagnosing GWI, and the lack of data on Gulf War veterans. He said: "In general, the Committee's findings are summed up in the title of its report: Changing the Culture: Placing Care Before Process. This was a resounding theme, pockets of people trying to do their best, stymied by process or lack of vital information. Many of those who came to VA in the early days after Gulf War I were turned away. In many cases, health care professionals were not able to connect the symptoms experienced by these Veterans to defined or known illnesses. Consequently, Veterans were not able to access medical care and treatment and their claims for service-connected disabilities were often denied. The process served as an impeding wall preventing Veterans who were hurting from getting over the wall to take advantage of the care they needed and deserved. Consider for a moment that all of the fine men and women were considered in excellent health and "deployable" when they went to war. In many instances, shortly after their return home, these Veterans began complaining of feeling ill and seeking help. Many were turned away as 'malingerers' or having a 'psychosomatic illness.' Why did a department of government designed to care for Veterans not identify that something was happening to men and women who had recently been healthy who now were sick, the common denominator being that they had deployed in Gulf War I?"

In AUG 09, Secretary Shinseki called for a comprehensive review of the VA's approach in meeting the needs of Gulf War Veterans and established a Gulf War Task Force chaired by VA Chief of Staff John Gingrich. On 29 MAR 2010, the Department of Veterans Affairs released its final draft of the Gulf War Veterans' Illnesses Task Force (GWVITF) report, which identified seven areas where the VA can improve. The intended outcome of the task force is a set of action plans to ensure the needs of Gulf War veterans are met and improve their level of satisfaction with VA services. In his testimony, Mr. Gingrich assured Subcommittee Members that the recommendations of the Advisory Committee Report would be incorporated into the efforts of the task force. Bob Filner (D-CA), Chair of the House Committee on Veterans' Affairs, said, "We hear from veterans and it is evident from this hearing that

significant issues remain with the culture at the VA regarding Gulf War veterans. VA needs to take actions to begin to implement a comprehensive plan to provide answers to our Gulf War veterans, train VA medical providers, renew research efforts, and build up the data on this population of veterans. Without a unified central VA effort to provide appropriate care to this population, these veterans and their families will have to wait that much longer and grow that much sicker.” [Source: House Committee on Veterans Affairs Press Release 27 Jul 2010 ++]

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**Military Funeral Disorderly Conduct Update 13:** A federal judge has ruled Missouri’s ban restricting protests at funerals to be unconstitutional. The 16 AUG ruling affects restrictions targeting a Kansas church whose members have picketed outside the funerals of people killed during the Iraq war. A church leader filed a lawsuit challenging the law. Missouri’s law bars protests near any funeral, procession or memorial service from an hour before until an hour after the service. A complementary law specifically states that protesters must stay back at least 300 feet. But Judge Fernando Gaitan ruled that the Missouri law infringes on free speech rights. [Source: Boston-Herald AP article 17 Aug 2010 ++]

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**U.S. Savings Bonds Update 07:** The Department of the Treasury has changed its policy concerning the issuance of paper savings bonds through payroll savings plans. After 30 SEP 2010, the U.S. Treasury will no longer issue paper savings bonds to federal employees through payroll deduction. In anticipation of this change, DFAS discontinued bond allotments 31 JUL 2010. However, you can still purchase savings bonds and other Treasury securities through a deduction from your retired pay by creating a TreasuryDirect account. TreasuryDirect is a secure and reliable on-line system that allows you to purchase Series EE and I savings bonds, Treasury bills, notes, bonds and Treasury Inflation-Protected Securities (TIPS). To continue your payroll deduction, you must open a TreasuryDirect account by visiting [www.treasurydirect.gov](http://www.treasurydirect.gov). On the TreasuryDirect home page, click "TreasuryDirect" under the "Open an Account" menu on the right side of the page. After following the instructions, you will obtain a unique account number that you can use to review the Treasury securities available for purchase.

Once your account is created, you can inform DFAS to establish your TreasuryDirect deduction. Be sure to indicate that you want to start a TreasuryDirect allotment, the monthly amount you would like us to deduct from your retired pay, the month in which you would like us to start your allotment and your Social Security Number. Mail your request to: DFAS U.S. Retired Military Pay, P.O. Box 7130, London, KY 40742-7130. You may also call the Retired and Annuity Pay Contact Center at 1(800) 321-1080. There are several advantages to the TreasuryDirect deduction over the previous paper savings bond deduction plan, such as the ability to monitor your account activity on-line. If however you prefer not to use TreasuryDirect, paper bonds are available for purchase through participating financial institutions. Bonds that DFAS is currently holding for safekeeping for customers are already in an electronic format and will not be affected by this change. The Treasury expects to save \$400 million in taxpayer money and cut the use of 12 million pounds of paper over the first five years the change is in effect. [Source: DFAS Newsletter Aug 2010 ++]

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**Voluntary Separation Incentive Update 03:** Recoupment of military retirees' Voluntary Separation Incentive (VSI), Special Separation Benefit and other separation payments resumed AUG 2010. Retirees affected by this recoupment recently received notification letters detailing their repayment plans. Because federal law prohibits military members from receiving both separation and retirement payments for the same period of service, DFAS is required by law to recoup these payments. DFAS cannot waive them. However, if you believe this recoupment will cause you financial hardship, you may request a more lenient repayment plan by completing the Financial Statement of Debtor form enclosed with the notification letter and returning it to the following address: DFAS U.S. Military Retired Pay, P.O. Box 7130, London, KY 40742-7130. If you would like to accelerate your repayment plan, call the DFAS Customer Contact Center at 1(800) 321-1080. This monthly recoupment may also impact former spouses who receive Uniformed Services Former Spouse Protection Act payments from such retirees. Former spouses affected by this recoupment also received notification letters. For more information refer to



[www.dfas.mil/rapay/rafaqs/separationrecoupmentfaqs.html](http://www.dfas.mil/rapay/rafaqs/separationrecoupmentfaqs.html) or call Retired and Annuitant Pay Customer Service at 1(800) 321-1080. [Source: DFAS Newsletter Aug 2010 ++]

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**CRDP Update 47:** Beginning with the 1 JUN 2010 paycheck, Concurrent Retirement Disability Pay (CRDP) was rounded down to the nearest dollar amount, rather than paid to the exact penny. This change is being applied to all future payments including any future retroactive computations. Because this change represents less than one dollar per month, DFAS will not attempt to recoup previous payments that were not rounded down. The law requires that all amounts computed under Chapter 71 of Title 10, including CRDP, be rounded to the next lower multiple of \$1. However, a recent review showed that CRDP was being paid to the exact penny. This change is being made to adhere to the legal requirements for the entitlement. [Source: DFAS Newsletter Aug 2010 ++]

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**Tricare User Fee Update 52:** Defense Secretary Robert Gates has signaled that the department's fiscal 2012 budget request to be sent to Congress early next year will include recommendations to raise TRICARE premiums for some beneficiaries. If past proposals are a reliable guide, the target of higher fees is likely to be military retirees rather than active duty families. The Bush administration tried for three straight years to raise fees for working age retirees. Congress blocked those efforts. Defense officials hope lawmakers, facing with mounting federal debt and tightening defense budgets, will be more receptive to the argument that TRICARE fees haven't been raised since they were set in 1995. During a Pentagon press conference where he unveiled a host of initiatives to cut overhead in defense budgets, including shutting down the Joint Forces Command, Gates said proposals to control burgeoning health care costs will be unveiled in the months ahead.

