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FLAG DAY: Flag Day was first observed in 1877 on the 100th anniversary of the Continental Congress' adoption of the Stars and Stripes as the official flag of the United States. In that year, Congress asked that all public buildings fly the flag on June 14. The idea quickly caught on and many people wanted to participate in waving the flag. One early supporter was B. J. Cigrand, a Wisconsin schoolteacher who wanted June 14 to be known as "Flag Birthday." In 1916, President Woodrow Wilson proclaimed Flag Day as a national celebration. However, the holiday was not officially recognized until 1949 when President Harry Truman signed the National Flag Day Bill. Although Flag Day is not celebrated as a Federal holiday, Americans everywhere continue to honor the history and heritage it represents. The longest-running Flag Day parade is held annually in Quincy, Massachusetts, which began 1952 and will celebrate its 59th year in 2009. The largest Flag Day parade is held annually in Troy, New York, which bases its parade on the Quincy parade and typically draws 50,000 spectators. In 1996, President Bill Clinton issued the following proclamation:

By The President

Of The

United States Of America

A Proclamation

There is no better symbol of our country's values and traditions than the Flag of the United States of America. Chosen by the Continental Congress in 1777, it continues to exemplify the profound commitment to freedom, equality, and opportunity made by our founders more than two centuries ago. Our flag's proud stars and stripes have long inspired our people, and its beautiful red, white, and blue design is known around the world as a beacon of liberty and justice.

Today, America's Flag graces classrooms, statehouses, courtrooms, and churches, serving as a daily reminder of this Nation's past accomplishments and ongoing dedication to safeguarding individual rights. The brave members of our Armed Forces carry "Old Glory" with them as they fulfill their mission to defend the blessings of democracy and peace across the globe; our banner flies from public buildings as a sign of our national community; and its folds drape the tombs of our distinguished dead. The Flag is a badge of honor to all -- a sign of our citizens' common purpose.

This week and throughout the year let us do all we can to teach younger generations the significance of our Flag. Its 13 red and white stripes represent not only the original colonies, but also the courage and purity of our Nation, while its 50 stars stand for the separate but united States of our Union. Let us pledge allegiance to this Flag to declare our patriotism and raise its colors high to express our pride and respect for the American way of life.

To commemorate the adoption of our Flag, the Congress, by joint resolution approved August 3, 1949 (63 Stat. 492), designated June 14 of each year as "Flag Day" and requested the President to issue an annual proclamation calling for its observance and for the display of the Flag of the United States on all

Federal Government buildings. The Congress also requested the President, by joint resolution approved June 9, 1966 (80 Stat. 194), to issue annually a proclamation designating the week in which June 14 falls as "National Flag Week" and calling upon all citizens of the United States to display the Flag during that week.

Now, Therefore, I, William J. Clinton, President of the United States of America, do hereby proclaim June 14, 1996, as Flag Day and the week beginning June 9, 1996, as National Flag Week. I direct the appropriate officials to display the Flag on all Federal Government buildings during that week, and I urge all Americans to observe Flag Day and National Flag Week by flying the Stars and Stripes from their homes and other suitable places.

I also call upon the people of the United States to observe with pride and all due ceremony those days from Flag Day through Independence Day, also set aside by Congress (89 Stat. 211), as a time to honor our Nation, to celebrate our heritage in public gatherings and activities, and to publicly recite the Pledge of Allegiance to the Flag of the United States of America.

In Witness Whereof, I have hereunto set my hand this seventh day of June, in the year of our Lord nineteen hundred and ninety-six, and of the Independence of the United States of America the two hundred and twentieth.

[Source: Various May 09 ++]

AETNA DATA BREACH: Aetna Insurance Company has contacted 65,000 current and former employees whose Social Security numbers (SSNs) may have been compromised in a Web site data breach. The job application Web site also held names, phone numbers, e-mail and mailing addresses for up to 450,000 applicants, Aetna spokeswoman Cynthia Michener said. SSNs for those people were not stored on the site, which was maintained by an external vendor. The company found out about the breach earlier this month when people began receiving spam messages that appeared to come from Aetna and complained to the company, Michener said. The spam purported to be a response to a job inquiry and requested more personal information. The spam campaign showed the intruders successfully harvested e-mail addresses from the Web site, although Michener said it's not clear if SSNs were also obtained. Nonetheless, Aetna sent letters last week notifying the 65,000 people whose SSNs were on the site of the breach. The company is offering them one year of free credit monitoring, as SSNs are often used by identity thieves.

"We wanted to err on the side of caution," Michener said. Aetna hired an IT forensics company to investigate how the Web site had been compromised. "At this point despite a thorough review, they've not been able to pinpoint the precise breach," Michener said. Aetna posted alerts on the job site, its main Web site and its internal intranet about the spam campaign, Michener said. Because of continued failure by the government and commercial companies in protecting veteran's personal data, veterans are my want to seek personal protection against identity theft. Companies that offer such protection for a fee can be located on the internet by inserting "Identity theft Insurance" into their search engine.

[Source: IT World Jeremy Kirk article 28 May 09 ++]

VA RETRO PAY PROJECT Update 16: The Defense Finance and Accounting Service (DFAS) has acknowledged a computer error prevented some 39,000 retirees from receiving VA Retro Pay. The mistake was discovered after a group of 20 veterans were proved correct when they pointed

out to DFAS that they were owed back pay. DFAS processed these claims by hand and found all were owed money. By the time the audit was completed, DFAS received several hundred claims from other retirees stating they too were eligible for the VA Retro Pay program. Upon closer examination, DFAS determined the initial criteria used to determine eligibility left out several qualifying points. The necessary changes were made and when all was said and done, 39,000 retirees were found to be owed back pay. DFAS says they are working very hard to ensure all veterans who are owed back pay will be paid by 15 JUL. As with the original batch, some veterans are owed by DFAS, some by VA and some by both agencies. Anyone reading this who believes they are owed back pay should contact DFAS directly at 1-800-321-1080 and ask what the status on your account is. If 39,000 veterans could not be found at first, it is suspected there could be more. [Source: NAUS Weekly Update 29 May 09 ++]

VA BLUE WATER CLAIMS Update 05: As most Vietnam-era veterans know presumption for Agent Orange related health conditions are based upon the member having actually had “boots on the ground” for at least one day. Those serving aboard ships have been divided into two groups. In the Blue Water groups are those individuals who were considered not to have been in country and among the Brown Water group are those who worked primarily on the rivers and are already considered to qualify. A question by a veterans organization representative, at a previous quarterly meeting, has led the VA to slightly change the rule. Now if a service member can prove that he was aboard a ship that actually tied up to a pier in Vietnam and that can be proved, the member will be considered as being in country and the presumptive conditions can apply. If you or someone you know meets these qualifications and has previously been turned down for Agent Orange related conditions, now is the time to re-open your case with the VA. [Source: NAUS Weekly update 29 May 09 ++]

VET SUPPORT from STATES Update 02: Once-sacrosanct veterans’ programs are no longer safe from the knife as tax revenues continue sliding in the recession. For example:

- In a recent budget-cutting order, Michigan Gov. Jennifer Granholm and legislators slashed \$1 million, or 25%, of funding for 11 groups that help veterans through a maze of paperwork and bureaucracy to get disability and pension benefits from the U.S. Department of Veterans Affairs. The cut is forcing layoffs and likely will be carried over to the next budget, too. “It’s a travesty,” said Daniel Crocker, Michigan service director for the Veterans of Foreign Wars, which had to eliminate four jobs. “The greatness of a nation will be judged by how it treats its veterans.”
- South Carolina plans to cut aid to the VFW, American Legion and Disabled American Veterans in the next budget. Illinois Gov. Pat Quinn recently outlined a “doomsday” budget that would close all four of the state’s veterans’ home if an income tax increase is not passed, leaving more than 1,000 veterans without care. Funding for veterans’ service organizations, or VSOs, is a fraction of multibillion-dollar state budgets that support schools, prisons and health care for the poor. But a \$27,000 reduction means the South Carolina VFW will not be able to pay its lone service officer when she returns from medical leave.
- Thirteen veterans’ groups in Ohio got 10% less than promised this year after state cuts.

The public is most familiar with veterans’ groups for their baseball tournaments, bingo nights and participation in parades. But veterans and widows of veterans rely on service organizations for help with benefits, especially in states that give money to the groups instead of hiring their own employees to help file claims. Veterans say the cuts could not come at a worse time. President Barack Obama is moving to remove combat troops from Iraq in 2010, and they will return with physical and psychological problems. Fort Jackson already has an outfit full of injured soldiers recuperating from combat, training injuries or other illnesses, says Albert Landsperger, senior vice commander/adjutant

for the South Carolina VFW. “They’re all going to need assistance putting in claims with the VA,” he said. “We’re going to need more service officers than we’ve got now.” And it’s not just younger soldiers who need help. Older veterans are being laid off and losing their health insurance coverage, forcing them to seek assistance from the VA for the first time. There is no shortage of veterans who will testify on how difficult it can be to get the VA to approve claims or the complexity of the red tape associated with claim submission. Without experienced Veteran Service Officers to provide claim submission assistance many returning vet’s claims will be excessively delayed or disapproved.

Granholm spokeswoman Megan Brown says Michigan’s Department of Military & Veterans Affairs overall is not experiencing any harsher cuts than other state departments. She says the state is preserving “essential” services for veterans. “We understand how painful this is. These are very, very painful economic times, and we’ve had to make some very painful decisions on the budget,” Brown said. Veterans, however, say slashing aid to their organizations means states will miss out on money that could be pumped back into the economy and generate sales tax. For every \$1 Michigan gives to military service groups, veterans get \$85 in benefits to spend, says Sandra Wilson of Saline, who sits on the Michigan Veterans Trust Board. “They’re trying to cut organizations that actually generate income for residents of the state,” said Jerry Manar, national veterans’ service deputy director for the VFW. Michigan veterans’ organizations, which want to sit down with Granholm to discuss the cut, also are angered by a state Senate proposal to give the state more control over benefits counselors in the next budget.

“It makes a whole new bureaucracy, which means the government is getting bigger and less money is coming to the vets,” Wayne said. [Source: AirForceTimes AP David Eggert article 28 May 09 ++]

MOBILIZED RESERVE 26 MAY 09: The Department of Defense announced the current number of reservists on active duty as of 26 MAY 09. The net collective result is 631 more reservists mobilized than last reported in the Bulletin for 15 MAY 09. At any given time, services may mobilize some units and individuals while demobilizing others, making it possible for these figures to either increase or decrease. The total number currently on active duty in support of the partial mobilization of the Army National Guard and Army Reserve is 109,076; Navy Reserve, 6,562; Air National Guard and Air Force Reserve, 15,386; Marine Corps Reserve, 9,199; and the Coast Guard Reserve, 758. This brings the total National Guard and Reserve personnel who have been activated to 140,981, including both units and individual augmentees. A cumulative roster of all National Guard and Reserve personnel who are currently activated can be found at

<http://www.defenselink.mil/news/May2009/d20090526ngr.pdf>. [Source: DoD News Release No. 366-09 27 May 09 ++]

TRICARE SERVICE CENTER: A Tricare customer service center is operated by the regional contractors and Tricare Area Offices in each Tricare region. The TSC can help you find a doctor for specialty care authorizations and can provide claim-processing information. Services provided by the TSC include, but are not limited to:

- Tricare program and eligibility information - Tricare Prime enrollment forms
- Primary care manager selection and change forms
- Tricare network medical providers and network pharmacy listings

Many TSCs are collocated within an MTF, although some are freestanding on military installations and in the community. You can find Tricare Service Center locations at <http://www.tricare.mil/contactus/>. [Source: Tricare Communications Note 365 dtd 28 May 09 ++]

TRICARE INFERTILITY TREATMENTS: Infertility is a difficult condition for couples to cope with and Tricare beneficiaries may be wondering what their options are if infertility becomes an issue. The answer is, with a few important exceptions, Tricare covers infertility treatments. Diagnostic services to identify physical disease, illness or injury to the reproductive system are covered for both men and women. Some infertility treatments, corrective treatments and surgeries for women are also covered. Correction of male infertility may be cost shared, but this is determined on a case-by-case basis. Many therapies to treat underlying conditions that may contribute to infertility are covered by Tricare. These therapies include hormonal treatment, antibiotics, administration of human chorionic gonadotropin (HCG) or radiation therapy depending on the condition. Treatments excluded from Tricare coverage are artificial insemination, in-vitro fertilization (IVF), gamete intrafallopian transfer and all other such reproductive technologies. Reversal of surgical sterilization is not covered for either sex. Although Tricare does not cover IVF, there are four military treatment facilities (MTF) with IVF medical training programs. The four MTFs are: Wilford Hall Medical Center in San Antonio; Tripler Army Medical Center in Honolulu; Walter Reed Army Medical Center in Washington, D.C.; and the Naval Medical Center in San Diego. These IVF programs are available to military members and their families. However, the IVF treatments are not covered by Tricare and beneficiaries are responsible for all costs at the MTF. You can obtain more information on covered infertility treatments by visiting the Web site of your Tricare regional contractor. [Source: Tricare news release 09-38 dtd 28 May 09 ++]

TRICARE NURSING HOME COVERAGE Update 01: In general, Tricare can cover skilled nursing care, and not custodial care. Care must be provided by a Tricare-authorized provider, such as a skilled nursing facility. Note that nursing homes, intermediate care facilities, etc., are excluded from Tricare coverage. Skilled nursing care is normally provided for rehabilitative services, with projected improvement goals. Custodial care is defined by law as providing assistance with the activities of daily living (bathing, dressing and eating) and can be provided safely and reasonably by a person who is not medically skilled. It is very important to remember that Tricare For Life (TFL) is the last payer to all other health insurances. Beneficiaries should first look to Medicare if they are eligible, and/or their other health insurance (OHI) if they have any, to pay for the skilled nursing. After their Medicare 100-day skilled nursing facility benefit is exhausted, TFL may then begin to cover the services as the primary payer, if the services continue to be considered skilled nursing care and the beneficiary does not have OHI. The doctor makes the determination about whether skilled nursing or custodial care is needed. However, if the Medicare benefit is terminated because the care is no longer considered skilled, but rather custodial, TFL will not cover charges for the care. Custodial care is not a Tricare covered benefit, just as it is not a Medicare covered benefit, nor a covered benefit of most civilian health plans.

