



Volume 10 Issue 2



MEARNG RETIREE NEWSLETTER



MAY – AUG 2005

DEPARTMENT OF DEFENSE, VETERANS AND EMERGENCY MANAGEMENT
PUBLISHED BY THE MEARNG RETIREE COUNCIL

TABLE OF CONTENTS

- [COMMENTARY](#) 1
- [RETIREMENT BENEFITS & SERVICES](#) 1
- [TRANSITIONS](#) 14
- [TAPS](#) 14
- [MISCELLANEOUS](#) 16
- [UPCOMING EVENTS](#) 16
- [FOR YOUR INFORMATION](#) 18
- [TRIVIA QUESTIONS](#) 30
- [FEEDBACK](#) 30
- [RETIREE E-MAIL ADDRESSES](#) 30
- [RETIREE COUNCIL MEMBERS](#) 32
- [ANSWERS TO TRIVIA](#) 32



We are continuing to update our mailing list to include all MEARNG retirees. **If you know any retiree(s) who are not receiving the newsletter, please send their name and address to a member of the Retiree Council or e-mail us.**

Please advise us of mailing address changes and those due to 911. If you do not wish to continue receiving the newsletter, contact a council member.

Continuation of Newsletter The Retiree Council has decided to **continue the Retiree Newsletter to spouses of deceased retirees** when the spouse requests it. Many items in the newsletter may prove valuable to the surviving spouse.

New Members: Membership is open to retirees of all ranks and gender from all parts of Maine. If you or a retiree you know are interested, please contact a Council member. Retired NCOs should consider getting involved to have their concerns surfaced and to demonstrate they are still an active member in military affairs.

COMMENTARY This is the twenty-ninth Retiree Newsletter, normally published in Apr, Aug and Dec. Our purpose is to keep you informed and provides you a continuing sense of belonging to the Guard after retirement. We hope the newsletter helps accomplish that purpose.

Information is furnished through various sources, and is only made available in this newsletter for your information. Information and comments contained in this newsletter is intended solely for the personal interest of the recipient and should not be considered as an endorsement. If you have an item you would like considered for publication, please send it to the MEARNG Retiree Council, Camp Keyes, Augusta, ME 04333

NOTE:

This newsletter and all previous issues of the newsletters can be found on the following web site: <http://www.me.ngb.army.mil/retire/>

- WANTED -

Would you like to be an integral part of the retirement community with providing informative and helpful information to the military retirees and their spouse of the Maine Army National Guard? If you like doing research by surfing the net or other means of gathering information and formatting it in a newsletter, then this is for you.

Looking for a responsible person or persons, (military retiree preferred), to fill the upcoming vacancy of Editor of the Retiree Newsletter. This newsletter is put out to over 1,000 retirees.

Duties include researching informative information and articles that would be of an interest to the retiree and spouse and formatting it in a newsletter. Mailing of the newsletter would not be the responsibility of the Editor. The newsletter is published three times a year that covers January to April; May to August and September to December.

If interested contact any member of the Retiree Council.

(This will be the last issue of the Retiree Newsletter that I will be doing.)

****RETIREMENT BENEFITS AND**
****SERVICES******

TRICARE for Retirees

Retired Service Member And Family Members

Enrollment Fees/Allotments:

➤ **TRICARE Prime**

- Enrollment fees apply—\$230 for individuals, \$460 for families
- Outpatient care—\$12 per visit
- Inpatient care—\$11 per day, \$25 minimum
- Inpatient mental health—\$40 per day
- Emergency care—\$30 per visit

➤ **TRICARE Prime Remote (TPR)**

- Not eligible

➤ **TRICARE Extra**

- Annual outpatient deductible—\$150 for individuals, \$300 for families
- Inpatient care—\$250 per day** or 25% of hospital's negotiated charges, whichever is less, plus 20% of negotiable professional fees
- Outpatient care—20% of the negotiated fee
- Inpatient mental health—20% of the negotiable fees

➤ **TRICARE Standard***

- Annual outpatient deductible—\$150 for individuals, \$300 for families
- Inpatient care—\$512 per day** or 25% of hospital's billed charges, whichever is less, plus 25% of allowed professional charges
- Outpatient care—25% of allowed charges
- Inpatient mental health—lesser of \$169 per day* or 25% of allowable fees

Catastrophic Cap*

\$3,000 per fiscal year

➤ **Entitled to Medicare [based on age, disability or end-stage renal disease (ESRD)]**

- Retired service members and their family members **MUST** enroll in Medicare Part B to remain eligible for TRICARE.

* The catastrophic cap is the maximum out-of-pocket expenses per fiscal year. Only allowable charges for covered services apply toward the catastrophic cap.

**Rates are current for FY 2005; rates change every fiscal year.

Retirees may pay their TRICARE Prime enrollment fees through a monthly allotment only from their Service retirement pay. This retirement pay allotment may be deducted from one of the following pay agencies:

- Defense Financial Accounting System (DFAS)
- U. S. Coast Guard
- U. S. Public Health Service

To start an allotment, a retired beneficiary must:

- Fill out an Enrollment Fee Allotment Authorization Letter, which is used to stop, start or change monthly allotment payments from a retiree's pay account.
- Send the letter to the regional contractor (North, South or West) along with an initial quarterly payment. Beneficiaries will not need to send a quarterly payment when transferring from one region to another once the allotment process has already been set up.
- After the contractor receives the allotment authorization letter and initial quarterly payment, the contractor forwards a payment request to the designated pay agency.
- The pay agency sets up a monthly payment to the regional contractor on the retiree's behalf.

Retired beneficiaries may visit their regional contractor's Web site or call them for information on Prime enrollment and fee payment options.

Beneficiaries who receive survivor benefits from either retired or active duty sponsors are paid through a separate pay account and may not set up an enrollment fee allotment.

Use of Military Treatment Facilities (MTFs)

Retirees and their families who do not enroll in TRICARE Prime may continue to use MTFs on a space available basis. A priority system has been established for access to health care at MTFs:

1. Active duty service members
2. Active duty family members who are enrolled in TRICARE Prime
3. Retirees, their family members and survivors enrolled in TRICARE Prime
4. Active duty family members who are NOT enrolled in TRICARE

Prime (for the purpose of determining access priority, survivors of military sponsors who died on active duty who are NOT enrolled in TRICARE Prime are in this priority group)

5. All other eligible persons, including retirees and their families who are NOT enrolled in TRICARE Prime

TRICARE Plus is an MTF primary care enrollment program offered at some MTFs. All beneficiaries eligible for care in MTFs [except those enrolled in TRICARE Prime, a civilian health maintenance organization (HMO) or Medicare HMO] may enroll in TRICARE Plus at an MTF if enrollment capacity exists.