"Health-care reform is on my agenda," Gates said. It will be part of a new track of cost-cutting reforms identified by the Quadrennial Defense Review and endorsed by other reports for curbing defense spending. There are no sacred cows, and health care cannot be excepted from cost-control plans, not to lower overall defense budgets but to free up funds for more pressing defense needs. Everybody knows that we're being eaten alive by health care. I believe there is a growing understanding on [Capitol] Hill about this. It cost us \$19 billion in 2000 or 2001. It'll cost us over \$50 billion in FY '11, and will cost us about \$65 billion in FY '15. And particularly when the top line [of defense budgets] is only growing at a percent or thereabouts, it's unsustainable and therefore it has to be a part of our effort.

Dr. Jonathan Woodson, nominated to take charge of health care policy as the new assistant secretary of defense for health affairs, stayed mum on the hot-button issue of higher TRICARE fees during his 3 AUG confirmation hearing before the Senate Armed Services Committee. Asked by Committee Chairman Carl Levin (D-MI) how he would address rising health costs, Woodson said, "What we need to do is work with a number of constituents and try to stem the rise of that cost. He referred to more cost-efficient therapies and addressing waste in the way we deliver care because of the culture of medicine. And there's opportunity to decrease the variability of care that might result in cost savings. Sen. John McCain, ranking committee Republican, said, "Woodson's major challenge will be getting costs under control." McCain questioned whether he can do it, given the steady rise of national health costs. Woodson, an Army Reserve brigadier general and vascular surgeon who has deployed in most every recent conflict, is Army assistant surgeon general for force management, mobilization, readiness and reserve affairs. In his written responses for the committee, Woodson said retirees and their families are 53% of all TRICARE beneficiaries and account for 57% of the DoD health care budget. [Source: Military.com Tom Philpott article 16 Aug 2010 ++]

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**AAFES Duplicate Charges:** Customers who have shopped at an Army and Air Force Exchange store 7 to 9 AUG 2010 should make sure to check their statements for any duplicate charges caused by a processing error. The error has resulted in numerous charges to customer's credit cards. Army Col. Virgil Williams, AAFES chief of staff said, "If a customer finds a billing anomaly, no action will be required on their part, as we're working to correct inaccuracies on their behalf. We're putting all the resources we have towards doing the right thing for customers affected by this unfortunate turn of events. If there is an overdraft fee as result of a duplicate charge, we're going to



fix it. Our priority is to take corrective action as quickly as possible and return customers' accounts to the exact state they were prior to this glitch." The processing error that produced duplicate charges affected AAFES locations worldwide. Depending on the type of card used, officials said, corrective action could be visible to the customer anywhere from 24 hours to a couple of weeks. "The timeline is subject to a number of variables," Williams said. "Regardless, we want exchange shoppers to know that every possible measure is being taken to eliminate any additional charges and rectify any concerns created as a result of this processing miscue." [Source: AF Print news today 13 Aug 2010 ++]

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**VA Home Loan Update 19:** A Certificate of Eligibility (COE) is one of the first important steps in the VA loan process. The COE contains the following information about each potential VA borrower: Name; Service Number; Social Security Number; Entitlement Code; Branch of Service; Prior VA Loan Status; Basic Entitlement Availability; and Total Entitlement Charged to Previous Loans. A COE can be obtained using one of the following methods:

- **Lenders** - Online instantly for most VA-eligible borrowers. Through a system called webLGY, lenders can access a program called ACE that enables printing of a borrower's COE on the spot. Lenders only need a name and social security number. As long as the veteran is in the system, this is the quickest way to obtain a COE.
- **Borrowers** - Online with a recent upgrade to the VA system using the Veterans Information Portal (VIP) at <https://vip.vba.va.gov/portal/VBAH/Home>. Once a military member is registered to use the system, then a COE can be viewed and printed instantly. Members are also able to update or correct their information pertaining to COE and apply for restoration of entitlement.
- **Electronic Application** - If a military member attempts to obtain a COE online and receives a message indicating that the VA is unable to do so, then the member will be directed to an electronic application that can be filled out and submitted online. This option is still quicker than printing and filling out VA form 26-1880 (Request for COE) and submitting by U.S. Mail.

Knowing what to look for on the COE is half the challenge in understanding how to read one. For many borrowers, it can be advantageous to have a seasoned VA loan professional review a COE. A very common mistake made by inexperienced loan officers is to assume "zero basic entitlement" which means the borrower cannot get a VA home loan. In fact, additional entitlement, which does not directly appear on a COE, must be calculated using the basic entitlement and total entitlement charged to previous loans. Only then will a lender know whether a borrower has enough entitlement to qualify for a VA loan. For more information about obtaining contact a VA home loan professional at [www.directvaloans.com/?s=8&sr=77](http://www.directvaloans.com/?s=8&sr=77). [Source: Military.com | Home Buying 17 Aug 2010 ++]

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**VA Home Loan Update 20:** Mortgage loans guaranteed by the Department of Veterans Affairs (VA) continue to have the lowest rate for serious delinquency and foreclosures in the industry. There are currently about 1.3 million active home loans that have been obtained using VA's Home Loan Guaranty Program. The program makes home ownership more affordable for Veterans, active-duty service members, and eligible surviving spouses by permitting low or no down payment loans and by protecting lenders from loss if the borrower fails to repay the loan. According to the Mortgage Bankers Association National Delinquency Survey, VA's foreclosure rate for the last eight quarters and serious delinquency rate for the last five consecutive quarters have been the lowest of all measured loan types, even prime loans. Much of the program's strength stems from the efforts of VA employees and loan servicers nationwide, whose primary mission is to ensure all Veterans receive every possible opportunity to remain in their homes, avoid foreclosure, and protect their credit from the consequences of a foreclosure. Depending on the situation, VA's loan specialists can intervene on a Veteran's behalf to help pursue home-retention options such as repayment plans, forbearances and loan modifications. When home retention is not an option, sometimes VA can help arrange a sale, or a deed-in-lieu of foreclosure, both of which are better options for Veteran borrowers than foreclosure. Since 1944, when home-loan guaranties were first offered under the original GI Bill, VA has guaranteed more than 18.8 million home loans worth \$1.06 trillion. To obtain more information about the VA Home