There are options, though, for covering custodial care in a nursing home setting. While Tricare does not cover long-term care, you may purchase long-term care insurance through commercial insurance programs or through the Federal Long-Term Care Insurance Program (FLTCIP), which some retired service members may be eligible for. Long-term care primarily involves providing help with activities

of daily living (walking, personal hygiene, dressing, cooking, feeding, etc.) or supervision of someone who is cognitively impaired. For information about coverage alternatives, visit the Tricare beneficiary page on long-term care at www.Tricare.mil/mybenefit/jsp/Medical/IsItCovered.do?kw=Long%20Term%20Care&x=1&y=1. For more information about TFL refer to www.Tricare.mil/mybenefit/ProfileFilter.do?&puri=%2Fhome%2Foverview%2FPlans%2FForLife or contact Wisconsin Physicians Service, the TFL contractor, at 1-866-773-0404. [Source: The Tricare Blog 28 May 09 ++]

ALLERGY RELIEF Update 01: Spring is the time of year when many people complain about seasonal allergy symptoms such as runny noses, congestion, rashes, itchy and watery eyes, sneezing, coughing--and just generally feeling miserable. About 16.9 million Americans had allergies in 2007, and there were 12.2 million doctor's office visits for allergies in 2006, according to the National Center for Health Statistics. Allergies occur when the immune system overreacts to a substance that doesn't bother most people. In the spring, pollen is what gets to some people. But indoor allergies (to dust mites, dust, or pet dander, for instance) can cause problems all year round. If your allergy symptoms have you feeling lousy, this list of six allergy treatments and prevention strategies may help you find some relief.

1. Clean out your nose. Using a saltwater nose rinse is a natural option that can help clear out pollen and other irritants in the nose, says Jeremy S. Melker, an ear, nose, and throat doctor in Gainesville, Fla., who specializes in allergies. A 2007 study found that irrigating your nose works better than using commercial saline nasal sprays.

2. Try an over-the-counter allergy medicine. In recent years, two oral antihistamines that were previously available only by prescription became available over the counter. That means you can pick up Claritin (loratadine) or Zyrtec (cetirizine) without a visit to a doctor. These medications are "good for blocking [a substance called] histamine, which causes sneezing, itching, runny nose, and watery eyes," says Robert Fisher, the medical director at a Wisconsin-based practice called Allergy Research & Care. These medications are less likely to make you sleepy than older antihistamines like Benadryl. If OTC antihistamines don't work for you--or your favorite allergy medication disappears from store shelves, as Drixoral has--seeing a doctor may help. Many people assume that there are no other options available, but an evaluation by a doctor can start patients on the path toward relief, Fisher says. For example, a prescription antihistamine, such as Allegra or Xyzal, is an option if Claritin or Zyrtec don't help you.

3. Consider a prescription nasal spray or eye drops. Prescription steroid nose sprays, such as Flonase and Nasonex, work by reducing swelling in the nose, which can provide relief from nasal allergy symptoms. Antihistamine nasal sprays, on the other hand, work by blocking histamine. They're like oral antihistamines, except the active ingredient is delivered directly into the nose, straight to the site of some people's most bothersome allergy symptoms. Some allergists prescribe them to patients who can't find symptom relief from oral antihistamines. Nasal-spray options include Astelin, which has been available by prescription since 1996, and Patanase and Asterpro, both approved by the Food and Drug Administration last year. Eyedrops, such as Patanol, Optivar, and Pataday, can help soothe the itchy, watery eyes that come with allergic conjunctivitis, also known as eye allergies. All require a doctor's prescription.

4. Decongestants may also help relieve nasal congestion. A variety of decongestant medications are available without a prescription. Even if it is OTC, though, you may have to ask for your favorite medicine at the pharmacy counter if it contains pseudoephedrine, which can be used to make methamphetamine. A law that took effect in 2006 requires anyone buying a medication containing pseudoephedrine to show ID when making the purchase. An ingredient called phenylephrine has replaced pseudoephedrine in many OTC medicines, but some say they don't think it works as well at clearing congestion. Decongestant nasal sprays are another OTC option, but don't use them for longer than three days. Overuse can create a rebound effect of narrowing and constricting the blood vessels of your nose.

5. Close your windows, and turn on the air conditioning. Sure, with the recession, keeping the A/C off and just opening your windows might be a tempting move for cost-conscious people. But if you're allergic to outdoor allergens, it's best to keep the windows shut for the sake of your health. "If you know that the live oaks are blooming and you're sitting there all night long breathing in the live oak pollen, you're just worsening the problem," Melker says. "You're letting the fundamental [allergic] reaction occur, and then you're just trying to mask the symptoms" with medications.

6. If things get bad, try allergy shots, also known as allergy immunotherapy. There is no reason anyone should have to suffer from allergies in silence, experts say. "Allergy shots can help a lot of the symptoms, especially when people have tried all the other stuff and are still having problems," Fisher says. These shots involve being regularly injected with a small amount of the substance you're allergic to. The idea is to stimulate your immune system and help your body become desensitized to the allergens, according to the Mayo Clinic. A Cochrane Collaboration review updated in 2003 found that allergy shots help to improve symptoms of asthma, reduce the need for medications, and lessen the risk of severe asthma attacks when patients are exposed to allergens in the future. Eventually, the hope is that you'll build up a tolerance and your allergic reactions won't be so severe. But keep in mind that allergy shots require a time commitment--typically several years of weekly to monthly shots to completely finish the entire course of treatment. And because patients are injected with substances that they're allergic to, there is a risk of allergic reactions after the injections. For this reason, doctors typically require patients to remain in their offices for a few minutes after each session of immunotherapy. Another option is immunotherapy delivered orally via drops or tablets, which was found in a 2008 study to be effective in kids with allergic asthma. A review of earlier evidence, published in 2003 by the Cochrane Collaboration, found that this type of immunotherapy, delivered under the tongue, helps to relieve allergic rhinitis. It's unclear, however, whether it's as effective as allergy shots. The availability of this type of therapy is limited because it has not been approved by the Food and Drug Administration, and research is ongoing.

Annually in May, the National Asthma and Allergy Awareness Month, campaigns to help educate asthma sufferers around the world are held. Every day 11 people die from asthma in America and as many as 40 to 50 million people in the U.S. are affected by allergies. For more information, contact the Environmental Protection Agency www.epa.gov. [Source: U.S. News & World Report January W. Payne article 11 May 09 ++]

MEDICARE Part B PREMIUMS Update 05: New Social Security recipients and upper-income seniors could face a steep increase in their monthly Medicare premiums for the next two years,

according to an analysis released 26 May by a nonprofit health research group. Millions more will see their finances squeezed if their premiums for Medicare Part D prescription drug coverage go up during that period. Congress could intervene to soften the blow, but doing so would be costly at a time of ballooning deficits. The study, by the Kaiser Family Foundation, points out that Social Security and Medicare trustees project no cost-of-living adjustment (COLA) to Social Security benefits in 2010 and 2011, and only a tiny one in 2012. The COLA is pegged to an inflation index, and the economic recession has erased increases in the relevant index.

In 2009 seniors received a 5.8% COLA, the largest in more than a quarter-century, but those days are gone for the near future. Over the next two years, however, monthly premiums for Medicare Part B coverage will increase sharply under existing law, which requires premiums to cover 25% of program costs. Part B pays for doctor bills and other outpatient costs, and the monthly premiums that seniors pay are deducted from their Social Security benefits. The 2009 premium for most beneficiaries is \$96.40 per month. Medicare trustees project Part B premium increases to \$104.20 per month in 2010 and \$120.20 per month in 2011. A “hold harmless” clause in existing law will protect about 75% of current Social Security beneficiaries from any increase in their Medicare premiums in the years when there is no COLA, or when it falls below the increase in the monthly Part B premium. But many of the remaining seniors, according to Kaiser, could see their Part B premiums rise, cutting into their monthly Social Security benefits. Three beneficiary groups are impacted as follows:

- The first group that will be hit by these increases, without receiving any COLA to offset the pain, are new enrollees in Social Security, Kaiser said.
- The second affected class comprises relatively affluent Medicare beneficiaries — those with adjusted gross incomes above \$85,000 for individuals and \$170,000 for married couples, who already must pay a surcharge for their Medicare coverage.
- The final group, the largest of those affected, is composed of low-income seniors. But they will not have to pay the increased Medicare Part B premiums themselves. Instead, the Medicaid program, funded jointly by state and federal governments, will cover the increase. But that means higher Medicaid costs for those governments.

All Medicare beneficiaries who pay monthly premiums for the separate Part D prescription drug coverage could face a financial squeeze if those premiums increase over the next two or three years, unless they can find a cheaper plan, Kaiser said. “At a time of great economic uncertainty, with many seniors experiencing a significant decline in their retirement savings and with nearly two-thirds relying on Social Security for at least half their income, the projected absence of a COLA in the coming years could represent an added hardship for many recipients,” the report said. [Source: Congressional Quarterly article 27 May 09 ++]

VA PROSTHETICS Update 03: The Department of Veterans Affairs has announced a three-year study of an advanced artificial arm that easily allows those with severe limb loss to pick up a key or hold a pencil.

"This arm is a high-tech example of how VA researchers are continually modernizing the materials, design and clinical use of artificial limbs to meet veterans' lifestyle and medical needs," said Dr. Joel Kupersmith, VA's physician and chief research and development officer. In collaboration with the Defense Advanced Research Projects Agency, the study marks the first large-scale testing of the arm, which allows those who have lost a limb up to their shoulder to perform movements while reaching over their head, a previously impossible maneuver for people with a prosthetic arm. The study is under

the direction of Dr. Linda Resnik at the VA Medical Center in Providence, R.I. Veterans fitted with the arm will provide feedback to guide engineers in refining the prototype before it is commercialized and also made available through the VA health care system, VA officials said.

A unique feature of the advanced arm is its control system, which works almost like a foot-operated joystick. An array of sensors embedded in a shoe allows users to maneuver the arm by putting pressure on different parts of the foot. The current version uses wires to relay the signals to the arm, but future versions will be wireless. The arm also can be adapted to work with other control systems, including myoelectric switches, which are wired to residual nerves and muscles in the upper body and respond to movement impulses from the brain, shoulder joysticks or other conventional inputs. Frederick Downs Jr., director of VA's Prosthetic and Sensory Aids Service lost his left arm during combat in Vietnam. He said he was "brought to tears" recently when the prosthetic arm allowed him to smoothly bring a water bottle to his mouth and drink. "Learning to use the controls is not difficult," he said, due in part to a sensor in the artificial hand that sends a vibration signal that tells how strong the grip is. A stronger grip causes more vibration. VA prosthetics research also includes vision and hearing aids, wheelchairs and propulsion aids, devices to help people with brain injuries to become mobile, and adaptive equipment for automobiles and homes -- "everything that's necessary to help veterans regain their mobility and independence," Downs said. [Source: VA News Release 27 May 09 ++]

TOMB of the UNKNOWN Update 04: A block of marble quarried from the same location as the Tomb of the Unknowns sits in a parking lot in the Colorado mountains while the other continues to crack in Arlington National Cemetery. Coloradans who had hoped to provide the replacement marble for one of the country's most powerful monuments say they don't know when or if their gift will be accepted by the government. The Tomb of the Unknowns currently on display is a replacement for the original block that came from the Yule Quarry in Marble, Colorado in the early 1920's. Its marble suffers from significant cracks to its foundation. "It sure would be nice if the tomb block were the way it should be," said John Haines, a retired Glenwood Springs car dealer, who paid tens of thousands of dollars to quarry the new marble block. "If you look at your father's tombstone and it were cracked, would you want it to stay cracked? No, you wouldn't... Would you want someone to bring out caulk to fix it? No, you wouldn't. Haines has been working with Rep. Ed Perlmutter (D-CO), Rep. John Salazar (D-CO) and Sen. Mark Udall (D-CO) to get the federal government to accept his gift. He's lined up other donations to ensure it could be transported to Arlington at no cost to taxpayers as well. The only cost would be to complete the engravings on the block and estimates for its price range from \$200,000-\$2.2 million. Haines said Arlington's superintendent wants the tomb block exchanged, but bureaucracy and politics remains a hindrance. Haines does not have a timeline for his financial offer. He says on this Memorial Day weekend, he will remember the sacrifices America's servicemen have made to ensure he would be able to make an offer like this to his country. "It's frustrating to think you want to give this to somebody, give this to the country and they won't take it," he said. [Source: Colorado 9news.com Adam Schrage article 24 May 09 ++]

NEW JERSEY VET CEMETERY Update 02: Finns Point National Cemetery in Pennsville, Salem County, New Jersey is set to close after 150 years. Part of what makes Finn's Point National Cemetery so peaceful is the water. The small plot of land the cemetery is located on is nearly surrounded by the Delaware River. But the water is also what is forcing the cemetery to close. Veterans

Affairs officials say Finn's Point will accept burials of cremated remains through the end of 2009, but after that, the cemetery will effectively be closed. Officials say the water level beneath the ground is now too high for VA crews to dig additional burial sites. Finn's Point is home to about 5,000 veterans' graves, including those of 2,500 Confederate prisoners of war held on nearby Pea Patch Island during the Civil War. It is also the only national cemetery in Salem County. Veterans will now have to drive roughly 90 minutes to Washington Crossing, Pa. to be buried in a national cemetery. VA officials say casket burials were stopped at the cemetery in 1963 because of the water problems. Since then, Finn's Point has accepted only cremated remains. Now, the water is high enough that those burials must stop as well. But several veterans say they're also concerned about their colleagues already buried at Finn's Point. They say dredging of the Delaware River's shipping channel has raised the banks surrounding the cemetery, forcing water down beneath the cemetery's ground. "The water has to run this way," said Curt Williams, commander of Pennsville's American Legion post. He's concerned the water table could eventually flood the existing graves. VA officials say they believe there's no danger to the cemetery's existing graves.

New Jersey has no other National Cemeteries but does maintain for veterans' use the Brigadier General William C. Doyle Memorial Cemetery. The facility was funded jointly by the state and federal governments and is managed by the Department of Military and Veterans Affairs. It is open to eligible New Jersey Veterans; residents who are members of the Armed Forces or reserve units on active duty at the time of death; certain dependents and certain merchant marines and civilians who have been awarded veteran's status. Rules and eligibility requirements were established within the guidelines of the U.S. Department of Veterans Affairs (VA), Washington, D.C. The cemetery is located in Arneytown, North Hanover Township, Burlington County on Province line Road, which intersects Route 664 to the north of the cemetery and Routes 537 and 528 to the south. It's central location, 15 miles southeast of Trenton, makes it easily accessible from the New Jersey Turnpike, the Garden State Parkway and Interstates 195 and 295.

The cemetery is a contemporary memorial type with all grave markers flush with ground level. It covers 225 acres and was designed to accommodate 154,000 veterans and their family members. Grave sites at Doyle Cemetery cannot be reserved in advance. At the time of need, the next of kin should obtain services from a local funeral home. To request burial, the funeral director should call the Cemetery's Interment Office at 609-758-7250 while the next of kin is present. Before scheduling the burial, the cemetery staff must determine eligibility. Fax any documents requested by the cemetery staff to 609-758-0169. The burial will be scheduled after eligibility is established. The same procedure is followed if an eligible dependent predeceases the qualifying veteran. [Source: Pennsville (CBS 3) Ben Simmoneau report 26 May -09 ++]

MEDICARE DURABLE MEDICAL EQUIPMENT: There are three types of durable medical equipment (DME) suppliers under Original Medicare. The one you choose affects how much your costs will be.