Becoming Entitled to Medicare

Medicare entitlement based on age usually begins on the first day of the month in which the beneficiary turns 65. If the 65th birthday falls on the first day of the month, Medicare Part A eligibility begins on the first day of the preceding month. If the Medicare beneficiary purchases Medicare Part B, he or she will remain eligible for TRICARE through a program known as TRICARE For Life (TFL). TRICARE acts as a second payer to Medicare for services covered by both Medicare and TRICARE. When a retired sponsor reaches age 65 and becomes eligible for TFL, his or her spouse remains eligible for TRICARE Prime or Standard until he or she (spouse) becomes entitled to Medicare Part A and B. At that time the spouse becomes entitled to TFL.

Persons under age 65 who become entitled to Medicare Part A and Part B because of a disability or End Stage Renal Disease (ESRD), maintain their eligibility for TRICARE Prime and become eligible for TFL. By law, TRICARE pays after Medicare for these dual-eligible persons. Beneficiaries

who become eligible for Medicare due to a disability or ESRD should purchase Part B when notified they are Medicare eligible and present their Medicare card to the nearest Uniformed Services ID card-issuing facility on or after the date of eligibility.

Survivors of Retirees

Upon a retiree's death, the surviving spouse remains eligible for TRICARE benefits at the retiree rate, unless he or she loses TRICARE eligibility through remarriage or failure to enroll in Medicare Part B when entitled to Medicare. The retiree's surviving children remain eligible for TRICARE benefits until the age of 21 or, if the child is a full time student, he or she will remain eligible until the age of 23. For more information on TRICARE college student benefits, beneficiaries may view the [College Students and TRICARE](#) fact sheet. If the surviving child is incapable of self support because of mental or physical incapacity, the child does not lose eligibility for TRICARE benefits at the age of 21 or 23.

For more information, beneficiaries may contact a local health benefits advisor, beneficiary counseling and assistance coordinator, TRICARE service center or they may visit the TRICARE Web site at www.tricare.osd.mil.

See also: [TRICARE: The Basics](#) Fact Sheet

[Choosing TRICARE Standard](#) Fact Sheet

[TRICARE For Life](#) Fact Sheet

[TRICARE Plus](#) Fact Sheet

[TRICARE Prime Remote](#) Fact Sheet

TRICARE Catastrophic Cap Update (2):

Numerous studies show that people have a tendency to overuse free and unrestricted medical services. To discourage the costs to the government of doctor bills for every runny nose and pimple, yearly out of pocket costs for beneficiaries were included when Congress created CHAMPUS, the forerunner of Tricare, in 1966. Deductibles and copays (i.e. cost shares) vary depending on which Tricare program you use and your military status of active duty or retiree.

However, you are not required to pay annually over the cap of \$1000 per active duty family or \$3000 per retiree family.

When a Tricare claim is processed, the processing contractor assigns a "value" to each medical service. All insurers do this whether Tricare, Medicare, or commercial. The amount usually is based on historical records of amounts providers have charged for each medical service in the recent past, together with other factors such as income differentials in various parts of the country or world, and even between rural and urban places in the same geographic area. The lowest sets of values are for Puerto Rico which are those currently in use for the Philippines. Additionally, Tricare has adjustment

factors included that are found in Medicare law. Commercial insurers do not have to account for these factors.

Under Tricare the final figure is called the amount “allowed”. It is most always less than the provider billed. Tricare bases its payments on the amount allowed vice the amount billed.

The formula used is: amount allowed minus unsatisfied deductible minus cost share equals amount of payment. It’s the same formula used by most fee-for-service commercial insurers. For retirees, retiree family members and survivors, the patients cost share is 25% and the annual deductible is \$150 per family member or \$300 per family. Claims processors maintain a running total of the amounts each family member, and the family collectively, pay in deductibles and cost shares during each fiscal year, which runs 1 OCT thru 30 SEP. When an individual’s deductible total reaches \$150, that family member will not be assessed any more deductibles during the fiscal year. When a family, regardless of size, or individual reaches the catastrophic cap amount, no more deductibles or cost shares will be charged for the rest of the fiscal year. All out-of-pocket expenses for covered Tricare services, including pharmacy cost shares, count towards the cap. Tricare will pay 100% the amount allowed through midnight 30 SEP, the end of the fiscal year. At midnight, each family’s catastrophic account reverts to zero, and deductible and cost share amounts begin to accumulate toward the new year catastrophic cap.

[Source: Navy Times James Hamby article 6 JUN 05]

More on TRICARE Retiree Dental Program (TRDP)

Premium for TRICARE Dental is broken down in regions and determined by the zip code in which the retiree lives, and how many people are enrolled.

Since most of Maine and New England are in the ‘B’ region, you can be reasonably safe in assuming that the monthly costs will be:

- \$28.56 for 1 person
- \$55.75 for 2 people
- \$93.40 for 3 or more people

To confirm the premium for a specific area, you can hit the premium button on the TRICARE Retiree Dental web site <http://www.trdp.org> and then click on the zip code.

For those that might be “snowbirds”, in terms of figuring out which premium prevails, whichever is the dominant home address should be used. If someone lives in 2 different places for 6 months each, then they can pick one place or the other. You will find that most places in Florida will be the same premium as it is in the northern region “B”.

TRICARE Pharmacy Rates Update 04:

The Tricare Management Activity (TMA) Director has approved the addition of 11 new medications to the Tricare Uniform Formulary and shifting seven medications to non-formulary status. The Uniform Formulary process involves the review of different classifications of FDA-approved medications on the basis of their clinical and cost effectiveness. After careful analysis, the Department of Defense Pharmacy and Therapeutics (P&T) Committee recommends medications for placement on the Uniform Formulary or to be non-formulary listings. The P&T Committee is composed of physicians, pharmacists and representatives from the Services and the Veterans Administration. The Beneficiary Advisory Panel (BAP), whose membership includes representatives of active duty families and retirees, civilian healthcare professionals, and those supporting the healthcare benefit through contracts, comments on the P&T Committee’s recommendations.