Loan Guaranty Program, Veterans can call VA at 1(877) 827-3702. Information can also be obtained online at <http://www.homeloans.va.gov>. [Source: VA News Release 19 Aug 2010 ++]

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**VA Home Loan Update 21:** Veterans in the Gulf States impacted by the recent oil spill may qualify for delayed mortgage payments if their mortgages are already guaranteed by the Department of Veterans Affairs (VA). "We are strongly urging mortgage companies to extend every possible forbearance to Veterans whose livelihoods have been affected by the oil spill crisis," said Secretary of Veterans Affairs Eric K. Shinseki. Shinseki noted that several mortgage companies have already announced plans to waive late payment charges and suspend negative reporting to credit bureaus on affected borrowers. VA is asking all mortgage companies to follow this example. "Through no fault of their own, many of our Veterans are out of work and are struggling to earn an income," the Secretary added. "We must assist these Veterans in this difficult time, just as they have supported us in their sacrifice to the Nation." VA has information on its website, [www.homeloans.va.gov](http://www.homeloans.va.gov) that provides basic guidance for Veterans affected by a major disaster. Veterans in need of mortgage counseling may also contact their nearest VA regional loan center at 1(877) 827-3702 for help and information, regardless of whether or not they have a VA home loan. [Source: VA News Release 20 Aug 2010 ++]

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**VA Overpayment Recoupment:** Many of the veterans who have been exposed to VA's recoupment process for overpayments are not happy with the experience. VA overpayments result from administrative errors beyond your control, repayment of emergency cash advancements such as the recent \$3K Emergency Advance to vets using the GI Bill, benefits paid after the date of death of a veteran, and computer errors/glitches. Regardless of the reason VA is required by law to recoup any funds they paid out that a veteran or beneficiary was not entitled to. To avoid complications and resolve issues more quickly the following 'lessons learned' are provided:

1. Never take an advance if you are not able to endure the hardship caused when the VA computers take too much back later. Many found out the hard way that VA recoupment systems don't always get it right. Request to have specified amounts withheld from monthly benefits until the amount owed is repaid often result in having the entire monthly benefits withheld.
2. Never send a "Notice of Disagreement" letter if you have pending claims in the VA system. By policy all pending claims are held until the NOD is fully addressed. This means any VA claims, even a re-enrollment for the next semester or a pending Disability Compensation claim may be put on hold.
3. Always send a letter requesting a waiver before sending a NOD. Waivers are faster and easier to process and they don't lock up any pending VA claims.
4. Trust but verify. Check-in with the VA Debt Management Center regularly for updates on your pending claims.
5. Save everything you get in the mail and log your phone conversations.
6. Avoid over reacting to the letters you get from the VA. VA snail mail letters normally lag by at least a week sometimes more.
7. Remain respectful and professional. It is easy to get frustrated by the system, especially if you have to hit redial 20 or more times before you get through. Remember — no good will come from losing your cool — in fact it may slow your claims. Most VA employees genuinely care for the Vets they serve and share our frustrations with the administrative red tape and broken systems.

[Source: Military.com Terry Howell article 17 Aug 2010 ++]

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**VA Data Breaches Update 45:** The Veterans Affairs Department (VA) has started posting monthly data breach reports on the Web as part of the agency's ongoing transparency initiative, according to a report from

Nextgov. The July report shows the department lost two PCs, 13 BlackBerry smart phones and six laptops, all of which were encrypted. The report is available at [www.vawatchdog.org/10/nf10/nfaug10/aug10files/DataBreach072010.pdf](http://www.vawatchdog.org/10/nf10/nfaug10/aug10files/DataBreach072010.pdf) viewing or download but does not appear in the VA website [www4.va.gov/ABOUT\\_VA/](http://www4.va.gov/ABOUT_VA/). The VA has drawn renewed scrutiny of its data security practices after losing two unencrypted laptops in APR 2010 containing the personal information of more than 600 veterans. VA Chief Information Officer Roger Baker has made improving the agency's data security a priority since taking office last year. Baker said the VA has lost 129 BlackBerrys so far this year after losing 189 in all of 2009. VA has about 35,000 of the smart phones in use. The laptop thefts also recalled the MAY 06 incident where a VA employee had a laptop stolen from their home containing data on more than 26 million veterans. The breach prompted an outcry from Congress, a review of VA's data breach procedures, \$28 million in notification costs and \$20 million to settle a class-action lawsuit. [Source: The Hill Gautham Nagesh article 13 Aug 2010 ++]

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**AF Retiree Council Update 02:** The Air Force Retiree Council is looking for volunteers to be considered for representing Air Force retirees in the following areas: Area II California; Area III, Arizona and New Mexico, Area VI, Texas; Area IX, Alabama, Louisiana, Mississippi and Tennessee; and Area XI, Georgia, North Carolina, South Carolina, and Virginia. The Council has 2 Co-Chairmen (one officer and one enlisted AF retirees) 13 members who represent areas within the continental United States, and one representative each from the Pacific and European areas. Presently there are two at-large positions. There are 109 Retiree Activities Offices and each council member oversees the retiree activities programs within his/her respective area of responsibility. The representatives also meet every year at Randolph AFB TX to discuss concerns and needs of the 790,000 Air Force retirees and their families. The council co-chairmen are the Air Force chief of staff's liaison with the retiree community and work directly for the chief. If you are interested the Air Force urges you to contact your nearest Retirees Activities Office. Contact info is available at [www.retirees.af.mil/raos](http://www.retirees.af.mil/raos) . To find out more about the Council refer to <http://www.retirees.af.mil/council/>. [Source: TREA Washington Update 20 Aug 2010 ++]

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**Flag Presentation Update 06:** The United States Flag Code establishes advisory rules for display and care of the flag of the United States. It is Section 1 of Title 4 of the United States Code (4 U.S.C. § 1 et seq). The following guidelines should be followed during periods when the flag is being paraded, the Pledge of Allegiance is given or the national anthem is played, and when the flag is in mourning:

**Parading and saluting the flag**

- When carried in a procession, the flag should be to the right of the marchers.
- When other flags are carried, the flag of the United States may be centered in front of the others or carried to their right. When the flag passes in a procession, or when it is hoisted or lowered, all should face the flag and salute.
- To salute, all persons come to attention.
- Those in uniform give the appropriate formal salute.
- Members of the Armed Forces and veterans who are present but not in uniform may render the military salute.
- Citizens not in uniform salute by placing their right hand over the heart and men with head cover should remove it and hold it to left shoulder, hand over the heart.
- Members of uniformed organizations in formation salute upon command of the person in charge.