- To save the most, choose suppliers who are enrolled and “**participating**” in Medicare. They must bill Medicare and take assignment—accept the Medicare approved amount as payment in full. You or your supplemental insurance will pay 20% of that amount (plus any unmet portion of your Part B deductible). The supplier can ask you to pay this amount up front (although they must still submit the bill to Medicare), but it’s best to find one who will not. If

you do pay up front, save your receipt and make sure that you have paid the correct amount when you receive your Medicare Summary Notice (MSN) for the service. If you have paid more than 20% of Medicare's approved amount, seek reimbursement from the supplier for the extra amount.

- Suppliers who are enrolled but “**not participating**” in Medicare are not required to accept assignment as payment in full. They are not limited in how much they can charge you and can ask for payment up front, although they must still submit the bill to Medicare. Medicare will then reimburse you for 80% of its approved amount (minus any unmet portion of your Part B deductible), and you pay the balance (balance billing). Medigap plans that cover excess charges do not cover overcharges from DME suppliers. Non-participating suppliers can choose to take Medicare assignment on a case-by-case basis. It is worth asking the supplier to take assignment for your equipment.
- You may have to pay the full cost yourself if you choose a supplier who is not enrolled in Medicare. These **nonenrolled** suppliers are not limited in how much they can charge you and can ask for payment up front. Such suppliers are required to notify you in advance—in writing with an “Advance Beneficiary Notice”—that they are not enrolled in Medicare and, therefore, you will be responsible for the full cost of the equipment. If they fail to do this—and so there was no way you could know you were responsible for the full cost—Medicare will determine that you cannot be charged for the equipment. You should submit the claim to Medicare. Medicare should then tell the supplier that it must reimburse you for any money you paid. You will not be responsible for any fees, and the supplier must generally refund you any money you paid. To save money, it is best to go to a Medicare-enrolled supplier who accepts Medicare's assignment.

To find a Medicare enrolled supplier near you, call 800-MEDICARE or check the Medicare Supplier Directory on Medicare's website at www.medicare.gov/Supplier/Home.asp. All Medicare-enrolled DME suppliers are required to bill Medicare on your behalf (without any charge to you for doing so). If a Medicare-enrolled supplier refuses to bill Medicare, contact your local durable medical equipment administrator, the DME MAC in your area, to report Medicare fraud by calling 800-MEDICARE. For additional Medicare information and assistance refer to the Medicare Rights Center (MRC) website www.medicarerights.org. MRC helps older adults and people with disabilities get good, affordable health care. [Source: Medicare Counselor May-Jun 09 ++]

MEDICARE DURABLE MEDICAL EQUIPMENT Update 01: In the past few years, there have been some changes to rules concerning the rental of oxygen equipment. If you need oxygen equipment, Medicare will only pay for you to rent it; it will not pay for you to buy it. The rental period lasts for up to five years (as long as you still require the equipment). The following clarifies the current rules.

1. During the first 36 months (3 years), Medicare will pay a monthly rental fee to the supplier. If you have Original Medicare, Medicare pays 80% of the rental amount, and you are responsible for any unpaid Part B deductible, and the remaining 20 % of the rental amount (plus additional costs if your supplier does not accept assignment). If you have a Medicare Advantage plan, you may have a copayment that is set by your plan. The monthly rental payments to the supplier covers not only your oxygen equipment, but also any supplies and accessories such as tubing or a mouthpiece, oxygen contents, maintenance, servicing and repairs.
2. After the 36 month period ends, Medicare will stop paying monthly rental fees to the supplier and you will no longer have to pay a monthly rental coinsurance for the oxygen equipment. The supplier must allow you to keep the same equipment for up to two more years (as long as you still need it during that time). During this time, your supplier must keep the equipment in good working condition and provide you supplies, parts and maintenance at no cost to you in most cases. Although you will no longer pay a monthly rental coinsurance, you may be charged a fee in the following instances after the 36- month rental period:
 - If you use oxygen tanks or cylinders, you will be charged coinsurance or copayments for liquid or gaseous oxygen that the supplier delivers to you on a monthly basis plus additional costs if your supplier does not accept Medicare's approved payment for a service (“assignment”) as payment in full.

- During 2009, if you use an oxygen concentrator or transfilling equipment (a machine that fills your portable tanks in your home), your supplier can bill you for one general in-home maintenance visit. You will be responsible for a 20% coinsurance (plus additional costs if your supplier does not accept Medicare's assignment as payment in full).
3. At the end of the five-year period, a new rental period will begin and you will have to get new oxygen equipment if you still need it. You can choose whether to get it from the same supplier you got your previous equipment from or switch to a new supplier.

[Source: Medicare Counselor May-Jun 09 ++]

PURPLE HEART POSTAGE STAMP Update 01: Tammy Duckworth, Department of Veterans Affairs (VA) assistant secretary for Public and Intergovernmental Affairs, recently spoke at a U.S. Postal Service ceremony announcing the reissue of the Purple Heart stamp. This is the fifth issue of the Purple Heart definitive postage stamp. The Purple Heart stamp was first issued on May 20, 2003. The reissued stamp features a photograph by Ira Wexler of one of two Purple Hearts awarded to James Loftus Fowler of Alexandria, Va., who was battalion commander of the Third Battalion, Fourth Marines serving in Vietnam. A picture of the new Purple Heart stamp is available on the U.S. Postal Service website http://www.usps.com/communications/newsroom/2009/pr09_022.htm. For more information, contact your local post office. [Source: Military Report article 25 May 09 ++]

NLS TALKING BOOK PROGRAM: The talking book program is a library service available to U.S. residents, or American citizens living abroad, who have low vision, blindness, or a physical disability that makes reading a standard printed page difficult. Through a national network of regional libraries, the National Library Service (NLS) mails books and magazines in Braille and on cassette, along with audio playback equipment, directly to enrollees at no cost. By enabling people to read independently, the program has become a lifeline to many vision-impaired readers, including seniors with vision difficulties due to age-related conditions such as macular degeneration and glaucoma. Talking book clubs, offered through NLS regional and sub-regional libraries, provide patrons with the opportunity to discuss the books they have read and to share their love of reading with others. Clubs are open to readers of all ages. Many of the 132 cooperating libraries across the U.S. host summer reading clubs for young patrons and participate in NLS's national "102 Talking-Book Club," which honors people age 100+ for their lifelong devotion to reading. Readers who are unable to attend NLS talking book club meetings can often participate by telephone or computer. Online-only clubs are also available, allowing NLS patrons worldwide to connect with other sighted and visually impaired book lovers without leaving home.

Dawn Fuller of the NLS regional library in Los Angeles, the talking book club coordinator for Braille Institute Library Services, says the clubs give participants a chance to share their feelings about vision loss and often create friendships and a sense of togetherness and community. The meetings are a time when patrons can discuss their lives, feelings about going blind, and challenges they face daily. Talking book clubs also expose patrons to new materials, broadening their appetites for literature, expanding their imaginations and encouraging them to pursue new pastimes. With a collection of more than 400,000 titles, including the latest bestsellers, classics, biographies, romances, mysteries, and westerns, NLS offers no shortage of inspiration. Eligible for the service are blind persons whose visual acuity, as determined by competent authority, is 20/200 or less in the better eye with correcting lenses, or whose widest diameter of visual field subtends an angular distance no greater than 20 degrees. Other

physically handicapped persons extended eligibility are:

- Persons whose visual disability, with correction and regardless of optical measurement, is certified by competent authority as preventing the reading of standard printed material
- Persons certified by competent authority as unable to read or unable to use standard printed material as a result of physical limitations.
- Persons certified by competent authority as having a reading disability resulting from organic dysfunction and of sufficient severity to prevent their reading printed material in a normal manner.

In cases of blindness, visual impairment, or physical limitations, "competent authority" is defined to include doctors of medicine; doctors of osteopathy; ophthalmologists; optometrists; registered nurses; therapists; and professional staff of hospitals, institutions, and public or private welfare agencies (e.g., social workers, case workers, counselors, rehabilitation teachers, and superintendents). In the absence of any of these, certification may be made by professional librarians or by any person whose competence under specific circumstances is acceptable to the Library of Congress. In the case of reading disability from organic dysfunction, competent authority is defined as doctors of medicine and doctors of osteopathy who may consult with colleagues in associated disciplines.

Eligible readers must be residents of the United States, including the several states, territories, insular possessions, and the District of Columbia; or, American citizens domiciled abroad. In the lending of books, recordings, playback equipment, musical scores, instructional texts, and other specialized materials, preference shall be given at all times to the needs of the blind and other physically handicapped persons (veterans) who have been honorably discharged from the armed forces of the United States. The reading materials and playback equipment for the use of blind and physically handicapped persons may be loaned to individuals who qualify, to institutions such as nursing homes and hospitals, and to schools for the blind or physically handicapped for the use by such persons only. The reading materials and playback equipment may also be used in public or private schools where handicapped students are enrolled; however, the students in public or private schools must be certified as eligible on an individual basis and must be the direct and only recipients of the materials and equipment. For information on how to join the talking book program, where to find participating libraries, lists/catalog of reading material available, and how to order reading materials online refer to www.loc.gov/nls or 1-888-657-7323. [Source: About.com: Senior Living Sharon O'Brien article 26 May 09 ++]

VA DENTAL TREATMENT Update 04: A dental insurance program for veterans, modeled after retiree dental insurance provided under Tricare, is an optional health program being pushed by Sen. Richard Burr of North Carolina, ranking Republican on the Senate Veterans' Affairs Committee. For premiums of between \$14 and \$48 a month, depending on the location and selected benefits, 7.9 million veterans could have access to a network of dentists, Burr said. VA presently provides dental care to veterans with service-connected dental disabilities, those who are 100% disabled for any condition, and those who were prisoners of war for 90 days or longer. Additionally, veterans newly separated from active duty can receive one-time dental treatment within 180 days from VA if their discharge records show they were receiving dental treatment that was not completed before they were discharged. Burr's proposal, S.498, envisions optional group dental insurance that would be administered by VA but with costs fully covered by premiums, a concept that makes it attractive to lawmakers worried about holding down government costs. In the 109th Congress expansion of VA

dental care were sought through bills introduced by Rep. Steve Buyer (H.R.6277) and Sen. Richard Burr (S.3178). These bills along with H.R.5595 to expand dental care to all vets with service connected disabilities bills did not receive sufficient support to become law. [Source: NavyTimes article 1 Jun 09 ++]

SBP DIC OFFSET Update 17: A pointed debate broke out 20 MAY at a Senate hearing when a witness said the spouses of service members killed in combat don't really need a pay increase. The witness, from a financial and retirement planning company, said that if a service member dies and leaves behind a 20-year old spouse and one child, the spouse could expect to receive \$2.7 million in military and veterans survivor benefits if Congress were to side with veterans groups seeking repeal of a law requiring one benefit to be offset by the other. Retired Army Capt. Bradley Snyder, past president of the Armed Forces Services Corp., a spinoff of the Army and Air Force Mutual Aid Association, said such improvements are unnecessary. "All benefits can always be improved, but the basis that is existing now is very good," he said. He noted that a survivor also gets education benefits from the Veterans Affairs Department, a \$100,000 death gratuity from the Defense Department and up to \$400,000 in Servicemembers' Group Life Insurance if the service member was enrolled.

Snyder's comments came before the Senate Armed Services personnel panel at a hearing on the 2010 budget. He was immediately disputed by retired Air Force Col. Steve Strobridge of the Military Officers Association of America, who said most survivors get less than \$14,000 a year in defense and VA benefits. "I think everybody in here would have a little problem living on that," Strobridge said. Lawmakers have talked for years about increasing survivor benefits, but so far the only thing to change is that some survivors are receiving a \$50 monthly allowance that will increase to a maximum of \$100 per month over the next several years. That does not come close to making up for their average loss of \$1,154 a month because their military survivor benefits are reduced dollar for-dollar by what they get in VA survivor benefits. The Armed Services Committee is considering S.535, a bill sponsored by Rep. Bill Nelson, D-Fla., that would repeal the offset. Nelson has 44 co-sponsors for his bill, which is similar to legislation that the Senate has passed before only to see it die in negotiations with the House. If you would like to see this legislation pass the House and be forwarded to the Senate contact your legislator and ask that he sign on as a sponsor or cosponsor to the bill which presently has only 46 cosponsors. One way to do this is to go to [http://capwiz.com/usdr/issues/alert/?alertid=13303636&queueid=\[capwiz:queue_id\]](http://capwiz.com/usdr/issues/alert/?alertid=13303636&queueid=[capwiz:queue_id]) where you will find a preformatted message that you can use as is or edit the text to your personal style and forward automatically by entering your zip code and contact data. [Source: NavyTimes Rick Maze article 20 May 09 ++]

MEDICARE ENROLLMENT w/DISABILITY Update 02: The Senate Finance Committee, which is writing legislation designed to extend affordable health care coverage to all Americans, has put forward four options to deal with the two-year delay in Medicare coverage for people with disabilities.

- Option One shortens the waiting period to 12 months.
- Option Two phases out the waiting period in six-month increments, with total elimination by April 2011.
- Option Three has a slower phase-out, ending the waiting period in July 2015.
- Option Four maintains the waiting period for people with access to private insurance (not including COBRA coverage from a former employer) and phases it out for everyone else.

The Medicare Rights Center (MRC) believes that the sooner we completely end the waiting period for all people with disabilities, the better. Option Two achieves that goal. New research shows that over 20% of people in the first year of the waiting period delay care because of the cost, twice the rate for adults who are too young for Medicare. Lack of insurance is the primary, but not the only, reason for forgoing care. Many have insurance that is inadequate to meet their health care needs, which spike around the time they become eligible for SSDI. Some 13% never make it through the waiting period, never accessing the Medicare benefit their taxes funded during their working years. The statistics match the accounts of people who struggle to survive the waiting period. They put off care until Medicare coverage begins; they go into debt to pay for treatment; they file for bankruptcy because of medical bills. Once Medicare coverage begins, the picture changes. Health care becomes accessible and the future brightens for many people with disabilities. Medicare has provided health security to generations of older adults and people with disabilities. As Congress tackles health reform, it must build on that success, ending the unjustifiable delay in coverage for people with disabilities, improving access to care for low-income people with Medicare and fixing the Part D drug benefit. MRC is asking that Americans write their representative and senators and remind them to “Remember Medicare” as they work on reforming our health care system. [Source: Weekly Medicare Consumer Advocacy Update 21 May 09 ++]

BURN PIT TOXIC EMISSIONS Update 08: Two lawmakers have unveiled a bill that would bar the military from operating burn pits in Iraq and Afghanistan for longer than six months and also would require the Defense Department to identify service members who already may have been exposed to such toxins. “We should not continue to recklessly use burn pits to dispose of hazardous waste across Iraq and Afghanistan,” said Rep. Tim Bishop (D-NY), who introduced the bill with Rep. Carol Shea-Porter (D-NH). “Disturbing reports are coming to light every day about these burn pits and the toll they are taking on the health of many of our service men and women ... Our troops should be free to focus on fighting the enemy without worrying how their lives may be further endangered by the actions of private contractors operating under different rules,” Bishop said.