The medications affected by these changes are:

- Formulary additions:
 - Levitra (PDE-5 Inhibitor); nystatin, clotrimazole, ketoconazole, miconazole, Mentax, Naftin (Topical Antifungals); and Rebif, Avonex, Copaxone, Betaseron (Multiple Sclerosis Disease Modifying Drugs).
- Non-formulary additions include:
 - Viagra, Cialis (PDE-5 Inhibitors); and ciclopirox, econazole, Oxistat, Ertaczo, Exelderm (Topical Antifungals).

Formulary alternatives are available for these medications at a copay of either \$3 or \$9.

Tricare beneficiaries will pay \$22 for up to a 30- day or 90- day supply for non-formulary medications, depending on whether they fill the prescription at a Tricare Retail Network Pharmacy (TRRx) or through the Tricare Mail Order Pharmacy (TMOP). Beneficiaries will pay the higher of \$22 or 20 percent in retail non-network pharmacies. The implementation date of the \$22 copayment for the topical antifungal medications is 17 AUG 05, and the implementation date for PDE-5 Inhibitors is 12 OCT 05. Patients currently using the newly designated non-formulary medications may wish to consult their doctor about formulary alternatives or if a medical necessity is appropriate for them. If medical necessity is established for using non-formulary medications, patients may qualify for the \$9 copayment for up to a 30-day TRRx supply or up to a 90-day TMOP supply. Military treatment facilities (MTF) will no longer carry these or other non-formulary medications on their local formularies. Non-formulary medications may be available at MTFs only when

medical necessity is established and the prescription was written by a MTF provider. Active duty members have no copays and, unless medical necessity is established, they may not obtain non-formulary drugs. Medical necessity forms are available on the TRICARE Pharmacy Web site at www.tricare.osd.mil/pharmacy/medical-nonformulary.cfm. Procedures for completing and submitting medical necessity information may be found on these forms.

Eligible beneficiaries can fill prescriptions for non-formulary and covered medications through the TMOP and TRRx pharmacies. Beneficiaries may reduce out-of-pocket expenses by filling prescriptions through the TMOP where beneficiaries will receive up to a 90-day supply of medicine for the same cost as a 30-day supply in the TRRx. For more information about TMOP, eligible beneficiaries should visit the Express-Scripts Inc. Web site at www.tricare.osd.mil/pharmacy/tmop_contact.cfm or call (866) 363-8667. Beneficiaries can also contact the TRRx customer service line at (866) 363-8779, or visit www.tricare.osd.mil/pharmacy/trrx_contact.cfm. For additional information about various medications, their availability and cost, beneficiaries can use the TRICARE Formulary Search Tool at: www.tricareformularysearch.org/dod/medicationcenter/default.aspx.

[Source: TMA News Release 9 AUG 05]

TRICARE For Life FAQ:

Eligibility

Q. Who is eligible for TRICARE For Life (TFL)?

A. TFL covers all uniformed services retirees, spouses, and other qualifying dependents and survivors (including certain former spouses) who are Medicare-eligible and enrolled in Medicare Part B, regardless of age.

Q. I am over 65, but have never been eligible for Medicare. Does TFL apply to me?

A. No. You remain eligible for TRICARE under all of its options. You can enroll in TRICARE Prime, where it is offered, or use TRICARE Standard (formerly CHAMPUS) and Extra as your sources of health care. You also can use TRICARE's retail and mail order pharmacy services.

Q. Are retired National Guard members and reservists receiving military retired pay eligible for TFL?

A. Yes. A retired reservist will have the same coverage as any other retired TFL beneficiary when eligible for Medicare Part A and also enrolled in Medicare Part B.

Q. Are servicemembers who retired for reasons of a medical disability (before they earned retirement based on length of service) eligible for TFL?

A. Yes. Regardless of the length of service or source of compensation (DoD/VA), a disability retiree is eligible for TFL like any other servicemember drawing retired pay provided he or she is eligible for Medicare Part A and enrolled in Medicare Part B. Eligible family members of retirees who retired based on medical disability also are eligible for TFL again provided they are eligible for Medicare Part A and enrolled in Medicare Part B. Veterans who are/were medically discharged from military service and not given a medical disability retirement are beneficiaries of the VA; they are not eligible for TFL.

Q. I'm not sure whether I am eligible for TFL. How can I check?

A. Contact the Defense Enrollment Eligibility Reporting System (DEERS) at (800) 538-9552.

Preparing for TFL

Q. Should I participate in Medicare Part D or TRICARE Pharmacy?

A. You need to consider that the [TRICARE Pharmacy Benefit Program](#) offers a more cost effective benefit than the Medicare Part D prescription drug benefit with no additional monthly premiums.

TRICARE eligible beneficiaries can fill prescription medications at military treatment facility (MTF) pharmacies; through the [TRICARE Mail Order Pharmacy](#) (TMOP); at [TRICARE retail network pharmacies](#) (TRRx); and at non network pharmacies. Whether or not a TRICARE beneficiary chooses to enroll in Part D is a personal decision; however, we suggest you take into account the following:

There will be a monthly premium above the Medicare Part B premiums -- \$37.23 the first year.

After the \$250 deductible, Medicare pays three-fourths of the next \$2,000 costs.

Then beneficiaries face a gap in coverage.

The beneficiary is normally responsible for all of the next \$2,850, and Medicare pays nothing.

Beyond that, Medicare pays about 95 percent of drug costs.

Under TRICARE, beneficiaries pay no monthly fees other than Medicare Part B -- the copayments remain \$3, \$9, and \$22 with no gaps in coverage.

TRICARE is a "creditable program." If a beneficiary experiences a life changing event for a dependent -- loses their eligibility -- through divorce or remarriage -- he or she will not have to pay Part D late enrollment fees.

Medicaid and certain low income recipients automatically are enrolled in Medicare Part D. TFL eligible beneficiaries need to disenroll from Medicare Part D in order to use their TRICARE Pharmacy benefit.

For further information on the TRICARE Pharmacy Benefit Program go to www.tricare.osd.mil/pharmacy or Medicare Part D at www.medicare.gov.