**The Pledge of Allegiance.** All present except those in uniform should stand at attention facing the flag with the right hand over the heart;

**National Anthem.** The composition consisting of the words and music known as the Star-Spangled Banner is the national anthem. During a rendition of the national anthem when the flag is displayed:

- All present except those in uniform should stand at attention.

- Men not in uniform should remove their headdress with their right hand and hold the headdress at the left shoulder,
- Members of the Armed Forces and veterans who are present and not in uniform may render the military salute.
- Individuals in uniform should give the military salute at the first note of the anthem and maintain that position until the last note; and

When the flag is not displayed, all present should face toward the music and act in the same manner they would if the flag were displayed.

#### **The flag in mourning**

- To place the flag at half-staff (or half-mast, on ships), hoist it to the peak for an instant and lower it to a position half way between the top and bottom of the staff.
- The flag is to be raised again to the peak for a moment before it is lowered.
- On Memorial Day, the flag is displayed at half-staff until noon and at full staff from noon to sunset.
- The flag is to be flown at half-staff in mourning for the death of designated, principal government leaders.
- The flag is to be flown at half-staff for thirty days in mourning for the death of the current or former President of the United States.
- The U.S. flag is otherwise flown at half-staff (or half-mast, on ships) only when directed by the President of the United States, a state governor (within that state), or the mayor of Washington D.C. (within the district).
- When used to cover a casket or coffin, the flag should be placed with the union at the head and over the left shoulder. It should not be lowered into the grave.
- The U.S. Flag is to be flown half staff on Patriot Day (11 SEP)

[Source: [http://en.wikipedia.org/wiki/United\\_States\\_Flag\\_Code](http://en.wikipedia.org/wiki/United_States_Flag_Code) Jul 2010 ++]

### **Medicare Fraud Update 47:**

- **Miami FL** - Emilio Felipe Lopez, 47, and Orlando Hernandez Estevez, 25, were arrested 17 AUG on two separate indictments charging them with health care fraud, in violation of Title 18, United States Code, Section 1347. Lopez was the president of Charlie RX, Inc., a durable medical equipment operating in Hialeah, Florida. The indictment alleges that Charlie RX submitted \$689,853 in false claims to Medicare for, among other items, male vacuum erection systems. The company received \$370,838 from Medicare based upon its false billings. Estevez was the president of Happy Trips of Miami, Corp., another durable medical equipment operating in Hialeah, Florida. The indictment alleges that Happy Trips submitted \$1,188,956 in false claims to Medicare for inhalation drugs. The company received \$364,120 from Medicare based upon the false billings. An indictment is only an accusation, and a defendant is presumed innocent unless and until proven guilty.
- **Boston MA** - Kingsley Tochukwu Eze, 32, was sentenced 17 AUG to five years in prison and ordered to pay more than \$1.5 million in restitution to Medicare and 14 secondary insurers for Medicare fraud. In addition, Eze will be on supervised release for three years after getting out of prison. Eze, the owner of Kings Enterprise in Quincy, submitted hundreds of false claims for \$1.5 million in durable medical equipment to Medicare between 2006 and 2007. Eze also made a false statement in his Medicare Enrollment Application by omitting the name of an individual who received 75% of the company's gross proceeds.
- **Mitchell SD** - Kim M. Reid, 54, accused of making \$115,000 in fraudulent Medicaid claims pleaded guilty 17 AUG to one count of felony Medicaid fraud. He then paid \$60,000 of the amount he owed. Reid submitted false claims for reimbursement between January 2009 and March 12. Reid, former coowner and executive director of LifeLight Counseling, was required to include documentation such as progress notes

and treatment plans to the state. However, that documentation such as verification of accurate attendance was not included. If such documentation wasn't present, it was as if the service did not occur. Reid will face up to five years in prison and a \$10,000 fine upon sentencing 9 NOV.

- **Farmington Hills MI** - Dr. Jose Castro-Ramirez was sentenced 18 AUG to 14 years in prison for his role in a wide-ranging conspiracy to defraud the Medicare program. He was also ordered to pay \$9.4 million in restitution and sentenced to a three-year term of supervised release following his prison term. Beginning in 2003 he entered into an agreement with co-conspirator Suresh Chand to defraud the Medicare program. Chand, who was sentenced to 81 months in prison in APR for his role in the scheme, owned and controlled several companies that purported to provide physical and occupational therapy services to Medicare beneficiaries. In reality, Chand and his associates created fictitious therapy files, appearing to document physical and occupational therapy services provided to Medicare beneficiaries, when in fact no such services had been provided. The fictitious services reflected in the files were billed to Medicare through sham Medicare providers controlled by Chand and his co-conspirators. The fictitious therapy files Chand and his co-conspirators created would appear to justify the billings to Medicare, when in fact no physical or occupational therapy services had been provided. To create the fictitious therapy files, Chand and his co-conspirators paid cash kickbacks and other inducements to Medicare beneficiaries, in exchange for the beneficiaries' Medicare numbers and signatures on documents falsely indicating that they had received therapy services. Chand also would pay licensed physical and occupational therapists to sign fictitious "progress notes" and other documents that appeared to reflect that physical and occupational therapy services had been provided to the beneficiaries, when in fact they had not. Castro-Ramirez, as the physician participant in the scheme, would sign therapy prescriptions and other documents in the fictitious therapy files falsely indicating that he had evaluated the Medicare beneficiaries and certified the need for physical and occupational therapy services. In fact, he did not oversee any treatment provided to the patients. Between approximately JAN 03 and JUN 07 Chand and his co-conspirators submitted claims to the Medicare program totaling approximately \$18.3 million for physical and occupational therapy services that were supposedly ordered and supervised by Castro-Ramirez but were in fact never rendered. Medicare actually paid approximately \$8.5 million on those claims. In addition, Castro-Ramirez submitted approximately \$1.4 million in claims to the Medicare program for "home visits" purportedly provided to beneficiaries recruited into the scheme by Chand and his co-conspirators. Medicare actually paid approximately \$929,000 on those claims.
- **Sugar Land TX** - Aghaegbuna "Ike" Odelugo, 38, has been convicted of conspiracy to commit health care fraud, health care fraud and money laundering. Charged in APR 2010, Odelugo pleaded guilty to each of the three federal counts 23 AUG admitting that between JUL 05 and MAR 08 he entered into agreements with 14 durable medical equipment company owners to fraudulently bill Medicare for millions of dollars and split the proceeds. Odelugo was responsible for having marketers recruit the patients, preparing the paperwork, billing Medicare and delivering the equipment. The DME company owner's role was to accept delivery of the patient files from Odelugo and to send him his percentage of the proceeds. Odelugo bought Medicare beneficiary information from recruiters and created paperwork and patient files to give the appearance of a valid claim. He filed the claim electronically with Medicare or Medicaid and sent the patient files to the DME company owners. The proceeds from the false claims were deposited into the DME Company's bank account. As much as 75% of the fraud proceeds then were transferred to Odelugo. The total amount paid by Medicare as a result of Odelugo's scheme was approximately \$9,933,354.27. He received 75% of the illegal proceeds or approximately \$7,450,015.50.
- **Miami FL** - Jhon Barcelo, 30, was convicted 24 AUG on one count of conspiracy to commit health care fraud and two counts of aggravated identity theft, in violation of Title 18, United States Code, Sections 1349 Section 1028A(a)(1). He was sentenced Barcelo to 14 years in prison, to be followed by three years of supervised release. In addition, he was ordered to pay \$13,352,101 in restitution. Barcelo operated a scheme to defraud Medicare wherein he and others purchased pharmacies in the names of others, called