The bill comes in the wake of a series of stories in Military Times documenting that hundreds of tons of waste are burned daily in Afghanistan and Iraq with little oversight. Troops report burning everything from dioxin-producing plastic bottles to petroleum waste to amputated limbs. In a memo dated 20 DEC 06, Air Force Lt. Col. Darrin Curtis, former bioenvironmental flight commander for Joint Base Balad, wrote of the burn pit at that Iraq base: “In my professional opinion, there is an acute health hazard for individuals. There is also the possibility for chronic health hazards associated with the smoke.” He said contaminants, many highly poisonous, that troops may have been exposed to include benzene, an aircraft fuel known to cause leukemia; arsenic; dichlorofluoromethane, or Freon; carbon monoxide; ethylbenzene; formaldehyde; hydrogen cyanide; nitrogen dioxide; sulfuric acid; and xylene. For more information, refer to www.burnpits.org. To be added to a list of those potentially affected by the burn pits, e-mail Kerry Baker baker22@comcast.net at Disabled American Veterans.

Defense officials say the burn pits do not pose serious health risks, only temporary issues, such as coughing or red eyes. However, more than 200 people have contacted Military Times with similar symptoms that they believe are linked to their exposure to burn-pit smoke, such as lymphomas, leukemia, sudden onset of asthma, chronic coughs, sleep apnea and headaches. Nine class-action

lawsuits have been filed against KBR, the contractor that ran several of the burn pits. Troops ran their own burn pits at the beginnings of the wars in Iraq and Afghanistan, and continue to do so at some smaller bases. Under military regulations, burn pits are supposed to be a short-term solution for waste disposal in combat zones. But some pits in Afghanistan and Iraq have operated for years. The new legislation, “Military Personnel War Zone Toxic Exposure Prevention Act,” H.R.2419, would:

- Ask the Defense Department to identify troops who were potentially exposed to a “hazardous disposal site” as well as any negative health effects that might be related to that exposure.
- Require exposed troops and their commanders to be notified of their exposure, and would require the military to keep track of how far each person lived from a burn pit, what was exposed in that pit, how long each person was exposed, what symptoms the person had while deployed and any symptoms the person has after returning home. Those service members also would be examined within 30 days of determining they were exposed to a burn pit, and every year after that.
- Direct the Defense Department to submit a report detailing the illnesses of troops exposed to the pits within one year after enactment. “Exposure” includes anyone who was at a base with a burn pit for more than a year, was exposed to “intense” amounts of fumes, and displays symptoms that might be linked to exposure.
- Prohibit burn pits from operating for longer than six months if they burn environmental toxins, a combination of toxins that could lead to negative health effects, or low levels of toxins that exceed military exposure guidelines.

[Source: AirForceTimes Kelly Kennedy article 22 May 09 ++]

VA RURAL ACCESS Update 08: On 21 MAY the Senate Democratic Caucus held a Roundtable meeting on the subject of Rural Outreach. The meeting was called by the Chair of the Rural Outreach Senator Blanche Lincoln (D-AR) to discuss the particular problems facing veterans living in rural areas. Also attending the Roundtable was Senator Jon Tester (D-MT) and Senator Mark Begich (D-AK). The VSO participants were representatives of American Legion, DAV, EANGUS, IAVA, MOAA, NMFA, PVA, NGAUS, ROA, VFW, and TREA. The Roundtable members spoke, at length, on the problems rural veterans and military retirees have accessing their benefits. Access to health care was the main concern for all veterans and their families. Participants called for more Mobile Vets Centers and the use of telemedicine. The difficulty in finding specialty care in rural areas is particularly acute. There were special concerns voiced for members of the Guard and Reserve who are veterans while still serving in the National Guard and Reserves. The 21st was a particularly good day for rural vets. On the same day as the Roundtable, the Senate’s VA Committee marked up S.801 which includes improvements in rural healthcare for vets and allows the VA to reimburse eligible veterans for emergency treatment outside of the VA health care system. The bill will be sent in the future to the Senate floor for consideration. And then the VA announced an additional \$215 million is being allotted to improve health care in rural and extremely rural areas in the U.S.

On the new funding Secretary of Veterans Affairs Eric Shinseki said. “These funds will allow VA to establish new outpatient clinics, expand collaborations with federal and community partners, accelerate the use of telemedicine deployment, explore innovative uses of technology, and fund pilot programs.” Veterans Integrated Service Networks (VISNs), VA’s regional health care networks, and Veterans Health Administration program offices were allowed to submit up to eight proposed projects each. These proposals were prioritized and then sent to the Office of Rural Health (ORH), where they were evaluated based on, methodology, feasibility and intended impact on rural Veterans. After careful review, ORH selected 74 programs, many of which were either national in scope or affected multiple states. Program offices validated these proposals to ensure that projects and programs were consistent

with the VA mission, strategic direction, program standards, and did not duplicate existing efforts. The new funding is part of an ambitious VA program to improve access and quality of health care -- both physical and mental -- for Veterans in geographically rural areas, with an emphasis on the use of the latest technologies, recruitment and retention of a well-educated and trained health care workforce, and collaborations with non-VA rural health community partners. To address the unique issues facing rural Veterans, the Department created an Office of Rural Health in FEB 07. In the past two years, VA formed a 16-member national committee to advise on issues affecting rural veterans, opened three Veterans Rural Health Resource Centers to study rural Veteran issues, rolled out four new mobile health clinics to serve 24 predominately rural counties, and announced 10 new rural outreach clinics to be opened in 2009. [Source: TREA Washington update 22 May 09 ++]

VA CEMETERIES Update 03: The National Cemetery Administration (NCA) of the Department of Veterans Affairs held a Veterans Service Organizations (VSO's) Briefing 20 MAY 09. This briefing is held periodically to give the VSO's an update on the activities of the Cemetery Administration and is an opportunity for the VSO's to discuss any concerns that have been raised by their members. The briefing included updates on the NCA's 2009-2010 budget, major and minor construction projects, field programs, state cemetery grant programs and memorial service programs. The good news is that as a result of the economic stimulus bill passed by Congress earlier this year, the Cemetery Administration received \$121 million more than they had requested, which will allow them to put greater focus on National Shrine projects, as well as increase projects that conserve water and energy, repair historical monuments and memorials, repair roads, buildings and other cemetery infrastructure, and purchase equipment for cemetery operations. The most controversial item that was discussed was the issue of lithochrome on the grave stones. Lithochrome is the paint that is used to enhance the grave stones in the cemetery. In VA cemeteries it is black. The stones are engraved as they have always been, but the lithochrome is added to make reading the engraving much easier. However, they have discovered that the lithochrome does not last very long and when it starts to deteriorate it looks very bad. Because of the need to frequently re-do the process and the resulting expense, the NCA has decided there will be no lithochrome at new cemeteries. In addition, they will keep cemetery sections uniform in appearance, so if there is a section that is lithochromed, they will keep the stones in those sections lithochromed. But if most of the stones are not lithochromed, those that now have it will not be redone when the lithochrome fades. [Source: TREA Washington Update 22 May 09 ++]

NAVAJO CODE TALKERS: A Navajo Code Talker who was part of the original group recruited to develop what became an unbreakable code that confounded the Japanese during World War II has died. John Brown Jr. died 20 MAY at his home in Crystal, N.M., according to his son, Frank Brown. He was 88. Several hundred Navajos served as Code Talkers during the war, but a group of 29 that included Brown developed the code based on their native language. Their role in the war wasn't declassified until 1968. Brown received the Congressional Gold Medal in 2001 along with other members of the original Code Talkers. Less than a handful are still alive. In an acceptance speech on behalf of the Code Talkers, Brown said he was proud that the Navajo language bestowed on them as a Holy People was used to save American lives and help defeat U.S. enemies. As Code Talkers and Marines, he said they did their part to protect freedom and Democracy for the American people. "It is my hope that our young people will carry on this honorable tradition as long as the grass shall grow and

the rivers flow,” Brown said, according to a CNN transcript.

Navajo Code Talkers used their language to transmit military messages on enemy tactics, Japanese troop movements and other battlefield information in a code the Japanese never broke. Code Talkers took part in every assault the Marines conducted in the Pacific from 1942 to 1945, according to the Naval Historical Center in Washington. After the war, the Code Talkers were told to keep their work a secret. The younger Brown said even after his father’s role in the war was declassified, he didn’t say much about it. “He was just real secretive until very recently,” said Frank Brown. “I’ve seen him do lectures. People, they wanted to hear more details, things he did in combat, but he really wouldn’t come out about it.” Keith Little, president of the Navajo Code Talkers Association and a Code Talker himself, said he often wondered who developed the code. While in training, he asked questions but only told he’d find out later. “It’s quite an honor to have him as one of the Navajo Code (Talkers), using the Navajo language,” Little said of Brown. “Of course we all respect him for being one of the first.”

[Source" MarineCorpsTimes Felicia Fonseca article 21 May 09 ++]

OBAMA VA OFFICIALS Update 04: On 20 MAY, Tammy Duckworth took the oath of office as the chief spokesperson for the VA. VA Secretary Eric K. Shinseki presided over the swearing in ceremony at Walter Reed Army Medical Center, as Duckworth, a major in the Illinois National Guard, became VA’s Assistant Secretary for Public and Intergovernmental Affairs. As assistant secretary, Duckworth will direct VA’s public affairs programs and its intergovernmental efforts. She also will oversee programs for homeless veterans and consumer affairs. Duckworth was an Army helicopter pilot flying combat missions in Iraq in 2004 and suffered grave injuries when a rocket-propelled grenade struck her helicopter. She lost both legs and partial use of one arm and spent 13 months at Walter Reed Army Medical Center recovering from her injuries. Although Walter Reed is not part of the VA’s extensive network of medical facilities, Duckworth chose the Army site for her swearing in to recognize the facility’s role in her recovery and to encourage other disabled service members and veterans. “Walter Reed is where I first saw how effective the DoD-VA partnership in caring for our veterans can be,” she said. “My VA coordinator had an office at Walter Reed, and I saw her on a weekly basis even before I was discharged to VA care.” In addition to Mrs. Duckworth, three other VA Assistant Secretaries were sworn in at VA HQ. They include:

- Jose D. Riojas, a West Point graduate and former executive with the University of Texas at El Paso, was sworn in as Assistant Secretary for Operations, Security and Preparedness.
- John U. Sepúlveda, a former executive with the U.S. Office of Personnel Management, was sworn in as the Assistant Secretary for Human Resources.
- Roger Baker, a former chief executive officer in the information technology industry, was sworn in as Assistant Secretary for Information and Technology.

[Source: NAUS Weekly Update 22 May 09 ++]

AFTERBURNER Update 01: Many of the 770,000 Air Force retirees and annuitants do not have computer access so they rely on a printed version of the Air Force retiree newsletter, the e-Afterburner. However, ever-rising printing and postage costs make providing hard-copy editions a tough fiscal challenge for the Air Force. Subscribers are being asked to forego receiving hard-copy editions by allowing their names to be removed from the newsletter’s postal mailing list. Retirees and annuitants who receive the e-Afterburner by mail and have computer access should send their full

name, U.S. Postal Service mailing address, and the last four digits of their Social Security number to afpc.retiree@randolph.af.mil. They will then be removed from the hard-copy Afterburner mailing list, reducing printing/postal costs for a future printed version. An online version of the Afterburner, the e-Afterburner, is produced three times a year which can be accessed at www.retirees.af.mil/afterburner. Whereas the printed version is sent only to retired Air Force members and surviving spouses eligible to receive pay and compensation (when funding is available), anyone with computer and Internet access may read or subscribe to the e-Afterburner online. If you need to contact the e-Afterburner their address is HQ AFPC/DPSIAR, 550 C Street W Ste 8, Randolph AFB TX 78150-4713. E-mail address is afpc.retiree@randolph.af.mil and the phone number is (210) 565-2126. Retirees may write to the co-chairmen of the Air Force Retiree Council by using the office symbol, HQ AFPC/CCU, at this address. [Source: NAUS Weekly Update 22 May 09 ++]

SPACE "A" INFO Update 01: Recent changes in the military space available (Space-A) travel regulations have increased the number of dependents traveling without their sponsor. As a result, there are a heightened competition for Space-A seats, especially to and from Europe, Hawaii and the Far East during the summer months. The Space-A discussion board, found at www.pepperd.com can help you keep track of the last category moved at most of the major chokepoints in the Space-A system. If you are not up to speed on travel categories check out the breakdown at Frequently Asked Questions page www.spacea.net/faq.html#categories . [Source: NAUS Weekly Update 22 May 09 ++]

SVAC Update 03: The Senate VA Committee (SVAC) cleared the following bills. All of these bills now move to the Senate floor for action. For complete details, refer to the committee's website at <http://veterans.senate.gov>:

- **S.252: The Veterans Health Care Authorization Act** - Would authorize enhanced care and services for women veterans, to include hiring more mental health professionals. Other parts of the bill strengthen VA recruiting programs, institutional and non-institutional care including treatment of veterans suffering from brain injuries and payment for healthcare providers when the Department of Veterans Affairs is unable to tend to the vet., rehabilitative care for OEF/OIF veterans, research, homelessness, and mental health services, among others.
- **S.407: Veterans Compensation Cost-of-Living Adjustment Act** - Would increase rates of compensation and DIC for service-connected veterans and their survivors. Rates would be effective 1 DEC 09.
- **S.423: The Veterans Health Care Budget Reform and Transparency Act** - Would authorize advanced funding for VA by receiving their budget one year in advance. It's a top priority for VFW. VFW believes that advanced funding will allow VA to better plan for the future, attract and recruit high-quality health care professionals, and allow them to better target gaps in care, among many other program enhancements. Other VFW-supported bills cleared by the committee include:
- **S.475: Military Spouses Residency Act** - Would update USSERA laws for spouses of military personnel with regard to matters of residency.
- **S.669**, which "would halt the VA's practice of reporting veterans' names to the FBI for inclusion in the criminal background check system as mental defectives, until or unless the vets are adjudged to be a danger to themselves or to others.
- **S.728: The Veterans Benefit Enhancement Act** - Would strengthen insurance programs for disabled veterans, expand eligibility for traumatic injury protection, ease the burden on certain combat veterans who seek to establish a service-connection for their disabilities, and strengthen laws protecting veterans and servicemembers from employment discrimination.
- **S.801: The Caregiver and Veterans Health Services Act** - Would establish an unprecedented permanent program to train, support and assist caregivers of disabled veterans. It would also improve care and treatment for veterans

living in rural areas, enables VA to reimburse eligible veterans for emergency care in non-VA facilities, and authorizes the VA to build a new VA medical center in Walla Walla, Wash."

[Source: VFW Washington Weekly 22 May 09 ++]

HVAC Update 06: The House VA Committee (HVAC) held the below listed hearings as listed. For more information on any of the hearings or to view the live webcast refer to the committee's website at <http://veterans.house.gov>.