Q. I am sure that I am eligible for TFL. What do I need to do?

A. You need to be enrolled in Medicare Part B and have a current Uniformed Services ID card. Additionally, if you have recently moved or changed status, you need to make sure your information with DEERS is correct.

Q. Will I be issued a TFL identification card?

A. No. Your Medicare card, reflecting Part B enrollment, and your Uniformed Services ID card are all that is required.

Q. I am approaching the age of 65, what action do I need to take with Medicare?

A. If you are receiving Social Security cash benefits before your 65th birthday, your local Social Security office will notify you by mail about three months before your 65th birthday that you will become eligible for Medicare Part A. At that time you will be automatically enrolled in Part B. You will be advised that if you do not want to be enrolled in Part B, you have the right to decline enrollment. If you are not receiving Social Security cash benefits when you turn 65 and do not intend to continue working, then contact your local Social Security office about three months before your 65th birthday regarding enrollment in Part B.

Q. I am approaching the age of 65. What action do I need to take related to TFL?

A. You will receive a letter from DoD as you approach your 65th birthday. It contains information about the changes in your health coverage that will occur as you transition to Medicare and TFL. If you decide to use TFL as your secondary payer, you will need to contact your regional contractor's beneficiary service number for guidance. (See contact information.)

Q. I elected not to enroll in Medicare Part B when I turned 65. How can I enroll?

A. You can sign up for Part B during Medicare's annual General Enrollment Period (GEP) that runs from Jan. 1 to March 31 each year. Your Part B coverage will start on the following July 1st. There is, however, a late enrollment penalty of 10 percent of premium for each 12-month period that you could have had Part B but did not take it. Contact your local Social Security Office for details or call (800) MEDICARE (633-4227).

Q. I continued working past the age of 65, so I declined Part B. I am now planning to retire. Will I face any penalty for enrollment in Medicare Part B?

A. You should be able to enroll in Medicare Part B with no penalty. Contact Medicare at (800) 638-6833 for guidelines on enrolling in Medicare Part B.

Q. How should I notify the Defense Manpower Data Center Support Office of changes in my status so my DEERS record can be updated?

A. There are several ways to inform them of changes in status:

Visit a local personnel office that has a Uniformed Services ID card facility. (Call ahead for hours of operation and for instructions if you are updating a record for someone who is housebound.) To locate the nearest military ID card facility visit the internet website at www.dmdc.osd.mil/rsl/ or call the DoD Customer Call Center at (888) DOD-LIFE (363-5433).

Call the Defense Manpower Data Center Support Office (DSO) Telephone Center at (800) 538-9552. Call the telephone center is between 9 a.m. and 3 p.m. (Pacific Time) Wednesday through Friday to avoid delays.

Fax address changes to (831) 655-8317.

Mail the change information to the DSO, ATTN: COA, 400 Gigling Road, Seaside, CA, 93955-6771.

Other Plans and Programs

Q. I have an insurance supplement to Medicare. How will this plan work with TFL?

A. As long as you have supplemental insurance, it will be the second payer to Medicare. However, because TFL replaces the need for such coverage, there is no need to carry Medicare supplemental insurance. Between Medicare and TFL, you will be well covered. But before you discontinue enrollment in your Medicare supplement, contact your insurance carrier for guidance disenrolling from your plan.

Q. I currently am enrolled in a Medicare HMO. Can I use TFL?

A. TFL will cover your HMO copayments (but not premiums or enrollment fees) for services covered under Medicare or TRICARE. These include copayments for doctors visits and prescriptions. However, if you want to disenroll from your HMO to use the full TFL benefits, contact your HMO administrator for guidance about disenrolling. For more information, call the DoD Customer Call Center at (888) 363-5433.

Q. I have other health insurance (OHI). How does this interact with TFL?

A. If you have other health insurance (or "double coverage" as it is sometimes called), you must use up the other

insurance's benefit before you use TFL. OHI includes private insurance, the Federal Employees Health Benefits Program (FEHBP), and other employer-provided insurance plans. However, if you keep this coverage, TFL might reimburse you for benefits not covered by your OHI or after your OHI coverage has been exhausted. For specifics, contact the DoD Customer Care Call Center at (888) 363-5433.

Q. What if I want care in a MTF?

A. TRICARE Plus is a new MTF primary care enrollment program that is offered at selected local MTFs. The program began Oct. 1, 2001, at many different locations across the country and was phased in at more locations in 2002. All beneficiaries eligible for care in MTFs (except those enrolled in TRICARE Prime, a civilian HMO, or Medicare HMO) can seek enrollment in TRICARE Plus at MTFs where enrollment capacity exists. Non-enrollment in TRICARE Plus does not affect TFL benefits or other existing programs. For more information, contact your local MTF.

Q. I am in the Uniformed Services Family Health Plan (USFHP). Does TFL affect me?

A. TFL doesn't affect you unless you plan to relocate or disenroll from USFHP. Enrollees 65 and older already receive the full TRICARE benefit. The USFHP contractor provides health care services through a network of hospitals and providers functioning like TRICARE Prime. DoD fully funds the USFHP annually through appropriations from Congress.

Q. I am enrolled in the FEHBP program. Am I able to use TRICARE for Life?

A. Because FEHBP plans are considered OHIs, enrollees are required to use their plan benefits, including pharmacy services. You may want to suspend your enrollment, but you will want to make sure your choice will not adversely affect your spouse if you have family coverage. For specific information about suspending your enrollment in FEHBP, call OPM's Retirement Information Office at (888) 767-6738 to obtain a suspension form. Callers within the local Washington, D.C., calling area must call (202) 606-0500.

Q. I get my health care at a VA hospital. How does TFL affect me?

A. You will still be eligible for TRICARE for Life and TRICARE Senior Pharmacy. TFL will not cover any VA co-pay expenses required by the "means test," and you will be responsible for all co-pay under TRICARE Senior Pharmacy. Because you are eligible for both VA care and TRICARE for Life, your decision on which service to use at a given time should take into account your personal medical and financial needs at that time.

Q. If I use VA health care, do I have to choose between VA and TFL?

A. The Office of Management and Budget (OMB) pursued this issue, dubbed "forced choice." The 2002 appropriations

bill for the VA included a provision that prohibited the DVA from using any funds to implement "forced choice." Furthermore, the 2002 Defense Authorization Act specifically precluded funding for the implementation of forced choice.