nominees, and then submitted millions of dollars in false claims to Medicare. They paid the nominees for allowing the use of their names. In return, the nominees agreed that they would leave the country to avoid detection by law enforcement. According to the statement of facts filed with the court, corporate documents and bank accounts listed the nominees as the owners, when, in fact, the defendant and his co-defendant were the true owners of the pharmacies and bank accounts. The pharmacies were used to submit false claims to Medicare. In total, he caused the submission of approximately \$42,746,689 in fraudulent claims to Medicare, on which Medicare paid \$13,352,101.

- **Detroit MI** - Juan De Oleo, and a doctor who helped falsify files at his clinic, Dr. Rosa Genao, were convicted 30 AUG for their roles in a \$2.3 million Medicare fraud scheme. Juan De Oleo owned a company called Xpress Center, Inc. (XPC), which was based in Livonia, Mich. Evidence showed that De Oleo and others established XPC for the sole purpose of defrauding Medicare. XPC was an outpatient clinic that purported to specialize in infusion and injection therapy. De Oleo and his co-conspirators imported the concept of "infusion" clinic fraud from South Florida to Detroit after increased law enforcement scrutiny in Florida. De Oleo enlisted his wife, Dr. Rosa Genao to help falsify medical files at XPC to make it appear that the clinic's patients actually needed the medications being billed to Medicare. Genao wrote down fictitious symptoms in the patient charts maintained by the clinic in order to justify expensive and exotic medications that the clinic billed to Medicare. One of the exotic drugs, called octreotide, is used primarily in the treatment of acromegaly and severe diarrhea, and was billed by the clinic at several thousand dollars per dose. Between NOV 06 and MAR 07 they submitted claims to Medicare for injection therapy services that were never provided and were not medically necessary. Medicare paid approximately \$1.7 million of those claims. Dr. Genao was convicted of one count of conspiracy to commit health care fraud, five counts of health care fraud and one count of destruction or alteration of records. The health care fraud and money laundering counts carry a maximum penalty of 10 years in prison and a \$250,000 fine while the destruction of records count carries a maximum penalty of 20 years in prison and a \$250,000 fine.

[Source: Fraud News Daily reports 16-31 Aug 2010 ++]

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## **Medicad Fraud Update 20:**

- **Albany NY** - New York paid out \$40 million for excessive dental cleanings and examinations over five years, according to an 17 AUG audit report from state Controller. One dental clinic got paid for 79 exams given to one patient over four years, according to the audit. The law allows only eight exams over four years. Other findings included a dentist who billed taxpayers for 18 cleanings for one patient over five years and a patient who received 32 cleanings from 19 separate dentists over three years. The audit also found that the state paid higher rates to dentists for cleanings and examinations than most other states, costing taxpayers as much as \$60 million. The audit reviewed \$418 million in Medicaid dental transactions during a five-year stretch that ended last August. It did not include the names of the dentists or of the patients who received the excessive treatments.
- **Washington County OR** - Rania Hamad, 46, described as the ringleader of a fraud conspiracy that netted nearly \$100,000, as well as her husband, 45-year-old Zack Maysi and her mother, 72-year-old Nahla Awad, plead guilty to first-degree theft and making false claims for health care payments. The three paid \$93,583.96 in restitution at sentencing 17 AUG. An arrest warrant for a fourth defendant, 47-year-old Ahmad Hamad, has been issued; officials said they believe Ahmad Hamad has fled the country. Between 2006 and 2009, Nahla Awad and Ahmad Hamad filed false claims for progressive disabilities so they could qualify for government assistance. Rania Hamad, with her husband's assistance, applied for money through Oregon's Medicaid home care program to care for her brother and mother. Early last year, an anonymous informant called the Oregon Dept. of Human Services to report that Rania Hamad was "scamming the system." An investigation found that Nahla Awad was in Abu Dhabi for 31 of the 48 months of time time



that Rania Hamad claimed she was her caretaker. Ahmad Hamad was also out of the country for six of the nine months his sister was supposedly taking care of him. Zack Maysi and Nahla Awad received probation, and Nahla Awad was also ordered to pay \$8,131 in restitution to the U.S. Social Security Administration. Rania will spend 13 months in prison

- **Montgomery AL** - Elizabeth Corbitt Johnson, 38, was arrested 24 AUG and charged with 419 counts of Medicaid fraud of more than \$609,000. Authorities allege that while working as the manager for Advantage Medical Supply in Troy, she billed the Medicaid Agency 419 times for 11 different types of custom ankle, knee, leg and wrist braces that were never prescribed for nor delivered to 125 Medicaid recipients. Each recipient was billed for a minimum of two braces, with one recipient being billed for 22 different leg braces over a two-year period. Medicaid paid between \$300 and \$1,100 per brace.

[Source: Fraud News Daily reports 16-31 Aug 2010 ++]

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**State Veteran's Benefits:** The state of Colorado provides several benefits to veterans. To obtain information on these refer to this **Bulletin's Attachment** for an overview of those 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/colorado-state-veterans-benefits](http://www.military.com/benefits/veteran-benefits/colorado-state-veterans-benefits) Aug 2010 ++]

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**Military History:** Project Jennifer was a CIA undertaking to raise a Soviet nuclear submarine that had sunk in the Pacific. To accomplish this they contracted the by Sun Shipbuilding and Drydock Co to build the Hughes Glomar Explorer [HGE] in 1973. The Glomar Explorer was then tasked to raise a Soviet Golf II class ballistic missile submarine resting on the ocean floor nearly 17,000 ft. (5,200 m) down. The submarine had sank on 11 APR 68, approximately 750 miles northwest of Hawaii. Naval intelligence at Pearl Harbor had tracked the submarine and learned of its fate through underwater listening devices. After months of futile searching by Soviet vessels, it became apparent that only the US knew the location of the sunken submarine.