- The Subcommittee on Oversight and Investigations held a hearing 19 MAY on Gulf War Illness research. Subcommittee Chairman Harry Mitchell (D-AZ) promised this would be one of many the committee plans to hold to examine the impact of toxin exposures during the 1990-1991 Persian Gulf War, and the subsequent research and response by government agencies including the DOD and VA
- The Subcommittee on Health held a hearing 19 MAY on VA medical care and the outreach being made to veterans of all eras. Committee members believe VA is still not reaching those eligible for benefits and services, and has steered away from the use of public advertising.
- The House VA Committee held a roundtable discussion 20 MAY about the growing needs of women veterans in VA. A diverse group of panelists discussed their experience with VA from health care to claims to other services provided. Virginia VFW District 10 Commander, Margo Sheridan, provided her recommendations on changes needed by both VA and DOD. She stressed the need for recognition of women in combat roles and the changing role of women in the military.
- The Subcommittee on Disability Assistance and Memorial Affairs held a legislative hearing 21 MAY on on the following bills.
 - (1) HR 1522 would grant veteran status to United States Nurse Cadet Corps of WWII members, making them eligible for VA benefits and services.
 - (2) HR 2270 would establish a compensation fund for other qualified WWII veterans, such as the Flying Tigers and other "civilian" groups that supported the war effort.
 - (3) HR 1982 would amend the Veterans Claims Assistance Act by directing VA to acknowledge receipt of medical, disability and pension claims, and other communications submitted by veterans within 60 days.
- The Subcommittee on Economic Opportunity on 21 MAY discussed bills designed to update VA's work-study program, increase educational assistance and apprenticeships and on-the-job training, as well as expanding services offered by VR&E and updating servicemembers rights under USERRA laws.

Chairman Bob Filner (D-CA) announced that a package of bills to honor our nation's veterans passed the House of Representatives. Three of the bills approved by the House of Representatives strengthen the protections and benefits for returning veterans.

- H.R. 1088 – Mandatory Veteran Specialist Training Act of 2009 (Herseth Sandlin). This bill reduces from three years to one year the period during which a disabled veterans' outreach program specialist or a local veterans' employment representative must complete the training program provided by the National Veterans' Employment and Training Services Institute.
- H.R. 1089, as amended – Veterans Employment Rights Realignment Act of 2009 (Herseth Sandlin). This bill allows the U.S. Office of Special Counsel to receive and investigate certain USERRA claims containing a related prohibited personnel practice allegation. The bill was introduced to respond to hearing testimony from veterans and results of a pilot program showing that the U.S. Office of Special Counsel was equipped to handle these cases.
- H.R. 1170, as amended – To establish a grant program to encourage the development of new assistive technologies for specially adapted housing (Boozman). This bill directs the Secretary of Veterans Affairs to make grants to encourage the development of new assistive technologies for specially adapted housing for disabled veterans. Grant amounts would be limited to \$200,000 annually per recipient.

- HR 2352, The Job Creation through Entrepreneurship Act of 2009– To authorize \$22 million to establish a veterans' business center program through FY 2011. The program will issue grants using guidelines set up by the SBA, and concentrate on areas where veteran populations exceed national medians. Veterans' business centers would use the money on veteran entrepreneurial development, such as providing small business counseling and government procurement information. VFW believes that this will dramatically increase a veteran's access to entrepreneurial resources.

[Source: VFW Washington Weekly 22 May 09 ++]

VOLUNTARY SEPARATION INCENTIVE Update 01: There is yet another group of disabled veterans on the DOD payroll that is totally excluded from the benefits of the restoration of concurrent receipt: those separated under provision of title 10 US Code Sec 1175 - Voluntary Separation Incentive (VSI) that was used in conjunction with Temporary Early Retirement Authority (TERA, PL 102-484 Sec 4403(f)) to reduce the size of the military establishment during 1992 through 2001. Beginning 31 DEC 92, VSI was offered to service members having at least 6 but less than 20 years of service. They receive an annual amount funded by the Department of defense that equals the multiplication product of four factors: (1) their base pay at separation, (2) number of years of service, (3) 12 and (4) 2.5%. Note that while the annual amount is identical to the 12 times the monthly amount they would have received if retired for the same length of service, the VSI amount is not considered retirement pay. If the VSI recipient later qualifies for VA compensation for service connected disability, the same title 38 US Code sections that require a \$1 for \$1 offset of military retired pay also require the same offset of the VSI amount. While the 2003 NDAA included TERA retirees under Concurrent Retirement Disability Pay (CRDP, 10 USC 1414) it excludes VSI recipients because they are not "retired."

The 2008 NDAA included Chapter 61 medical disability retirees under the Combat Related Special Compensation (CRSC, 10 USC 1413a) but not CRDP. Regardless, one can be retired under Chapter 61 with a minimum of 30 days active service. Extending CRSC to Chapter 61 restores their retirement pay (based on 2.5% x length of service x base pay) that is offset by VA disability compensation. The President's Budget Request for 2010 includes restoration of CRDP for Chapter 61 over 5 years, but includes nothing for VSI recipients. Thus there is some form of relief of the VA disability compensation offset extended to TERA and Chapter 61 retirees, but absolutely no relief for VSI recipients. For sure, the 2010 NDAA should include VSI recipients in concurrent receipt. Veterans can urge the President and their Senators to propose legislation that would enfranchise VSI recipients under the restoration of concurrent receipt that is provided by CRDP and CRSC at [http://capwiz.com/usdr/issues/alert/?alertid=13382371&queueid=\[capwiz:queue_id\]](http://capwiz.com/usdr/issues/alert/?alertid=13382371&queueid=[capwiz:queue_id]) . Here they will find a preformatted message which can be forwarded via email once they have entered their contact data. [Source: USDR Action alert 21 May 09 ++]

VOLUNTARY SEPARATION INCENTIVE Update 02: Pentagon pay officials have suspended the recoupment of several bonuses paid out during the post-Cold War effort to trim the ranks, pending a formal policy and legal review, the Defense Finance and Accounting Service said 21 MAY. The bonuses, including Variable Separation Incentive (VSI), Special Separation Benefit (SSB), severance pay and other payments, were offered to active-duty service members in certain career fields, primarily during the 1990s. Those receiving the payments were required to maintain an affiliation with a unit of the Ready Reserve. But the payments came with the stipulation that those who eventually

earned status as a military retiree would have to pay them back. The repayments, however, apparently have caused financial difficulties for at least some of the affected veterans, and more than a few contacted their congressional representatives. “Over the past few months, the department has received numerous congressional inquiries concerning the recoupment,” Pentagon Comptroller Robert Hale wrote in a 18 MAY memo sent to DFAS Director Teresa McKay ordering the recoupment suspension. “The inquiries raise concerns about financial hardship resulting from these reductions in retired pay, particularly during the current economic situation.”

According to DFAS, the federal statutes governing the bonus programs do not allow the Pentagon or DFAS to alter repayment ratios or provide alternative repayment plans, regardless of a retiree’s finances. Still, several members of Congress, Hale wrote in the memo, released by DFAS, asked the Pentagon to identify “any available options to alleviate the financial difficulties that these members are encountering.” The suspension of recoupment efforts affects military retirees in an active pay status effective for May 2009 retired pay entitlements. As such, military retired pay for those members received on 1 JUN 09, will not be reduced by any recoupment amounts, DFAS says. About 1,100 former service members are affected by the suspension, according to DFAS spokesman Tom LaRock — nearly 600 of whom were already seeing reductions in their retired pay, and another 600 or so whose cases were under consideration for reductions. DFAS says letters to military retirees in the affected recoupment statuses will soon be mailed advising them of the suspension of recoupment payments. Those same retirees will be sent a follow-up letter after the review is completed advising them of the review’s conclusions. Retirees with questions can call DFAS’s Retired and Annuity Pay Contact Center at 1-800-321-1080 between 0700 and 1930 M-F according to DFAS. Select options 5, 1, 5, and 0 to speak to a live customer representative. [Source: ArmyTimes William H. McMichael article 21 May 09 ++]

DIC Update 06: Dependency and Indemnity Compensation (DIC) for surviving spouses and orphans would increase by 12%, the first significant adjustment in 12 years, under new bipartisan legislation. Reps. Steve Buyer (R-IN) and Tim Walz (D-MN), are co-sponsors of the legislation that would set the annuity at 55% of the rate of disability pay for someone who is permanently and totally disabled — the same percentage that applies to many other federal survivors programs. Aside from annual inflation adjustments, this would be the first change in the Department of Veterans Affairs benefit in 16 years, according to Gold Star Wives of America, one of the many military and veterans groups supporting the proposal. The basic rate is now \$1,154 a month for a surviving spouse, plus another \$286 a month if there are surviving children under than 18. With the proposed increased the base DIC amount would raise to \$1,470 monthly. More than 300,000 surviving spouses and more than 30,000 surviving children receive the payment.

The monthly DIC benefit is provided to survivors when a service member dies on active duty, when a veteran dies of a service-related injury or disease, or when a veteran dies of a nonservice-related condition but was totally and permanently disabled. In that last instance, a death not related to military service, the veteran must have been rated as totally disabled for at least 10 years, or for at least five years if they were released from active-duty less than 10 years before death. DIC also is paid to survivors of veterans held for a year or more as a prisoner of war, a rule that applies only to deaths since Sept. 30, 1999. Buyer, a Desert Storm veteran, is the ranking Republican on the House Veterans’

Affairs Committee, which is responsible for DIC legislation. Walz, also a member of that committee, is a retired Army National Guard command sergeant major, making him the highest-ranking enlisted retiree ever to serve in Congress. In a statement, Gold Star Wives, representing survivors of deceased service members and veterans, called the Buyer-Walz legislation “a milestone and the result of a tireless grass-roots effort among many members of the military community.” [Source: ArmyTimes Rick maze article 5 May 09 ++]

ECS 2009 Update 11: Millions of Americans enjoying their small windfall from President Barack Obama's "Making Work Pay" tax credit are in for an unpleasant surprise next spring. The government is going to want some of that money back. The tax credit is supposed to provide up to \$400 to individuals and \$800 to married couples as part of the massive economic recovery package enacted in February. Most workers started receiving the credit through small increases in their paychecks in the past month. But new tax withholding tables issued by the IRS could cause millions of taxpayers to get hundreds of dollars more than they are entitled to under the credit, money that will have to be repaid at tax time. At-risk taxpayers include a broad swath of the public: married couples in which both spouses work; workers with more than one job; retirees who have federal income tax withheld from their pension payments and Social Security recipients with jobs that provide taxable income. The Internal Revenue Service acknowledges problems with the withholding tables but has done little to warn average taxpayers. "They need to get the Goodyear blimp out there on this," said Tom Ochenschlager, vice president of taxation for the American Institute of Certified Public Accountants.

IRS spokesman Terry Lemons said, “For many, the new tax tables will simply mean smaller-than-expected tax refunds next year.” The average refund was nearly \$2,700 this year. But taxpayers who calculate their withholding so they get only small refunds could face an unwelcome tax bill next April, said Jackie Perlman, an analyst with the Tax Institute at H&R Block. "They are going to get a surprise," she said. Perlman's advice: check your federal withholding to make sure sufficient taxes are being taken out of your pay. If you are married and both spouses work, you might consider having taxes withheld at the higher rate for single filers. If you have multiple jobs, you might consider having extra taxes withheld by one of your employers. You can make that request with a Form W-4. The IRS has a calculator on its Web site to help taxpayers figure withholding. So do many private tax preparers.

Obama has touted the Economic Stimulus (ECS) tax credit as one of the big achievements of his first 100 days in office, boasting that 95% percent of working families will qualify in 2009 and 2010. The credit pays workers 6.2% of their earned income, up to a maximum of \$400 for individuals and \$800 for married couples who file jointly. Individuals making more \$95,000 and couples making more than \$190,000 are ineligible. The tax credit was designed to help boost the economy by getting more money to consumers in their regular paychecks. Employers were required to start using the new withholding tables by 1 APR. The tables, however, don't take into account several common categories of taxpayers, experts said. For example:

- A single worker with two jobs making \$20,000 a year at each job will get a \$400 boost in take-home pay at each of them, for a total of \$800. That worker, however, is eligible for a maximum credit of \$400, so the remaining \$400 will have to be paid back at tax time - either through a smaller refund or a payment to the IRS.
- The IRS recognized there could be a similar problem for married couples if both spouses work, so it adjusted the withholding tables. The fix, however, was imperfect. A married couple with a combined income of

\$50,000 is eligible for an \$800 credit. However, if both spouses work and make more than \$13,000, the new withholding tables give them each a \$600 boost - for a total of \$1,200. There were 33 million married couples in 2008 in which both spouses worked. That's 55% of all married couples, according to the Census Bureau.

- A single college student with a part-time job making \$10,000 would get a \$400 boost in pay. However, if that student is claimed as a dependent on a parent's tax return, she doesn't qualify for the credit and would have to repay it when she files next year.
- The Social Security Administration sent out \$250 payments to more than 50 million retirees in May as part of the economic stimulus package. The payments went to people who receive Social Security, Supplemental Security Income, railroad retirement benefits or veteran's disability benefits. The payments are meant to provide a boost for people who don't qualify for the tax credit. However, they will go to retirees even if they have earned income and receive the credit. Those retirees will have the \$250 payment deducted from their tax credit but not until they file their tax returns next year, long after the money may have been spent.
- Retirees who have federal income taxes withheld from pension benefits also are getting an income boost as a result of the new withholding tables. However, pension benefits are not earned income, so they don't qualify for the tax credit. That money will have to be paid back next year when tax returns are filed.

More than 20 million retirees and survivors receive payments from defined benefit pension plans, according to the Employee Benefit Research Institute. However, it is unclear how many have federal taxes withheld from their payments. The American Federation of State, County and Municipal Employees union raised concerns about the effect of the tax credit on pension payments in a letter to Treasury Secretary Timothy Geithner in March. Geithner responded that Treasury and IRS understood the concerns and were "exploring ways to mitigate that effect." Rep. Dave Camp of Michigan, the top Republican on the tax-writing House Ways and Means Committee, said Geithner has yet to respond to concerns raised by committee members. "So far we've got the, 'If we don't address this maybe it will go away' approach," Camp said. [Source: Military.com AP article 4 May 09 ++]

SOCIAL SECURITY GOP & WEP: There are thousands of retired civilian government workers affected by the Government Pension Offset (GPO) and the Windfall Elimination Provision (WEP). These are two provisions of Social Security law. The provisions reduce benefits of retirees who have earned a pension through work in federal, state, or local governments and are also eligible for Social Security benefits based on their spouse's or their own earnings in Social Security covered employment. The reductions in some cases can result in the loss of an entire Social Security benefit and can be financially devastating when a spouse passes away:

- The GPO affects federal retirees who receive a pension based on government work where they did not pay Social Security taxes. People affected by the GPO may qualify for spousal or widow's benefits based on their husband (or wife's) work record under Social Security covered employment. But the GPO can reduce those benefits by two-thirds of your government pension. Say you get a monthly civil service pension of \$600. Two-thirds of that, or \$400, must be deducted from your Social Security benefits. If for example, you are eligible for a \$500 widow's or spousal monthly benefit from Social Security, you would receive only \$100. After the \$96.40 deduction for the Medicare Part B premium you would receive \$3.60 cents a month.
- The WEP affects the Social Security benefits of federal workers who worked both in a job in which they paid into Social Security, and later one that did not withhold Social Security taxes, such as a government agency or an employer in another country. Those with 30 years or more of Social Security covered by employment are not affected by the WEP. But those with less, as you discovered, face Social Security benefit reductions of as much as 60%.