Q. What if I receive medical coverage in another country? Will TFL cover any of the cost?

A. If you receive medical care in another country, Medicare will not cover you, and TRICARE will become first payer. In this situation, TRICARE Standard reimbursement rates and copayments will apply, and you will need to file a claim with TRICARE for any charges you incur.

Q. I plan to disenroll from my current health care coverage and switch to TFL. How do I let TRICARE know that it will become second payer?

A. You need to contact your TFL regional contractor and follow their guidelines for establishing TRICARE as second payer to Medicare. Use the Beneficiary Services phone number for your regional contractor to notify them that you will begin using TFL or call the DoD Customer Call Center at (888) 363-5433.

Using TFL

Q. I have my Uniformed Services ID card and my Medicare card with Part B. What do I do when I go to my doctor?

A. You need to show both cards as a proof of coverage. Most providers now bill Medicare directly for payment. Under TFL, Medicare will process the primary claim and send the Medicare payment directly to the provider. The secondary claim will be automatically processed by TRICARE using the paid Medicare claim as documentation. TRICARE will send the patient's Medicare copayment directly to the provider. You will get a copy of the Explanation of Benefits (EOB) from both Medicare and TRICARE showing that both programs have paid the bill and that you owe nothing.

Q. What if my provider "is Medicare approved" but does not "accept Medicare assignment?" What will TFL pay?

A. The provider must still file the claim with Medicare and cannot bill you for more than 115 percent of the Medicare Maximum Allowable Charge (MMAC) -- the fee that Medicare sets as reasonable for a covered benefit. If you are asked to pay the provider up front, Medicare will reimburse you for 80 percent of the MMAC, and TFL will pay you the balance up to 115 percent of MMAC.

Q. How is claim filing handled?

A. Once the doctor files a claim with Medicare, Medicare will automatically forward the claim to TFL. If you have OHI and wish to submit a claim for reimbursement, you can download a claim form from the TRICARE Web site,

www.tricare.osd.mil/claims.

If you do not have access to the Internet, contact the DoD Customer Call Center at (888) 363-5433 for information on claim phone numbers and claims addresses in your particular region.

Q. Who do I contact if I have a question or problem with my claims or EOB Forms?

A. Call your claims processor or TRICARE Managed Care Contractor for your region. See the TFL Claims Processor and TRICARE Managed Care Contractors information following all questions.

Q. Does TFL have a benefit for long term care (LTC)?

A. No. TFL, like Medicare, has a benefit for skilled care in a skilled nursing facility care, but this should not be confused with LTC. The TFL benefit applies to care ordered by a physician in a facility that provides rehabilitative or skilled nursing services to help patients recover after a hospital stay. This type of care is meant to lead to a patient's full recovery. The type of care defined as custodial care applies to those who need assistance in activities of daily living, such as eating, bathing, dressing, and ambulating. You are responsible for paying for these services. For this type of care, you might want to consider buying LTC insurance, but you may have to meet certain medical underwriting conditions as determined by the insurance industry.

Using TRICARE Senior Pharmacy

Q. How do I use TRICARE Senior Pharmacy?

A. Eligible beneficiaries have several ways to receive pharmaceuticals:

Those of you who live near a MTF still will be able to receive prescriptions from the MTF pharmacy.

The TRICARE Mail-Order Pharmacy, administered by Express Scripts International (ESI), will provide you with up to a 90-day supply of your prescription. The cost will be \$9 for a brand name drug, or \$3 if it is generic, and there is no yearly deductible. For enrollment forms and prescriptions, call (866) DoD-TMOP (363-8667) or visit the Express Scripts Web site, <http://www.express-scripts.com>

If you use a TRICARE network pharmacy for your prescriptions, you need to show your Uniformed Services ID card when the prescription is filled. You will receive up to a 30-day supply of the drug for \$9 if it is a brand name drug, and \$3 if it is generic, and there is no yearly deductible. Most national pharmacy chains are members of the TRICARE network.

If you get your prescriptions from a non-network pharmacy, your copayment will be 20 percent of the drug's cost, or \$9,

whichever is greater. In addition, there is a \$150 yearly deductible on prescriptions from a non-network pharmacy. To find out if your pharmacy is a TRICARE pharmacy, call the DoD Pharmacy Customer Care Call Center at (877) 303-6337.

Q. What are the copayments?

A. See chart below pharmacy coverage/copayments at a glance:

	TMOP	Retail Pharmacy (Network)	Retail Pharmacy (Non-Network)	Military Pharmacy
Rx Amount	90-day supply of most non-narcotic drugs or a 30-day supply of a narcotic prescription	30-day supply of medication	30-day supply of medication	Varies by facility (often 30-day supply)
Copayment	\$3 for generic	\$9 for brand name	20 percent of the cost of the drugs, or \$9, whichever is greater	No cost
Deductible	None	None	\$150 per year	None

Q. How can I find out which civilian retail pharmacies in my area participate in the program?

A. Call the customer service number at 87(7) 363-6337 for your TRICARE Region. Or to find the nearest TRICARE retail pharmacy go to https://www.tricare.osd.mil/pharmacy/retail_network.htm. The call center is open Monday to Friday from 7 a.m to 11 p.m., Saturday from 9 a.m. to 8 p.m., and Sunday from 10 a.m. to 5:30 p.m. (Eastern Time).

Q. Besides saving me money, what other benefits do I get from using NMOP?

A. You will get a comprehensive, easy to use drug benefit at the lowest out-of-pocket cost. Best of all, your prescription will be checked against your personal medication profile in NMOP to insure that the medications being dispensed will not result in an adverse drug reaction with other medications you are taking.

Q. How can I find out if the medication I need is on the TMOP Formulary?

A. There are two sources of DoD TMOP Formulary information: (1) you can review the DoD TMOP Formulary WebPages on DoD's Pharmacoeconomic Center's Web site at www.pec.ha.osd.mil/tmop/tmophome.htm or (2) call Express Scripts International (ESI) at (866) DoD-TMOP (363-8667) or outside the United States at (866) 275-4732.