Oceanographers have long known that parts of the Pacific sea floor at depths between 14,000 ft. and 17,000 ft. are carpeted with so-called manganese nodules, potato-size chunks of manganese mixed with iron, nickel, cobalt and other useful metals. In the 1970s, Howard Hughes used the Deep Ocean Mining Project [DOMP] search for nodules as a cover for building the ship Glomar Explorer. Global Marine supervised construction of the Glomar Explorer, at a cost in excess of \$200 million dollars, and operated it from 1973 to 1975 under contract to the US government. Glomar Explorer went to sea on 20 JUN 74, found the sub, and began to bring a portion of it to the surface. The Soviets watched the "deep-sea mining" operation with interest, but did not attempt to thwart it. An accident during the lifting operation caused the fragile hulk to break apart, resulting in the loss of a critical portion of the submarine, its nuclear missiles and crypto codes. However, according to other accounts, material recovered included three nuclear missiles, two nuclear torpedoes, the ship's code machine, and various code books.

From 1978 to 1980, Global Marine operated the ship in a deep-ocean mining test in water depths to 17,000 feet. The Explorer, which is 619 feet long and 116 feet wide, is owned by the US Navy. With the exception of the brief stint as a manganese module miner, the vessel has since been mothballed with the Naval Reserve Fleet in Suisun Bay CA, where it could be seen by cars crossing the Benicia bridge on U.S. Highway 680 east of San Francisco. After years of being mothballed, the ship was recently taken to Hunters Point Naval Shipyard for commercial modifications, including the removal of an 840-ton gimbal and a 608-ton cage. The vessel is on a 30-year lease from

the US Navy to Global Marine Drilling, and recently underwent a large conversion project to one of a kind deep sea drill ship. Conversion cost over \$180 million and was completed during the first quarter of 1998. Glomar Explorer was equipped to drill in waters of 7500 feet and with some modification up to 11,500 feet, which is 2,000 feet more than any existing rig. The conversion included the removal of 25 million pounds of superstructure and equipment to prepare the vessel for its conversion to a dynamically-positioned deep sea drilling ship. Houston-based Global Marine is one of the largest worldwide offshore drilling contractors, with a five-year commitment from two major oil companies for drilling in water depths up to 7,500 feet in the US Gulf of Mexico.

The Los Angeles Times broke the story in FEB 75, and by MAR 75 numerous news stories linked the Hughes Glomar Explorer, a ship publicly listed as a research vessel owned and operated by Summa Corporation, and the secret US government operation. After subsequent stories that the CIA had approached the news media to convince them to discontinue publication of stories related to the Glomar Explorer, Harriet Ann Phillippi, a journalist, filed a FOIA request with the CIA for any records that might exist which reveal the CIA's contact with members of the media to attempt to persuade them not to publish articles concerning the activities of the Glomar Explorer. The CIA responded by refusing to neither confirm nor deny the existence of any responsive records. The CIA claimed that any records that might exist which may reveal any CIA connection with or interest in the activities of the Glomar Explorer, or any evidence that might reveal the existence of records of this type would be classified, and therefore, exempt from disclosure under exemption 1 of the Freedom of information Act (FOIA). They also insisted that exemption 3 applied, as the National Security Act of 1947 precluded them from releasing information related to the functions of CIA personnel. This was the first instance of an agency using the "can neither confirm nor deny" answer in response to a FOIA request. Since then, the terms 'Glomar response' and 'Glomarization' are used to describe an agency's response when they can neither confirm nor deny whether records exist. [Source: Federation of American scientists [www.fas.org/irp/program/collect/jennifer.htm](http://www.fas.org/irp/program/collect/jennifer.htm) article 16 Feb 2010 ++]

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## **Military History Anniversaries:**

- Sep 01 1864 – Civil War: Confederate troops abandoned Atlanta in the face of continuing attacks by federals under General W.S. Sherman.
- Sep 01 1939 - WW II: Nazi Germany attacks Poland beginning the war in Europe.
- Sep 01 1950 - Korean War: 13 North Korean divisions open assault on UN lines
- Sep 01 1982 - The United States Air Force Space Command is founded
- Sep 01 1983 - Cold War: Korean Boeing 747 strays into Siberia & is shot down by a Soviet jet. All 269 on board are killed, including United States Congressman Lawrence McDonald.
- Sep 02 1898 – Machine gun 1st used in battle
- Sep 02 1864 - Civil War: Union forces enter Atlanta, Georgia a day after the Confederate defenders flee the city.
- Sep 02 1945 - WWII: V-J Day. Combat ends in the Pacific Theater: The final official surrender of Japan is accepted aboard the battleship USS Missouri in Tokyo Bay.
- Sep 02 1958 - Cold war: United States Air Force C-130A-II is shot down by fighters over Yerevan, Armenia when it strays into Soviet airspace while conducting a sigint mission. All crew lost.
- Sep 03 1783 - Revolutionary War: The war ends with the signing of the Treaty of Paris by the United States and the Kingdom of Great Britain. America is officially free from Britain
- Sep 03 1855 - Indian Wars: In Nebraska, 700 soldiers under American General William S. Harney avenge the Grattan Massacre by attacking a Sioux village, killing 100 men, women, and children.
- Sep 03 1916 - WWI: Allies turned back Germans in WW I's Battle of Verdun
- Sep 03 1941 - WWII: 1st use of Zyklon-B gas in Auschwitz (on Russian prisoners of war)
- Sep 03 1943 – WWII: The allied invasion of Italy began.
- Sep 04 1862 - Civil War: Gen Lee invades North with 50,000 Confederate troops
- Sep 04 1886 - Indian Wars: after almost 30 years of fighting, Apache leader Geronimo surrenders with his remaining warriors to General Nelson Miles in Arizona ending last major US-Indian war.