The Senior Citizens League (TSCL) believes these unfair reductions severely impact the income of people who spent their careers serving others in their communities, states and through their work in

federal agencies. TSCL supports legislation that would repeal the GPO and WEP. Two bills that do are The Social Security Fairness Act of 2009 (H.R.235) introduced by Representative Howard Berman (CA), and S.484 introduced by Senator Dianne Feinstein (CA). At present H.R.235 has 279 cosponsors and S.484 has only 20. Those who would like to see these Social Security provisions eliminated or modified should contact their legislators and request they sign on as cosponsors of these bills. [Source: TSCL June Advisor 20 May 09 ++]

MEMORIAL DAY REMEMBRANCE Update 03: Most people are aware of the famous American military cemetery at Omaha Beach, Normandy, site of one of the D-Day landings in 1944. But few know there are twenty-one other American military cemeteries in eight different countries memorializing those who were not brought back to the United States after World War I and World War II. Each of these commemorative places is powerful and unique, and has its own stories to tell. These cemeteries, created and maintained by the U.S. government through the American Battle Monuments Commission, are permanent memorial sites, built to stand the test of time. Collectively they contain the remains of 125,000 Americans. There are 94,000 more names commemorated on Walls of the Missing. Dignified and serene, they were created to honor America's fallen, but they are also intended to inspire and teach the living. There are American World War I and World War II cemeteries in England, France, the Netherlands, Luxembourg, Belgium, Italy, Tunisia and the Philippines. Most of the cemeteries are located on or near the major battlefields. All are places of astonishing natural beauty, embellished with great architecture and powerful works of art. It is the contrast of these remarkable burial grounds with the horrors of war that gives them their profound impact.

A major documentary made about these remarkable shrines is now available. Titled "Hallowed Grounds", it

brings them all to life with stunning visuals and powerful storytelling. The program weaves elements of a historical documentary with contemporary scenes of the cemeteries. The documentary moves chronologically through both world wars of the 20th century. The narrative provides a general history of the wars, and briefly recounts the battles and operations that took place in the areas where the cemeteries are located. Each cemetery contains tales of courage and unselfish service to comrades and country. Some of the fallen profiled in the program are well known: the poet Joyce Kilmer, the bandleader Glenn Miller, the five Sullivan Brothers, General George S. Patton. But most were ordinary men and women caught up in the calamity of war. These military cemeteries also personify American diversity, and the program includes portraits of some of the many African-American, Hispanic-American, Japanese-American, Native-American, and Anglo-Americans who are buried in them. Included are numerous interviews with formal and informal historians, visiting relatives, and foreign nationals who act and speak their appreciation on-camera.

Hallowed Grounds allows Americans to see for the first time some of their great national treasures. It seeks to heighten respect for those who lost and continue to lose their lives for America, and reminds viewers of the great and tragic cost of war in the pursuit of liberty. It is a hour long production of New Voyage Communications in Washington, DC, directed by national Emmy Award winner Robert Uth, and produced and written by Robert Uth and Glenn Marcus. Peter Thomas, a veteran of both the Normandy landings and the Battle of the Bulge, provides the narration. Hallowed Grounds premiered on PBS 25 MAY 09. You can check Local Listings to see when it will air on your local PBS station a

www.pbs.org/hallowedgrounds/airdates.html. A DVD is available of this presentation for \$24.49 which can be purchased online at www.shoppbs.org/product/index.jsp?productId=3584372. Also listed and available are numerous other DVDs on American and World History. All profits go toward support of the Public Broadcasting system. [Source: VA Secy Vet Group Liaison Officer input 20 May 09 ++]

POW DESIGNATION Update 04: Reps. Mike Coffman of Colorado and Jim Marshall of Georgia have asked the Department of Veterans Affairs to investigate whether some veterans are falsely claiming to have been prisoners of war. Coffman [R-CO], a Marine veteran of the first Gulf War who also served in Iraq and Marshall (D-GA), who served in Vietnam with the Army sent the request to VA Secretary Eric Shinseki on 18 MAY. According to the lawmakers, the Department of Veterans Affairs is paying disability benefits to 286 members claiming they were held as POW's during the first Gulf War, but the Department of Defense is only aware of 21 POWs. The Associated Press reported in April that the Department of Defense has identified a total of about 580 surviving POWs from the Vietnam War and the first Gulf War in 1991, but the VA is paying disability benefits to about 1,250 purported POWs. [Source: Denver Daily News & Denver CBS-4 19 May 09 ++]

VA CLAIMS BACKLOG Update 26: On 14 MAY the House Veterans' Affairs Disability Assistance and Memorial Affairs Subcommittee, led by Chairman John Hall (D-NY), conducted a hearing to continue its oversight of the Board of Veterans' Appeals (BVA), the Appeals Management Center (AMC), and the United States Court of Appeals for Veterans Claims (CAVC). The hearing focused on the efficiency and effectiveness of the agencies tasked with handling appeals filed by veterans pertaining to claims for benefits initiated at the Department of Veterans Affairs (VA). Chairman Hall said, "The process a veteran goes through when filing an appeal is a never ending story that this Subcommittee has heard many times before. A new claim is more like a short story. Upon submission, it can be developed and rated in about six months. However, if a veteran disagrees with the VA decision and files an appeal, then it becomes an epic tale that can go on for years or even decades. Our goal today is to learn more about the causes of delays in order to improve the administrative and judicial appeals processes to more efficiently serve veterans."

At the hearing, members heard the frustrations that veterans and survivors encounter waiting months and years on an appeal decision. Veterans who are denied or have benefits delayed as a result often face socioeconomic hardships, lack access to medical care, and miss opportunities to take advantage of other benefits that would come with service connection, such as vocational rehabilitation, life insurance or housing allowances. Veterans also find traveling to Washington, DC or even a Regional Office (RO) for a personal hearing with the Veterans Benefits Administration (VBA) to be cost prohibitive and travel boards often are difficult to schedule. Witnesses offered testimony detailing the complex appellate process, which involves multiple layers and jurisdictions, lengthy waiting times, and stressful and confusing choices for veterans and their families. Specifically, witnesses discussed the longstanding delay in forwarding appeals to the BVA from VA regional offices, the high error rate at the BVA with no accompanying remedial action, and the misapplication of the clearly erroneous standard by the CAVC. In fiscal year 2008, it took an average of 563 days for the BVA to process an appeal, 567 days for the AMC and 446 days for the CAVC. Both the BVA and the CAVC have high remands rates, around 37% and 70% respectively (sending the appeal back to the originating agency/entity usually for further procedural development without making a decision), a process many veterans and their

advocates have dubbed the “Hamster Wheel”. Recommendations to eliminate this phenomenon included:

- Dissolving the Appeals Management Center
- Changing VA policy that requires claims be returned to the RO if a veteran submits additional evidence after requesting the claim be sent to BVA
- Reducing the appellate period from one year to six months
- Addressing the inefficiency of federal courts not having authority to certify a veteran’s lawsuit as a class action.

Chairman Hall summarized the hearing and said, “I am committed to working to improve the efficiency and effectiveness of the appellate processes that produce better outcomes than the current maze of appeals, remands, re-remands, and undue delays to the benefit of our veterans, their families, and survivors. I look forward to working with all of the stakeholders as there remains much work to be done. Congressman Bob Filner (D-CA) , Chairman of the House Committee on Veterans' Affairs said, "It is clear that VA needs to reform the claims processing system by greatly improving the accuracy and quality of its decisions. The VA continues to see the number of pending cases and appeals rise. This trend is expected to continue due to the current conflicts. The VA, the BVA, and the CAVC must work cooperatively to address lengthy delays and ensure veterans get the timely justice that they deserve and Congress envisions." [Source: Rep. Bob Filner press release 14 May 09 ++]

VA NURSING HOMES Update 03: Senate Veterans’ Affairs Committee Chairman Daniel K. Akaka (D-HI) and Senator Russ Feingold (D-WI) applauded news on 12 MAY that the Department of Veterans Affairs (VA) is finally implementing a law to reimburse state nursing homes for the full cost of the care they provide for certain seriously disabled veterans. More than two years after Congress passed legislation to provide full nursing home reimbursements for veterans with disabilities rated 70% or greater, cash-strapped states and more than a thousand disabled and elderly veterans stand to benefit from the law’s implementation. VA will pay retroactive reimbursements for nursing home care back to 1 MAR 07.

- “This long-overdue benefit will help disabled veterans receive the care they earned through their service. It will provide relief to nursing homes across the country that have been burdened with the cost of their care, despite Congress’s order that VA provide reimbursement. I am pleased that VA will provide retroactive benefits for the veterans and state homes that have waited for over two years to receive the assistance they are entitled to,” said Akaka.
- Feingold stated, “For over a year, I have been pressing the VA to put in place these regulations so that veterans, and the state homes that care for them, won’t have to pay for care in state long-term care facilities that they would receive for free in VA facilities. I am pleased that the new administration has finally acted on this issue and our veterans who have more than earned this care will be able to receive it in more facilities and without having to use their often limited income to pay for it.”

On 5 MAY 06, Senator Akaka introduced the Veterans Long-Term Care Security Act directing VA to pay the full cost of nursing home care for certain disabled veterans. That bill was later incorporated into the omnibus Veterans Benefits, Health Care, and Information Technology Act of 2006, which became Public Law 109-461 on 22 DEC 06. When more than a year had passed and VA had yet to implement the law, Akaka and Feingold were joined by a bipartisan group of Senators in calling on VA to quickly issue the regulations necessary for implementation. [Source: Military.com article 12 May 09 ++]

TAXATION AFTER DISCHARGE Update 01: Proposed legislation (if approved) would

make California more tax-friendly for retirees. Retired Army Col. Warren Enos, president of the California Council of Chapters of the Military Officers Association of America, which represents 39,000 members and 45 MOAA chapters, is charging hard in support of that California legislation, Assembly Bill 1077. The bill, sponsored by Assemblyman Joel Anderson, would eliminate California state income tax on military retired pay and military survivor annuities. It was scheduled for a hearing and a vote 11 MAY, but action was postponed until a date to be determined, according to Ryan Clumpner, an aide to Anderson. The delay is not necessarily a setback. In fact, I consider it good news: It will provide time for the California Assembly to gather all the facts before the vote. And it's an important window of opportunity for retirees to contact their state representatives. Politicians work for us; we can't be hesitant to provide input on issues that affect us. A lot of retirees are already on board.

It's not just retirees in California following this issue. Retired Air Force Chief Master Sgt. Jerry Gething, a 30-year retiree living in Maryland, noted that the state began exempting the first \$5,000 in retirement pay from state tax in 2006. "However, I strongly believe they can eliminate [the tax on retirement pay] completely," he said. "To see that AB 1077 is a similar initiative in California is heartwarming." Gething is wrapping up his master's degree with a thesis on the issue of eliminating all state taxation of military retirement pay in Maryland, and he said he plans to take up the issue with his own state representatives. Retired Air Force Brig. Gen. Paul Cohen is backing the cause in Nebraska. "We've been working this here for five years and have presented it in much the same way, as an economic development issue," he wrote. "It's an uphill battle, particularly in times of financial strain, but it's worth it." Of course, states looking at this issue invariably will focus first on lost revenue from exempting retired pay from taxation. But the smart states will think about the benefits of attracting the trained, able, experienced work force that retirees represent. In the meantime, as soon as we see movement on the California initiative, I'll let you know. [Source: NavyTimes Alex Keenan article 25 May 09 ++]

VET BENEFITS CLASH: With five words, the executive director of Iraq and Afghanistan Veterans of America opened a rift among veterans groups that could derail efforts to improve mental health care and other benefits. The dispute — with older veterans complaining that Iraq and Afghanistan veterans are getting too much attention and too much money while they wait in long lines for medical appointments — was sparked by a statement issued 11 MAY by Paul Rieckhoff, founder and chief of IAVA, about the fatal shooting of five service members at a counseling center in Iraq, allegedly by another U.S. service member. Trying to put the reported case of friendly fire in perspective, Rieckhoff said: "Unlike during the Vietnam War, today's military is a professional, all-volunteer force." He went on: "There have been only five cases of intentional fratricide by U.S. service members in Iraq. But these incidents, however rare, draw public attention to an important issue: the enormous stress on our armed forces. Much more must be done to address troops' psychological injuries before they reach a crisis point."

The phrase "Unlike during the Vietnam War" is being taken as a jab at the professionalism of Vietnam veterans. Joe Morgan, a Vietnam veteran and president of Veterans of Modern Warfare, said Rieckhoff's statement has "stirred a fierce and justifiable outrage by all veterans, not just the Vietnam veterans he maligned." The head of the nation's largest organization for combat veterans, VFW commander Glen Gardner Jr., also criticized the statement, saying, "Rieckhoff doesn't need to be

reminded that every entitlement, every service and every program Iraq and Afghanistan warriors enjoy — many of whom are VFW members — is because previous generations of, as he regrettably put it, ‘nonprofessionals’ demanded and fought to be properly recognized and respected for their service to our country. He owes a sincere apology to our brethren.”Reickhoff did issue an apology. “We have tremendous respect for all generations of vets — especially Vietnam vets — and would never want to discredit any other veteran, generation of veterans or veterans group,” he said in a subsequent statement. “It was not our intent to offend anyone or disparage anyone. If we did, we sincerely apologize.”

Rep. Bob Filner (D-CA), the House Veterans’ Affairs Committee chairman, said the squabble among veterans of different generations shows two things: “New veterans don’t know much about older veterans, and don’t feel any ties to them, and everyone is worried that someone is going to get more than they or something better than them.”Filner has faced criticism as he has pushed to improve benefits for World War II veterans who served in the Philippine Scouts and the Merchant Marine, two groups who were promised veterans benefits that were never delivered. Some of the opposition to his initiative has been based on the view that spending money on older veterans when there are pressing needs for Iraq and Afghanistan veterans is wrong. But Filner said he thinks everyone needs to be treated fairly. “A broken promise for one veteran is broken promise for all veterans,” he said. [Source: MarineCorpsTimes Rick Maze article 18 MAY 09 ++]

PTSD STRESSOR LETTER: A Stressor Letter is used by Veterans Affairs (VA) raters to identify potential traumatic events that may have invoked Posttraumatic Stressor Disorder (PTSD) symptoms in combat veterans. The Stressor Letter consist of three vital parts: Life before military service; Life during military service (to include traumatic event(s); and Life after traumatic event(s). Following is an example Stressor Letter format that has been used by veterans as supportive evidence for their PTSD claim. It should be modified as needed to your case should you decide to use it:

(Life before Military Service)

I was born on ___ in ___. I am the ___ of ___ children born to my biological parents. My childhood seemed normal and carefree to me. In elementary school I performed well academically, joined a few school clubs, and participated in the Boy Scouts. I had a few close friends during that time, and we spent much of our time playing many different sports. I also had a few hobbies during those formative years. For instance, I ___. I was never sick, never had any broken bones, and was pretty much healthy. I remember my mother being very protective of me. She always made sure I was safe and not surrounded by trouble. It all seemed pretty normal to me.