Q. How do I fill my prescription at a TRICARE network pharmacy?

A. Present a prescription written by your health care provider to the pharmacist along with your military ID card. The pharmacist will verify your enrollment in DEERS, fill the prescription, and charge you the copayment. There is no annual deductible or enrollment fee when you use participating pharmacies.

Q. If I must use a non-network pharmacy, what will I have to do and how will I file a claim with TRICARE to recover some of the cost?

A. If you use a non-network pharmacy, you may be required to pay the full cost of the medications and then file for reimbursement with the TRICARE claims processor for your region. Your cost share will be 20 percent of the cost of the drug, or \$9, whichever is greater. You will have to pay the annual TRICARE deductible of \$150 per fiscal year (Oct. 1 to Sept. 30), if the deductible has not already been met.

Q. I live in a foreign country; will I be able to use TSRx?

A. Yes. Retirees residing in foreign countries can use military pharmacies (if available), the TMOP (under certain conditions), or local pharmacies. While an overseas military pharmacy might be able to fill your prescription, services will depend on the country, source of the prescription, and the local policies of the MTF commander. The TMOP can be used but only under certain restrictions because of FDA requirements and state and international shipping laws. You can contact TMOP for restrictions. As an alternative, retirees can use local economy pharmacies (as non-network pharmacies), paying the full cost and filing a claim for reimbursement from TRICARE. You will be reimbursed the cost of the medications less a 20 percent copayment and annual deductions.

Q. Can I use TSRx if I have other health insurance (OHI)?

A. If you have a pharmacy benefit under an OHI policy, you must use up the other insurance's pharmacy benefit before you may use the TRICARE prescription benefit in either retail pharmacies or the mail order program. Medicare HMOs, the Federal Employees Health Benefits Program (FEHBP), and any Medigap supplemental insurance plans that include a

pharmacy benefit fall into this category. You can access TSRx when OHI benefits are exhausted or if the medication is not carried on the OHI formulary (list of available medications). For DoD retail pharmacy services, you can submit an EOB statement or similar document from your other insurance carrier to a TRICARE claims payer for your region.

Q. If I have OHI, can I get reimbursed for any copayments I have?

A. Yes. If you wish to submit a claim for reimbursement, you can download a claim form from the TRICARE Web site, www.tricare.osd.mil/claims. If you do not have access to the World Wide Web, contact the DoD Customer Call Center at (888) 363-5433 for claim phone numbers and claims addresses in your particular region.

TRICARE Reserve Select Eligibility Defined

Eligibility to purchase TRS coverage is determined by the Reserve Component member's Service/Reserve Component office.

To qualify, members must have served on active duty on or after September 11, 2001, for 90 consecutive days or more in support of a contingency operation and enter into an agreement with their Reserve Component to serve in the Selected Reserve for one or more years prior to leaving active duty. For Reserve Component members who are eligible and have already left active duty, they have until October 28, 2005, to complete their service agreement.

Details about completing Service agreements and enrollment process for TRS are available on the TRICARE website at <http://www.tricare.osd.mil/reserve/reserveselect/>.

SBP DIC Offset Update 03:

Sen. John Warner, Chairman of the Senate Armed Services Committee, has filed an amendment to the FY2006 Senate Defense Authorization Bill that would negate Sen. Bill Nelson's planned amendment on the SBP-DIC offset and paid-up SBP. Known as a second degree amendment, SA1598 would substitute language that directs the Veterans Disability Commission to study the SBP-DIC offset issue and include recommendations in their report to the President due next year. Warner's language would block Nelson's proposal to end the unfair deduction of VA survivor benefits from military SBP annuities when military service causes an active duty or retired member's death. And it would effectively delete language that would have moved up the effective date of paid-up SBP to 1 OCT 05. The government provides two entitlements to military survivors from different agencies - SBP from the Defense Department and DIC from the Veterans Administration, but presently will not allow these survivors to collect both benefits. DIC offsets the SBP benefit, dollar for dollar, up to \$993 a month. But survivors

of federal civilian retirees who are also veterans and die from a service connected cause do receive both benefits. This is a clear inequity, which needs to be fixed for 55,000 military survivors. An additional inequity is the current 2008 effective date of paid-up SBP after 30 years participation. That delayed effective date means that thousands of retirees who have been paying into SBP since 1972 will have to pay up to 36 years of premiums, and will end up paying one-third more premiums than members who retired after 1978.
 [Source: MOAA Leg Up 12 AUG 05]

SBP Open Season Frequently Asked Questions

SUMMARY: The FY2005 National Defense Authorization Act approved last year will phase out the current SBP age-62 benefit reduction by April 2008 – effectively providing lifetime SBP annuities of 55% of covered retired pay. The same legislation also authorized an “open season” to allow non-participating retirees or those who are participating at less than maximum coverage to enroll in SBP or increase their coverage to protect their spouses under the newly improved SBP plan. The one-year open-enrollment period will start Oct. 1, 2005. Retirees participating in the open season must pay all applicable back premiums, plus interest, either in a lump sum or in 24 equal installments. In certain cases, the Defense Department intends to include an additional amount in the open season enrollment fee “to protect the actuarial soundness of the retirement/SBP trust fund.”

SBP Open Season FAQs:

Q: When does the open season begin?

A: The one-year open season will begin October 1, 2005 and ends on September 30, 2006.

Q: Am I eligible to enroll during this open season?

A: Current non-participants in SBP will be able to elect any coverage they could have elected when previously eligible (generally on retirement from the active force or after receiving a Reserve 20-year retirement letter). Those currently participating in SBP at less than maximum levels may increase their coverage. The exception is that previous SBP participants who exercised an option to terminate SBP enrollment will not be allowed to re-enroll.

Q: How will DFAS notify eligible beneficiaries about the open season?

A: Official publicity will be primarily through uniformed service retiree newsletters and the Armed Forces Information Service. Notices will also be included with retirees’ December retired pay statements and in the Defense Finance and Accounting Service (DFAS) newsletter that accompanies the statement. MOAA and other Military Coalition associations will also spread the word in our publications and websites.

Q: How much will the open season buy-in cost?

A: Open season enrollees will have to pay all back premiums plus interest. In certain cases, there may be additional charges included in the enrollment fee. Before the open season begins on October 1, DoD will establish an SBP open season buy-in calculator on their website (location to be determined) to let retirees calculate their individual buy-in cost and the regular monthly premium they would start paying when the election takes effect.