- Sep 04 1918 - WWI: U.S. troops land in Archangel, Russia, stay 10 months
- Sep 04 1940 - WW II: A German submarine makes the first attack against a United States ship (the USS Greer).
- Sep 04 1967 - Vietnam: Operation Swift begins: U.S. Marines engage the North Vietnamese in battle in the Que Son Valley.
- Sep 05 1914 - WWI: Battle of Marne begins: Germans chase out Russians.
- Sep 05 1939 - WWII: FDR declares US neutrality at start of WW II in Europe
- Sep 08 1943 - WWII: Gen Eisenhower announced unconditional surrender of Italy in WW II
- Sep 08 1945 - Cold War: United States troops arrive to partition the southern part of Korea in response to Soviet troops occupying the northern part of the peninsula a month earlier.
- Sep 09 1914 - WWI: Battle of Marne. German advance stalls, Paris saved .
- Sep 09 1942 - WWII: 1st bombing on continental U.S. soil. A Japanese floatplane drops an incendiary bomb on Mount Emily Oregon.
- Sep 10 1776 - Revolutionary War: George Washington asks for a spy volunteer, Nathan Hale volunteers.
- Sep 10 1813 - War of 1812: Battle of Lake Erie. U.S. Naval Captain Oliver Hazard Perry defeats a British flotilla.
- Sep 10 1919 - Latin America Interventions: Honduras. U.S. Marines land during election campaign.
- Sep 11 1941 - WWII: FDR orders any Axis ship found in American waters be shot on sight.
- Sep 11 1965 - Vietnam: The 1st Cavalry Division of the United States Army arrives in country.
- Sep 11 2001 - Terrorists hijack two passenger planes crashing them into New York's World Trade Towers causing the collapse of both & death of 2,752 people.
- Sep 11 2001 - Terrorists hijack a passenger plane and crash it into the Pentagon causing the death of 125 people.
- Sep 12 1814 - War of 1812: Battle of North Point is fought near Baltimore.
- Sep 12 1847 - Mexican-American War: The Battle of Chapultepec begins.
- Sep 12 1862 - Civil War: Battle of Harpers Ferry VA.
- Sep 12 1918 - WWI: St Mihiel France. 1st U.S. Operation and Victory by an Independent American Army.
- Sep 12 1944 - WWI: U.S. Army troops enter Germany for 1st time
- Sep 13 1847 - American-Mexican War: U.S. forces capture Mexico City effectively ending the war.
- Sep 13 1861 - Civil War: 1st naval battle of the war. Union frigate "Colorado" sinks privateer "Judah" off Pensacola, Fla.
- Sep 13 1900 - Philippine-American War: Filipino resistance fighters defeat a small American column in the Battle of Pulang Lupa.
- Sep 13 1942 - WWI: Battle of Edson's Ridge (2nd Japanese assault) at Guadalcanal.
- Sep 13 1951 - Korean War: Battle of Heart Break Ridge began.
- Sep 14 1814 - War of 1812: During a British naval attack on the City of Baltimore, Francis Scott Key composed a poem entitled "The Star Spangled Banner."
- Sep 15 1776 - Revolutionary War: British forces capture Kip's Bay Manhattan.
- Sep 15 1914 - Vera Cruz Incident: U.S. Marines march out of Vera Cruz, Mexico.
- Sep 15 1916 - WWI: 1st tank used in war, "Little Willies" at Battle of Flors, France
- Sep 15 1950 - Korean War: UN forces land at Inchon in South Korea.

[Source: Various Aug 2010 ++]

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## **Military Trivia 11:**

- What marked the first time since the Revolution that the U.S. accepted direct financial aid to fight a war?

- A: The Persian Gulf War.
- What U.S. military base was won in the last major battle against Japan?  
A: Okinawa.
  - What opportunistic country declared war on Japan five days before its surrender in 1945?  
The Soviet Union.
  - What U.S. war broke out the same year the federal government first printed paper money?  
The Civil War.
  - What country did ever-prudent King Farouk I declare war on in 1945?  
Germany.
  - What Bill Murray Ghostbusters term did Persian Gulf Warriors use to describe being hit by chemical weapons?  
A: Slimed.
  - What did an enemy have to be, for a U. S. soldier to call him a "believer" in the Vietnam War?  
A: Dead.
  - What trials, beginning in 1945, spawned the phrase "I was only following orders"?  
The Nuremberg war crimes trials.
  - What was the first war the U. S. took part in that was partially financed with lottery dollars?  
The Revolutionary War.
  - What southeastern state was the last to return to the Union after the Civil War.  
A: Georgia.
  - What Persian Gulf warrior called his young majors in charge of combat operations "Jedi Knights"?  
A: Norman Schwarzkopf.
  - Which two nations, constitutionally barred from military actions, sent money to support the Allied coalition against Iraq in "1991"?  
A: Germany and Japan.
  - What Ohio city was the 1995 Bosnian peace accord signed in?  
A: Dayton.
  - What Civil War general graduated first in the West Point class of 1829?  
A: Robert E. Lee
  - What was the B-17 long-range bomber nicknamed in World War II?  
A: The Flying Fortress.
  - What English King introduced death by boiling and legalized the killing of gypsies?  
A: Henry VIII.
  - What two continents have never been the site of a major military conflict?  
A: Antarctica and Australia.
  - Who returned to Russia from exile in October, 1917?  
A: Vladimir Ilyich Lenin.
  - What song was the Navy band playing at Pearl Harbor when the Japanese attacked?  
A: The Star-Spangled Banner.
  - What was the first war in which one jet plane shot down another/  
A: The Korean War.
  - What so called "war" spawned the dueling slogans "Better Dead Than Red" and "Better Red Than Dead" in the 1950s?  
A: The Cold War.
  - What modern vehicle was invented to circumvent trench warfare?  
A: The Tank.

[Source: [www.triviaplaying.com/55\\_Military\\_Questions.htm](http://www.triviaplaying.com/55_Military_Questions.htm) Aug 2010 ++]

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**Tax Burden for Ohio 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 Ohio:

**Sales Taxes**

**State Sales Tax:** 5.5% (food, newspapers, magazine subscriptions, telephone service and prescription drugs exempt); Counties levy additional sales taxes which may add up to 2.0% in additional sales tax. Refer to <https://thefinder.tax.ohio.gov/StreamlineSalesTaxWeb/Default.aspx> for details.

**Gasoline Tax:** 28 cents/gallon

**Diesel Fuel Tax:** 28 cents/gallon

**Cigarette Tax:** \$1.25/pack of 20

**Personal Income Taxes**

**Tax Rate Range:** Low - 0.587%; High - 5.925%

**Income Brackets:** 9 - Lowest - \$5,000; Highest - \$200,000; Several cities levy municipal income taxes.

**Personal Exemptions:** Single - \$1,500; Married - \$3,000; Dependents - \$1,500. Add an additional \$20 per exemption tax credit.

**Standard Deduction:** None

**Medical/Dental Deduction:** Unreimbursed medical/dental expenses, premiums for long-term care insurance, and unsubsidized health insurance premiums are deductible.

**Federal Income Tax Deduction:** None

**Retirement Income:**

**Retirement Income Taxes:** Social Security is exempt. Credit of up to \$200 if retirement income is at least \$500, plus a one-time credit on lump sums. Seniors 65 and over may claim a \$50 credit. Only one credit is allowed for each return. Out-of-state government pensions can be applied toward the retirement income credit.