During high school I was actively involved in ___. Football, baseball and basketball consumed a lot of my time. I also discovered girls, and along with my friends we would do a lot in order to impress them. For example, when I got my driver’s license I would borrow my parents car so that I could cruise the neighborhood so that the girls would see me driving. Also, during this time I expressed a lot of interest in the Armed Forces, especially the ___. I loved the uniforms and the girls seemed to like them as well. I was young and impressionable. My thinking was at the time, if I could join the ___ it would be easy to capture girls. They seemed to like the uniform a lot. My senior year in high school I met with a ___ recruiter who pointed out all of the positive aspects of the ___. I was hooked. When I

graduated from high school in ____, I joined the ____ two months later.

(Life during Military Service)

In ____, I enlisted in the ____ as a means of seeking gainful employment, fighting for my country, and impressing the girls. I completed boot camp at ____. I thought boot camp was pretty easy. I was always physically fit, did well academically in school, so boot camp was easier than I anticipated. I made squad leader the first week I was there. After boot camp I attended ____. After six weeks of ____ I was a lean mean fighting machine. I was ready for anything. After ____, I got orders to Vietnam. I arrived in Vietnam in ____. When I got there my initial impression was complete shock. The place smelled bad, looked bad, and seemed dirty. After processing in, I was assigned to ____. As soon as I got settled in a grisly old ____ made it a point to tell me I would never see the states again. I didn't let him know at the time, but that scared the heck out of me. After only two weeks in country I witnessed the horrors of war.

- January 1968, while serving guard duty, my forward base camp was mortared by the North Vietnamese Army (NVA). Mortars were dropping in everywhere. The sound was loud and the smell was horrible. A machine gunner about 10 yards away from me was hit on the left shoulder. The mortar blew off the entire left side of his body. I tried to administer first aid, but he died almost immediately. After the mortar attack stopped, I remember sitting in the bunker shaking badly for about 30 minutes. I couldn't get the images out of my head of seeing my comrades killed.
- February 1968, during a search and destroy mission in the jungle my unit came across three dead American soldiers. They were nailed to a tree, their ears had been cut off, and all of them had mud stuffed down their throats. The sight was horrible. We took them down and properly bagged them up and sent them to the morgue. The smell of their rotting flesh was awful. I didn't sleep well for three weeks after that incident.
- April 1968, during a search and destroy mission my unit was involved in a very intense firefight. We lost two guys in our unit. I just ended my pointman duties when the firefight started. The guy that replaced me was hit in the face by a few rounds. He died instantly. Another guy was hit in the chest and died as well. Several other members of our unit were wounded pretty bad. I'm not sure how I survived, but I did. In fact, I didn't get a scratch. But, I was terrified. I had a few horrible dreams about the incident that night and days later. Of course, being the Marine I thought I was, I didn't tell anyone.
- July 1968, me and my unit went on night patrol duty near a delta outside of Da Nang. Two hours into our patrol we ran into a huge platoon of NVA troops. A firefight ensued. The fighting was intense. We lost five guys in my unit and several others were injured badly. Again, I escaped with only a bruise on my left thigh. This firefight scared me the most. It was dark, and all you could see were tracers from machine guns. I was sure one of those bullets had my name on it.

After that incident, the remainder of my tour was uneventful. I carried out other seek & destroy missions against enemy troops, but saw no action. During the seek & destroy missions, I enthusiastically carried out my duties as a pointman, and where ever else I was assigned. I served in the Vietnam theatre of operations for ____ months. During my combat duty in Vietnam, I lost many close war buddies, and witnessed many American soldiers die in major firefights with Viet Cong and North Vietnamese Army (NVA) troops. As a result, I struggled daily from survivors' guilt. My buddies died in combat and I, for the most part, incurred no major injuries. I experienced many life-threatening battle situations, and egregious life-sustaining scenarios while in the combat zone of Vietnam. I think about those events constantly.

(Life since the Traumatic Event(S))

When I left Vietnam and flew back to the states I remember being relieved and at the same time depressed and angry. I was glad to leave combat, where I lost many buddies and saw horrible things that no one should be subjected to. I was extremely sad as well. I was sad that some of my buddies would never be returning to their families, and I was really sad knowing that I was leaving some of my buddies in harms way. When I got back to the states I was pissed. People called me a baby killer, war monger, and death machine. People who knew nothing about the war thought I was an animal and it made me very angry.

As a result, I found that I could not tolerate being around people, not even my family. Strangers who knew I served my country treated me with disdain. My family treated me like I had a disease. They were afraid to talk to me, and when they did muster up the courage to talk to me they always seemed to say the wrong thing. I go to bed angry and afraid most nights. Angry that my military experience in Vietnam has caused many problems for me --afraid to go to sleep because the nightmares of Vietnam scare me badly. My brain cannot tell fact from fiction and when I have dreams about Vietnam it's like I am re-living those horrible firefights I used to have in Vietnam. Daily, I find myself checking my windows, my door locks, and checking under my bed for intruders. I learned those skills in the Marine Corps, but my third wife seems to think I have lost my mind. She calls me paranoid.

Also, since I separated from the Marine Corps I have had a very difficult time sustaining employment. I first worked for the police department, but I was let go because my supervisor thought I was "trigger happy." I later worked for many small security guard firms, but all of them let me go. They said I had a temper that was out of control and that I was going to hurt someone. To earn a living I sold cars for many different dealerships. I was fired from every place I worked. The sales managers would piss me off. On one occasion, a sales manager refused to pay me and the next thing I knew I was being pulled off of the guy. I must have snapped, because I do not remember attacking him. I realized after working for automobile dealerships for more than a decade, I had to find something that I could do on my own. Since I knew the car business pretty well, I decided to open a small note lot. That didn't last very long. The customers would make so angry that I could not sleep at night. I have been in a downward spiral of despair ever since.

I went to the VA to seek help for my mental anguish. I was informed that I may have PTSD. The psychological impact of multiple war experiences may have led to the many negative psychological issues and cognitive distortions that I have struggled with since departing Vietnam. I currently participate in a combat PTSD group at my local Vet Center, and I take many medications to help with my anxiety, depression, and high blood pressure.

[Source: www.veteranprograms.com/id57.html May 09 ++]

NAVY CROSS: The Navy Cross is the highest medal that can be awarded by the Department of the Navy and the second highest award given for valor. It is normally only awarded to members of the United States Navy, Marine Corps and Coast Guard but could be awarded to all branches of United States military as well as members of foreign militaries. It was established by Act of Congress (Pub.L. 65-253) and approved on February 4, 1919. The Navy Cross is equivalent to the Distinguished Service Cross (Army) and the Air Force Cross. The medal may be awarded to any member of the armed forces while serving with the Marine Corps, Navy, or Coast Guard (in time of war only) who distinguishes

himself in action by extraordinary heroism not justifying an award of the Medal of Honor. The action must take place under one of three circumstances:

- While engaged in action against an enemy of the United States
- While engaged in military operations involving conflict with an opposing foreign force
- While serving with friendly foreign forces engaged in an armed conflict in which the United States is not a belligerent party.

To earn a Navy Cross the act to be commended must be performed in the presence of great danger or at great personal risk and must be performed in such a manner as to render the individual highly conspicuous among others of equal grade, rate, experience, or position of responsibility. An accumulation of minor acts of heroism does not justify an award of the Navy Cross. As originally authorized, the Navy Cross could be awarded for distinguished non-combat acts, but legislation of August 7, 1942 limited the award to acts of combat heroism. Originally the Navy Cross was the Navy's third-highest decoration, after the Medal of Honor and the Navy Distinguished Service Medal. In August 1942 Congress revised the precedence, making the Navy Cross senior to the Distinguished Service Medal. Since that time the Navy Cross has been worn after the Medal of Honor and before all other decorations. Additional awards of the Navy Cross are denoted by gold stars five-sixteenths of an inch in diameter affixed to the ribbon. [Source: http://en.wikipedia.org/wiki/Navy_Cross May 09 ++]

ALABAMA VET CEMETERY Update 02: The Alabama Legislature has approved a bill to allow construction of a state-run veterans' cemetery. The Senate voted unanimously 14 MAY to give the bill final approval and sent it to the governor. The legislation by Republican Rep. Randy Davis of Daphne would authorize the state Department of Veterans' Affairs to open a cemetery across from Historic Blakeley State Park in Spanish Fort. For a list of all Cemeteries located in Alabama refer to <http://www.idreamof.com/cemetery/al.html>. At the federal level The Department of Veterans Affairs is constructing the new Alabama VA National Cemetery near Birmingham which will be located in the town of Montevallo , approximately five miles west of Interstate 65 and adjacent to American Village, a museum that teaches history and citizenship through re-creation of colonial life. VA presently maintains two other national cemeteries in Alabama listed below for which records of internment can be viewed at <http://www.interment.net/data/us/al/russell/ftmitnat/index.htm>:

- The Fort Mitchell National Cemetery, 553 Highway 165, Seale, AL 36875 Tel: (334) 855-4731 This cemetery of 279.8 acres officially opened in 1987 and presently has space available to accommodate casketed and cremated remains. In late 1980s, the old post cemetery at Fort Mitchell was officially identified as the location for a national cemetery in Federal Region IV, to serve veterans residing in North Carolina, South Carolina, Georgia, Florida, Alabama, Tennessee and Mississippi.
- The Mobile National Cemetery, 1202 Virginia Street, Mobile, AL 36604 located within the grounds of Magnolia Cemetery encompasses 5.2 acres. For information contact: Barrancas National Cemetery (850) 453-4108. This cemetery presently buries only eligible family members and cremated remains.

[Source: AP article 14 May 09 ++]

GI Bill Update 47: Between 1 & 15 MAY more than 25,000 veterans signed up for the new GI Bill when the Department of Veterans Affairs (VA) opened its online registration site on 1 MAY. There is a concern is that the program could be so enticing that many service members will leave the military to go to school. Some observers believe there is going to be a giant sucking sound from a large number of individuals saying, 'Why wouldn't I go to college, this is a great opportunity'. Cindy Williams, a

security analyst at the Massachusetts Institute of Technology in Cambridge said, "I would say nobody knows. In particular, the VA doesn't know and the Department of Defense doesn't really know." The new GI Bill is an overhaul of the original 1944 law that was responsible for sending a generation of veterans to college. It will not replace the World War II-vintage bill, known as the Montgomery GI Bill. It is an additional offering by the VA. The new bill is proving more popular, though, because it pays the full cost of tuition for public undergraduate schools. The Montgomery bill pays a flat rate. This bill will cost taxpayers \$62 billion during the next decade as it aims to reward some of the 2.1 million veterans who served any time after 9/11 for at least 30 days.

The number of education benefits' applications submitted in the first week was more than three times the rate of benefit applications usually received through the Veterans Online Application system (VONAPP). VONAPP is used for all education benefit programs, as well as for submission of applications for VA disability compensation and pension benefits. The unprecedented volume of first-day applications slowed the system for some, but by the next morning performance was fully restored. Veterans can apply on-line through the GI Bill Web site at <http://www.GIBILL.VA.gov>. Additionally, paper applications are accepted at VA regional processing offices located in Muskogee, Okla.; Atlanta, Ga.; St. Louis, Mo.; and Buffalo, N.Y. Veterans applying now receive a "Certificate of Eligibility" and information about their benefits under the Post-9/11 GI Bill. Applicants may expect to receive their certificate within 24 days of submission. VA continues to urge precertification in anticipation of a tidal wave of applications this fall. VA officials expect about 450,000 people to use the Post-9/11 GI Bill this year.

Pentagon personnel officials won't have a sense of the impact of the new GI Bill until a few months after the 1 AUG start date, when trends should become clearer. But one provision added to the bill could encourage members of the military to remain in the force for at least one more four-year term. If they do, they can transfer the benefits of the GI Bill to an immediate family member. The provision gives veterans 36 months of benefits that can be divided among a spouse and children. In addition to improving retention, the transferability clause of the GI Bill could also be a strong recruiting tool. "The GI Bill, as we see it, will be a net positive for retention," says Bill Carr, deputy under secretary for military policy at the Pentagon. About 88% of service members who participated in a Pentagon survey about the GI Bill say the transferability option is "important," says Mr. Carr. The GI Bill comes at a time when the effort to recruit and retain troops is in flux. All four services are meeting or exceeding their active-duty recruiting and retention goals this year. But cost-cutting at the Pentagon could undermine those successes, because recruiting and retention rates are buttressed by billions of dollars in bonuses. On the other hand, recruiting always improves during hard economic times as military jobs become more desirable. That has reduced the need to spend so much money on recruiting and retention. Military pay also has kept military service attractive, increasing by more than 28% since 2001. [Source: CS Monitor Mary Knox article 15 May 09 ++]

VA HOME LOAN Update 16: The Wisconsin Department of Veterans Affairs (WDVA) recently announced that it's now offering loans under the Primary Mortgage Loan Program (PLMP) at a 30-year fixed interest rate of 4.85 percent, the lowest rate ever offered in the program. WDVA state veterans' home loans may be used to finance the purchase or construction of a single family home, a condominium or two to four unit owner occupied residence that will be the veteran's principal

residence. The loan requires only a 5% down payment, which may be provided in whole or in part by an approved down payment assistance program. For more information, visit the WDVA Veteran Loan Programs website <http://dva.state.wi.us/loans> or telephone 1-800-947-8387. [Source: NAUS Weekly Update 15 May 09 ++]

DHS REPORT TRASHES VETS Update 01: Secretary of Homeland Security, Janet Napolitano, reported that the highly contentious report on “Rightwing Extremism” had been withdrawn and is being rewritten. Sec. Napolitano explained that the report “...was not authorized to be distributed. It had not even finished its vetting process within the department.” Napolitano further explained that processes, which had not been in place before, had been initiated to ensure that only authorized products were released. In a subsequent action on the issue the House Committee on Homeland Security unanimously approved a resolution of inquiry calling for Homeland Security to turn over all documents used to draft the report. The full House must approve the subpoena for documents before it becomes binding. However, when approved the documents must then be turned over within 14 days. Note: It is unfortunate that this entire incident occurred and that veterans were seemingly targeted as possible future “terrorists.” Hopefully future assessments will receive more scrutiny before they are distributed. [Source: NAUS Weekly Update 15 May 09 ++]

CHAPTER 61 DISABILITY PAY Update 02: More details surfaced in MAY on the Administration's proposal to expand concurrent receipt to service members who were medically retired, sometimes referred to as Chapter 61 retirees. Under the Administration's Omnibus proposal, all Chapter 61 retirees will become eligible for Concurrent Retirement and Disability Pay (CRDP) over a five-year period starting in JAN 10. The expansion will come in two phases. The first three years of the five year phase-in opens CRDP eligibility to the more severely disabled Chapter 61 retirees with less than 20 years of service.