Q: How do I apply?

A: Once final instructions are approved, DoD will have the application and instructions available on the DoD website (location to be determined). And DoD will continue to push information through the service’s monthly retiree newsletters (Air Force Afterburner, Navy Shift Colors, etc.). MOAA will also be able to provide members with an application once the DoD instruction is approved. Applications will have to be submitted in “hard copy” by mail. No on-line applications will be authorized.

Upon receipt of each application, DFAS will send the applicant a letter confirming the effective date of the coverage, the specific buy-in amount due, the specific monthly premium to be paid from then on and notification of the applicant’s right to terminate the new coverage within 30 days. After receipt of the application, DFAS will automatically enroll the applicant in SBP unless they decline enrollment within 30 days of the date on the letter. An electronic version of the SBP election form can be found at: <http://www.dtic.mil/whs/directives/infomgt/forms/eforms/dd2656-9.pdf>.

Q: What are my options for payment of the open season buy-in costs?

A: The payments can be made two separate ways. Payment can be made in one lump sum, or be taken out of your retirement check over 24 months. The 24-monthly installments are interest free. For the vast majority of applicants, MOAA believes the 24-installment method will be most prudent.

Q: When does SBP coverage begin?

A: Premiums will be deducted from retired pay as of the 1st day of the next month after DFAS receives the retired member’s application, i.e., if DFAS receives an application on October 15th, the effective date of the application is November 1st. HOWEVER, the retired member must survive and pay premiums for at least two years (in addition to having paid the buy-in fee) before the survivor will be entitled to the new SBP coverage.

Q: What happens if someone who enrolled during the open season passes away during the first two years after enrolling?

A: If the applicant passes away during this 2-year period, the survivor is refunded any paid SBP premiums and the open season buy-in amounts in a lump sum. The survivor is not covered by SBP if the retired member does not survive for 2 years following the effective date of the SBP application. The purpose of the two-year waiting period is to avoid “death bed elections”.

Q: Will spousal notification be required?

A: No, except for gray area reservists who elect any option other than maximum immediate coverage (option C).

Q: Can I opt out of SBP during the open season?

A: No, there is no new provision to opt out or reduce coverage during the open season. The only opportunity to opt out is the previously existing option to disenroll from SBP between the second and third anniversary of retirement from service. Members who opt out in this way will not be allowed to re-enroll.

Q: What are the qualifying “events” that allow me to enroll in the open season and how does that impact the fees I will have to pay?

A: Persons Purchasing SBP Coverage For a Current Spouse:

(1) If the applicant and spouse were married before retirement and elected not to participate in SBP at retirement, the applicant must pay all back premiums plus interest since the date of retirement – the qualifying event here is retirement.

(2) If the applicant was unmarried at retirement (thus having no beneficiary for SBP at retirement) and married during retirement, the applicant must pay all back premiums plus interest, since the one-year anniversary of the (under SBP law, retirees in such circumstances have up to one year after the marriage to elect SBP coverage).

(3) Persons Purchasing SBP Coverage For a Former Spouse: The applicant must pay all back premiums and interest since the date of divorce.

Note: In certain cases, the Defense Department may add an additional amount to the enrollment fee to “protect the actuarial soundness of the military retirement/SBP trust fund.”

Q: How will back premiums be determined for a Reserve or National Guard member?

A: (1) Reserve/National Guard member over the age of 60: Back premiums plus interest will be calculated back to age 60.

(2) Reserve National Guard member under the age of 60: Failing to elect Reserve Component SBP (RCSBP) options B (deferred annuity) or C (immediate annuity) when first eligible means that a Reserve or National Guard member deferred their SBP election until age 60. The open season gives these members another opportunity to elect SBP options B or C.

Persons in this category must weigh the options of continuing on their current path (and waiting to elect regular SBP at age 60), or determine if it is worth paying the increased RCSBP premium amount (upon receipt of retired pay) to have a relatively short period of coverage before they reach age 60. There is no open season enrollment charge for RCSBP elections. If a Reserve or National Guard member has further questions about the value of making this election, please contact MOAA’s benefits counselors at 1-800-234-6622.

Q: Can I still elect Supplemental SBP (SSBP)?

A: No. With the elimination of the age-62 benefit reduction for SBP, SSBP is not necessary and will be phased out.

Q: I understand that SBP premiums are taken out of retirement pay on a pre-tax basis. Will the SBP open season buy-in premium be tax deductible?

A: The open season buy-in premium is considered an enrollment charge. Therefore, it will not be tax deductible. Regular SBP premiums that will be paid beginning on the date of enrollment will be taken from retired pay on a pre-tax basis.

Q: Will the open season enrollees receive credit toward the thirty-year paid-up provision in SBP?

A: Yes, open season enrollees will receive credit toward the 30-year paid up provision in SBP. The amount of time credited will be based on the date used to calculate back premiums.

Q: Can I change my beneficiary?

A: No, you cannot change your beneficiary. You can add child coverage, however.

DFAS Web Site Change:

Members of the military retiree, whether they routinely use myPay or peruse the Defense Finance and Accounting Service (DFAS) web page only occasionally, should note a new DFAS web address. Users are now greeted with the message that www.dfas.mil moved to www.dod.mil/dfas as of 1 MAR 05. Those individuals who are linking to or are looking for current information should link to or go to www.dod.mil/dfas. Users who visit www.dfas.mil as of 1 APR 05 will be automatically redirected to the new web site as will users who follow links to any page or file at that same address. There has been no announcement as to when the redirection process will stop. The move was designed to

prevent down time and create an opportunity for enhanced features in the future. The move also will increase the speed of the site by more than 12 times. For those who have asked. If you want to send an email to DFAS you can go to the DFAS Web Site www.dfas.mil/s-retired/ret-pay.htm and click on the Retired or Annuitant Pay Customer Inquiry Request and the message form will popup. You should get a response in seven working days. If your communication is very sensitive or includes personal information that you do not want to convey on-line, contact their Customer Contact Center at 1-800-321-1080.

[Source: Air Force Retiree News 2 MAR 05]

Direct Deposit for Overseas Retirees

U.S. military retirees and annuitants living in certain overseas locations can have their monthly payments sent directly to their local banks through the Defense Finance and Accounting Services' (DFAS) International Direct Deposit program. The first phase of the program will begin Aug. 1 when enrollment packages are mailed to retirees and annuitants living in the United Kingdom, Australia, Canada, France, and Germany.