**Retired Military Pay:** Military retired pay of taxpayers who retired from service in the active or reserve components of the U.S. Army, Navy, Air Force, Marine Corps, Coast Guard, or from the National Guard, and SBP benefits, are exempt from state income tax and school district income tax. For amplifying information military taxpayers can refer to [www.tax.ohio.gov/divisions/communications/information\\_releases/income/IT200802.stm](http://www.tax.ohio.gov/divisions/communications/information_releases/income/IT200802.stm) and [www.tax.ohio.gov/divisions/ohio\\_individual/individual/military\\_service\\_ohio\\_taxes\\_retiree\\_exemption.stm](http://www.tax.ohio.gov/divisions/ohio_individual/individual/military_service_ohio_taxes_retiree_exemption.stm).

**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**

The taxable base is the assessed value of land and buildings. Assessed value is 35% of market value, except for certain agricultural land. County auditors must reappraise all real estate every six years. The latest data available from the state (TY2006) shows the average statewide gross tax rate was 85.24 mills. A homestead exemption is available to the homesteads of qualified homeowners who are either at least 65 years old, permanently and totally disabled, or at least 59 years of age and the surviving spouse of a deceased taxpayer who had previously received the

exemption. Before the 2007 tax year, eligibility was limited to taxpayers who earned \$26,200 or less, with benefits tiered according to income. Starting with the 2007 tax year (bills payable in 2008) income tests and tiered benefits no longer apply. Instead each qualified homeowner is eligible for a credit worth the taxes that would have been charged on up to \$25,000 in true value (\$8,750 in taxable value). In other words, starting with the 2007 tax year, an eligible homestead worth \$100,000 would essentially be taxed as if it was worth \$75,000. For more details refer to [http://tax.ohio.gov/channels/government/documents/Bulletin\\_23\\_Homestead\\_EX\\_Rev\\_01\\_09.pdf](http://tax.ohio.gov/channels/government/documents/Bulletin_23_Homestead_EX_Rev_01_09.pdf).

**Inheritance and Estate Taxes** - Ohio has no inheritance tax but an estate tax is levied against the value of a resident decedent's gross estate less deductions and exemptions. If the net taxable estate is over \$338,333 but not over \$500,000, the tax is \$13,900 plus 6% of the excess over \$338,333. If the net taxable estate is over \$500,000, the tax is \$23,600 plus 7% of the excess over \$500,000. The estates of armed forces members who died while serving in a combat zone are exempt from probate fees. Call 800-977-7711 for details.

For further information, visit the Ohio Department of Taxation site <http://ohio.gov>. [Source: [www.retirementliving.com](http://www.retirementliving.com) Aug 2010 ++]

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**Congressional Alphabet:** 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:

- **H.CON.RES.** Stands for House Concurrent Resolution. This type of measure must pass both the House and Senate, but does not become public law.
- **HEARING.** A formal meeting of a committee or subcommittee to review legislation or explore a topic. Hearings may also be called to investigate a matter or conduct oversight of existing programs. Witnesses are called to deliver testimony and answer questions in all three types of hearings.
- **HIDEAWAYS.** The name for the private offices in the Capitol reserved for senior senators. They are highly prized for their proximity to the Senate floor.
- **H.J.RES.** Stands for House Joint Resolution. It becomes law if passed by both the House and Senate, and approved by the President.
- **HOLD.** Refers to a private objection one or more senators may have to scheduling a matter for debate. Holds are meant to signal serious opposition to the majority leader, but they are not binding.
- **HOMESTEAD ACT.** The 1862 law [12 Stat. 392-394] which gave public lands to settlers who paid \$10 and occupied the land for five years. Homesteaders could claim up to 160 acres; they had to be citizens or applicants for citizenship, 21 years old or the head of a household.
- **HOPPER.** The mahogany box on the House rostrum where members place bills they are introducing.
- **HOTLINE.** Refers to a phone recording run by the party cloakrooms to all Senate offices of their party. The recordings contain messages from the party leaders on schedule changes or proposed floor agreements.
- **HOUSE CALENDAR.** The list of bills available for consideration in the House. Bills are referred to the House Calendar if they do not deal with money, directly or indirectly.
- **HOUSE CHAMBER.** The large room in the Capitol where House members gather to debate and vote.
- **HOUSE JOURNAL.** The official log of House floor action ordered by the Constitution & approved daily. Journal votes are often called to check on the attendance of members or to serve as a delaying tactic.
- **H.R.** Stands for House of Representatives and designates a measure as a bill (e.g. H.R. 1100.) It becomes law if passed by both the House and Senate, and approved by the President.
- **H.RES.** Stands for House Resolution. This type of measure pertains only to the House and does not make law.



- **IMMUNITY.** The constitutional protection given members from lawsuit or arrest while on duty. Except in cases of treason, a felony, or breach of peace, members may not be hindered while working. Members are also immune from charges of libel or slander for anything said on the chamber floor.
- **IMPEACHMENT.** A formal charge of treason or criminality raised against an elected federal official. Only the House may bring an impeachment while only the Senate may try and convict the accused. Conviction requires a two-thirds vote in the Senate and results in removal of the accused from office.
- **INCUMBENT.** Refers to a sitting member of Congress running for re-election.

[Source: C-SPAN Congressional Glossary Aug 2010 ++]

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**Veteran Legislation Status 29 AUG 2010:** The House and Senate remain on summer recess until 13 Sep. 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 lawyer and a senior citizen are sitting next to each other on a long flight. The lawyer is thinking that seniors are so dumb that he could get one over on them easy. So the lawyer asks if the senior would like to play a fun game.

The senior is tired and just wants to take a nap, so he politely declines and tries to catch a few winks. The lawyer persists, saying that the game is a lot of fun. I ask you a question, and if you don't know the answer, you pay me only \$5. Then you ask me one, and if I don't know the answer, I will pay you \$500, he says.

This catches the senior's attention and to keep the lawyer quiet, he agrees to play the game.

The lawyer asks the first question. 'What's the distance from the Earth to the Moon?' The senior doesn't say a word, but reaches into his pocket, pulls out a five-dollar bill, and hands it to the lawyer.

Now it's the senior's turn. He asks the lawyer, 'What goes up a hill with three legs, and comes down with four?' The lawyer uses his laptop and searches all references he could find on the Net. He sends e-mails to all the smart friends he knows; all to no avail. After an hour of searching, he finally gives up. He wakes the senior and hands him \$500. The senior pockets the \$500 and goes right back to sleep.

The lawyer is going nuts not knowing the answer. He wakes the senior up and asks, 'Well, so what goes up a hill with three legs and comes down with four?'

The senior reaches into his pocket, hands the lawyer \$5 and goes back to sleep.

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"Death is a distant rumor to the young."

--- **Andy Rooney of 60 minutes fame**

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