- On January 1, 2010, Chapter 61 retirees with less than 20 years of service and a VA rating of either 90% or 100% become eligible. Early estimates are that 12,000 Chapter 61 retirees will benefit under this first step.
- On January 1, 2011, Chapter 61 retirees with less than 20 years of service and a VA rating of either 70% or 80% become eligible
- On January 1, 2012, Chapter 61 retirees with less than 20 years of service and a VA rating of either 50% or 60% become eligible.

The remaining two years of this phase-in extends CRDP to Chapter 61 retirees, regardless of years of service, with a VA rating of less than 50%.

- On January 1, 2013, all Chapter 61 retirees with a VA rating of either 30% or 40% will become eligible
- On January 1, 2014, all Chapter 61 retirees with any VA rating become eligible

The planned changes will not impact regular retirees. Once this plan is completed, the only disabled retirees ineligible for CRDP will be non-medical retirees with 40% or lower VA disability ratings not tied to combat or combat training. They will continue to see retired pay reduced by the amount they receive monthly in VA disability compensation. For this group, the ban on “concurrent receipt” will continue. The 10-year cost of the expansion is estimated to be \$5.8 billion. This new initiative represents a 180-degree turnabout from the positions of all previous Administrations, Republican or Democratic. A means to ask your elected officials to support full restoration of concurrent receipt for chapter 61 disability retirees with less than 20 years service is available at

[http://capwiz.com/usdr/issues/alert/?alertid=13380021&queueid=\[capwiz:queue_id\]](http://capwiz.com/usdr/issues/alert/?alertid=13380021&queueid=[capwiz:queue_id]). Here you can enter your zip code and forward a preformatted message to you senators encouraging them to approve this issue.

[Source: MOAA Leg Up 15 May 09 ++]

TAX FILING OBLIGATIONS OVERSEAS Update 01: A nonresident alien is someone who meets the green card or substantial presence test. A green card holder may be described as an alien or foreign person who took no steps to revoke the card even though he or she is treated as a resident of a foreign country under a tax treaty. So according to this example, a nonresident alien can be treated as a resident alien for US tax purposes and file a Form 1040. The substantial presence test for allowing Form 1040 use applies to any foreign person who:

- Was physically present in the United States for at least 31 days during the calendar year, and
- 183 days during the previous three calendar years (2008, 2007 and 2006).

This latter criterion may be waived if the foreign person establishes that during 2008 he or she had a tax home in a foreign country and had a closer connection to the foreign country of residence. It is possible while qualifying for substantial presence in a tax year to be considered both a resident and nonresident alien. Residency status affects an alien person's US tax filing. If US source income is effectively connected with a US trade or business, then it may be reported on Form 1040NR and taxed at ordinary income tax rates. Otherwise it is reported on the same Form as income not effectively connected and taxed at 30%, unless superseded by a tax treaty rate. Generally effectively connected income is reported by payers on Form 1042-S vice 1099R. When the withholding rate is correctly applied and no other US source income has been received, the designated alien is not obliged to file Form 1040NR. Form 1040NR filing is required where foreign persons have a trade or business in the United States, income is exempt from US taxation under a tax treaty, a deceased person or estate/trust is represented, or withholding amounts are incorrect. Resident aliens may file Form 1040, claim standard deduction and personal exemption allowance, and be taxed the same as US citizens. Form 1040NR users are not allowed any reduction of the taxable amount with a standard deduction or personal exemption. [Source: The TaxBarron Report Mar-May 09 ++]

TAX BURDEN for CALIFORNIA 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 California:

State Sales Tax: 9.75% (food and prescription drugs exempt. Tax varies according to locality. It can be as high as 10.25%. The temporary 1% tax rate increase will expire on July 1, 2011)

Fuel & Cigarette Tax:

- Gasoline Tax: 63.9 cents/gallon (Does not include 1 cent local option).
- Diesel Fuel Tax: 72.0 cents/gallon (Does not include 1 cent local option).
- Cigarette Tax: 37 cents/pack of 20 plus an additional surcharge of 50 cents per pack, bringing the total to 87 cents. (Note \$1.50 per pack has been proposed).

Personal Income Taxes:

- Tax Rate Range: Low - 1.0%; High - 10.3%2.59%;
- Income Brackets: Lowest - \$7,168; Highest - \$1,000,000 (6 brackets). For joint returns, the taxes are twice the tax imposed on half the income.
- Tax Credits: Single - \$99; Married - \$198; Dependents - \$309; 65 years of age or older - \$99
- Standard Deduction: Single - \$3,692; Married filing jointly - \$7,384
- Medical/Dental Deduction: Same as Federal taxes
- Federal Income Tax Deduction: None
- Retirement Income Taxes: Social Security and Railroad Retirement benefits are exempt. There is a 2.5% tax on early distributions and qualified pensions. All private, local, state and federal pensions are fully taxed.
- Retired Military Pay: Follows federal tax rules.
- 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

- Property is assessed at 100% of full cash value. The maximum amount of tax on real estate is limited to 1% of the full cash value. After taxes have been paid, homeowners 62 and older who earn \$35,051 or less may file a claim for assistance on 96% of property taxes, up to \$34,000 of the assessed value of their homes. Call 800-852-5711 or refer to www.boe.ca.gov/proptaxes/proptax.htm for details. Homestead exemptions are handled at the county level. Under the homestead program, the first \$7,000 of the full value of a homeowner's dwelling is exempt. The state has a property tax postponement program that allows eligible homeowners (seniors, blind and disabled residents) to postpone payments of property taxes on their principal place of residence. Interest is charged on the postponed taxes. For more information refer to www.sco.ca.gov/col/taxinfo/ptp/faq/index.shtml or call [800-952-5661](tel:800-952-5661).
- Veterans' Exemption:
 - 1.) The California Constitution provides a \$4,000 real property (for instance, a home) or personal property (for instance, a boat) exemption for honorably discharged veterans or the spouse or pensioned parent of a deceased, honorably discharged veteran. Most persons, however, are disqualified from this exemption due to restrictions on the value of property a claimant may own. A person who owns property valued at \$5,000 or more (\$10,000 or more for a married couple or for the unmarried surviving spouse of a qualified veteran) is not eligible for this exemption. Thus, a veteran who owns a home would most likely not qualify for the veterans' exemption.
 - 2.) Disabled Veterans': The California Constitution and Revenue and Taxation Code section 205.5 provide a property tax exemption for the home of a disabled veteran or an unmarried spouse of a deceased disabled veteran. There is a basic \$100,000 exemption or a low-income \$150,000 exemption* available to a disabled veteran who, because of an injury incurred in military service who is blind in both eyes, or has lost the use of two or more limbs, or is totally disabled as determined by the United States Department of Veterans Affairs (USDVA) or by the military service from which the veteran was discharged. Both exemption amounts are annually adjusted for cost of living index; as of January 1, 2008, the exemption amounts are \$111,296 and \$166,944 respectively; and for 2009, the amounts will be \$114,634 and \$171,952.
 - 3.) An unmarried surviving spouse may also be eligible if the service person died as the result of a service-

connected injury or a disease incurred while on active duty in the military. In other words, a veteran may not have been eligible during his or her lifetime, but the surviving spouse may become eligible for the exemption upon the veteran's death.

Inheritance and Estate Taxes - There is no inheritance tax. However, there is a limited California estate tax related to federal estate tax collection.

For further information, visit the California Franchise Tax Board website www.ftb.ca.gov or the California State Board of Equalization website www.boe.ca.gov. [Source: www.retirementliving.com May 09 ++]

MILITARY HISTORY ANNIVERSARIES:

- May 16 1940 - WWII: Germany occupies Brussels, Belgium and begins the invasion of France.
- May 17 1987 - An Iraqi missile hits the American frigate USS Stark in the Persian Gulf. 37 sailors die
- May 18 1863 - Civil War: The Battle of Vicksburg begins.
- May 18 1917 - WWI: The Selective Service Act of 1917 is passed, giving the President of the United States the power of conscription.
- May 18 1944 - WWII: Battle of Monte Cassino - Conclusion after seven days of the fourth battle as German paratroopers evacuate.
- May 19 1848 - U.S Mexican War: Mexico gives Texas to U.S., ending the war
- May 19 1967 - Vietnam: U.S. planes bomb Hanoi for the first time.
- May 20 1864 - Civil War: Battle of Ware Bottom Church - in the Virginia Bermuda Hundred Campaign, 10,000 troops fight in this Confederate victory.
- May 20 1902 - U.S. military occupation of Cuba (since Jan 1, 1899) ends
- May 20 1969 - Vietnam: US troop capture Hill 937/Hamburger Hill
- May 20 1951 - Korea: U.S. Air Force Captain James Jabara becomes the first jet air ace in history.
- May 21 1941 - 1st U.S. ship sunk by a U-boat (SS Robin Moore)
- May 21 1951 - Korea: The U.S. Eighth Army counterattacks to drive the Communist Chinese and North Koreans out of South Korea.
- May 23 1900 - Civil War hero Sgt. William H. Carney becomes the first African American to receive the Medal of Honor, 37 years after the Battle of Fort Wagner.
- May 25 1915 - WWI: 2nd Battle of Ypres ends with 105,000 casualties
- May 25 1953 - The first atomic cannon is fired in Nevada.
- May 26 1940 - WWII: Battle of Dunkirk - In France, Allied forces begin a massive evacuation from Dunkirk, France.
- May 26 1945 - WWII: U.S. drop fire bombs on Tokyo
- May 26 2004 - The U.S. Army veteran Terry Nichols is found guilty of 161 state murder charges for helping carry out the Oklahoma City bombing.
- May 27 1813 - War of 1812: In Canada, American forces capture Fort George
- May 27 1944 - WWII: American General MacArthur lands on Biak Island in New Guinea.
- May 27 1965 - Vietnam: American warships begin the first bombardment of National Liberation Front targets within South Vietnam.
- May 29 1916 - U.S. forces invade the Dominican Republic, stay until 1924.
- May 29 1945 - WWII: U.S. 1st Marine division conquerors Shuri-castle Okinawa
- May 29 2004 - The World War II Memorial is dedicated in Washington, D.C.
- May 30 1868 - Memorial Day begins when two women place flowers on both Confederate and Union graves.
- May 30 1912 - U.S. Marines are sent to Nicaragua to protect American interests.
- May 30 1965 - Vietnam: Viet Cong offensive against U.S. base Da Nang, begins

- May 31 1900 - U.S. troops arrive in Peking to help put down the Boxer Rebellion.
- May 31 1912 - U.S. Marines land on Cuba

[Source: Various May 09 ++]

VETERAN LEGISLATION STATUS 28 MAY 09: The house and Senate have been in Memorial Day recess, or what they call a District Work Period. The House will reconvene 1400 2 JUN and the Senate will reconvene at noon 1 JUN. The next scheduled Congressional recess is 28 JUN – 4 JUL for Independence Day. Refer to the Bulletin's Veteran Legislation attachment for or a listing of Congressional bills of interest to the veteran community that have been introduced in the 111th Congress. Support of these bills through cosponsorship by other legislators is critical if they are ever going to move through the legislative process for a floor vote to become law. A good indication on that likelihood is the number of cosponsors who have signed onto the bill. 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>. The key to increasing cosponsorship on veteran related bills and subsequent passage into law is letting our representatives 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 representative and his/her phone number, mailing address, or email/website to communicate with a message or letter of your own making. Refer to http://www.thecapitol.net/FAQ/cong_schedule.html for dates that you can access your representatives on their home turf. [Source: RAO Bulletin Attachment 28 May 09 ++]

HAVE YOU HEARD? Our Navy, Then and Now!!

Then - If you smoked, you had an ashtray on your desk.

Now - If you smoke, you get sent outside and treated like a leper.

Then - Mail took weeks to come to the ship.

Now - Every time you get near land, there's a mob topside to see if their cell phone works.

Then - If you left the ship it was in Blues or Whites, even in home port.

Now - The only time you wear Blues or Whites is for ceremonies.

Then - You wore bellbottoms everywhere on the ship.

Now - Bellbottoms are gone and 14 year-old girls (or "funny boys") wear them everywhere.

Then - You wore a Dixie cup all day, with every uniform.

Now - It's not required and you have a choice of different hats.

Then - If you said "damn," people knew you were annoyed and avoided you.

Now - If you say "damn" you'd better be talking about a hydro-electric plant.

Then -The Ships Office yeoman had a typewriter on his desk for doing daily reports.

Now - Everyone has a computer with Internet access and they wonder why no work is getting done.

Then - We painted pictures of pretty girls on airplanes to remind us of home.

Now - We put the real thing in the cockpit.

Then - If you got drunk off duty, your buddies would take you back to the ship so you could sleep it off.

Now - If you get drunk off duty, they slap you in rehab and ruin your career.

Then - Canteens were made out of steel and you could heat coffee or hot chocolate in them.

Now - Canteens are made of plastic, you can't heat them because they'll melt, and anything inside always tastes like plastic.

Then - They collected enemy intelligence and analyzed it.

Now - They collect our pee and analyze it.

Then - If you didn't act right, they'd put you on extra duty until you straightened up.

Now - If you don't act right, they start a paper trail that follows you forever.

Then - You slept in a barracks, like a soldier.

Now - You sleep in a dormitory, like a college kid.

Then - You ate in a Galley. It was free and you could have all the food you wanted.

Now - You eat in a Dining Facility. Every slice of bread or pat of butter costs, and you can only have one.

Then - If you wanted to relax, you went to the Rec Center , played pool, smoked and drank beer.
Now - You go to the Community Center and can still play pool, maybe.

Then - If you wanted a quarter beer and conversation, you could go to the EM or Officers' Club.
Now - The beer will cost you two dollars and someone is watching to see how much you drink.

Then - The Exchange or Ship's Store had bargains for sailors who didn't make much money.
Now - You can get similar merchandise, and a whole lot cheaper at Wal-Mart.

Then - If an Admiral wanted to make a presentation, he scribbled down some notes and a YN spent an hour preparing a bunch of charts.
Now - The Admiral has his entire staff spending days preparing a Power Point presentation.

Then - We called the enemy things like "Commie Bastards", "Reds" or whatever is important at the time, because we didn't like them.
Now - We call the enemy things like "Opposing Forces" and "Aggressors" so we won't offend them.

Then - We declared victory when the enemy was dead and all his things were broken.
Now - We declare victory when the enemy says he is sorry and won't do it again.

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