International Direct Deposit (IDD) will electronically deposit funds into an individual's bank account on the day they are paid. Enrollees will avoid delays caused by regular mail service as well as those experienced by misrouted or stolen checks. Each enrollment package will include the necessary instructions, form and return envelope to begin requests for IDD service. DFAS Retired and Annuitant Pay Service officials urge each enrollee to make sure the form is accurately completed and signed.

While the first phase of the program consists of only five countries, DFAS officials plan to add more than 35 nations to the list soon. More information on DFAS' International Direct Deposit program, as well as plans for future expansion can be found on the Defense

Finance and Accounting Service website at <http://www.dod.mil/dfas/>

Military Lodging:

Active duty and military retirees can check on the availability of Army billeting at military facilities anywhere in the world through one toll-free call. The toll-free number (800) 462-7691 connects callers with a central reservation system that can provide information on availability's and book rooms.

Navy Lodge guests can reserve rooms by logging onto NEXCOM's Website www.navy-nex.com. Guests can reserve a room or change, cancel, or confirm a reservation by accessing the Navy Lodge online registration link on the Website. The request is sent to the Navy Lodge Program's Central Reservation Center (CRC) in Jacksonville, Fla., for processing. Guests should receive an e-mail confirmation on any change made within 24 hours. If no confirmation number

is given, guests can call the CRC at 1-800-NAVY-INN. Internet reservations cannot be made, changed, or canceled later than two days prior to the arrival date. For more information, visit <http://www.navy-nex.com/> or telephone 1-800-NAVY-INN and speak with the customer service representative. Personnel can also check on the availability of billeting and make reservations at Air Force facilities worldwide at (800) 235-6343. A military Bed & Breakfast Club is available for a fee at (703) 525-3372 or retrveille@aol.com [refer to Bulletin article].

The Armed Forces Vacation Club (AFVC) is a space available program offering Department of Defense affiliated personnel the opportunity to take affordable vacations at resorts. The AFVC makes this possible by utilizing available inventory at timeshare resorts through RCI (Resort Condominiums International, LLC). This program allows active duty and retired military personnel the option to rent a vacation condo either in seven day increments or choose to stay for one night or more. Resort properties are available in the U.S. and Canada in daily and weekly increments. Nightly Getaway rates start as low as \$75 during peak season; with peak period weekly rates as low as \$199. Rentals come in a variety of sizes: one bedroom and larger condos, studios and cottages. Many of the vacation properties come with fully equipped kitchen, washer and dryer, living room, dining area, swimming pool, hot tub, fitness center and handicapped accessibility features. To make any AFVC reservation, members will need their AFVC installation identification number obtainable from one following offices, depending on the military installation: MWR (Moral, Welfare & Recreation), ITT (Information, Tours & Tickets or Information, Tours & Travel) and ITR (Information, Tours & Recreation). Nightly Getaway reservations must be made within 60 days of travel. Weekly rentals can be made up to 12 months in advance, based on availability. For Nightly Getaway reservations call 1-888-338-0970. For weekly reservations call 1-800-724-9988 or go to www.afvclub.com.

You can choose from a variety of Bed & Breakfasts, Guest Homes, Inns and Lodges in the Colorado Springs and surrounding areas at www.coloradorandr.com/ or the Pikes Peak area at <http://pikespeakareabnbs.com/>. Armed Forces Recreation Centers (AFRC) can also offer excellent accommodations in scenic areas. Check out:

1. AFRC Seward AK
<http://143.213.12.254/mwr/seward.htm> Tel: (800) 770-1858 / (907) 384-3474 / (907) 384-0248 Fax
2. AFRC Europe
<http://trol.redstone.army.mil/mwr/afrcs/index.html> or vacation@afrcs.garmisch.army.mil <<mailto:vacation@afrcs.garmisch.army.mil>> Tel: 011-49-8051-803172/803158F

3. AFRC HI "Hale Koa Hotel"
information@halekoa.com
<<mailto:information@halekoa.com>> Tel: (800) 367-6027/425-3329F
4. AFRC Keystone CO "Rocky Mountain Blue"
www.rockymountainblue.com
5. AFRC Korea "Dragon Hill"
www.dragonhilllodge.com Tel: 011-822-790-0016/792-0036F
6. AFRC Orlando FL - Shades of Green Resort
Tel: (407) 824-3600/3665F
7. AFRC Tokyo "New Sanno Hotel"
www.thenewsanno.com

[Source: Various AUG 05]

Off-duty travel site opens Australia as vacation destination

by Tim Hipps

U.S. Army Community and Family Support Center

ALEXANDRIA, Va. (AFPN) -- Military travelers can purchase vacations to Australia for about the same cost as a getaway to Europe simply by visiting a military-sponsored Web site.

Authorized morale, welfare and recreation patrons can go to the Off-Duty Travel Web site and click on "Joint Services Travel Specials" to begin a step-by-step process for building itineraries to a vacation down under. After preparing the itinerary, they can visit a supporting information, ticket and reservation office or information, tickets and travel office to finalize the booking, confirm arrangements and pay for the vacation.

"We're estimating these packages will be 10 to 30 percent less expensive than anything else they're going to be able to find," said Dan Yount, chief of Army Leisure Travel Services at the U.S. Army Community and Family Support Center.

MWR patrons can purchase eight-day trips from Los Angeles to Sydney, including lodging at three- or four-star hotels with some tours, starting as low as \$1,300. It can be even more affordable for servicemembers on rest-and-recuperation leave from operations Iraqi Freedom and Enduring Freedom.

"If someone is on R and R leave out of either Iraq or Afghanistan, the government will fly them any place that is shown as their destination on their leave orders," Mr. Yount said. "So when they're planning their R and R leave, and enter Sydney, Australia, as the leave destination, the transportation office will arrange transportation to Sydney.

"This is a benefit that could be a once-in-a-lifetime opportunity to go on a great vacation with Uncle Sam paying a major part of the expense," he said.

The Australian packages are available to active-duty people, members of the reserve components, retired military, family members and Defense Department civilians.

"Any authorized MWR patron (who) can provide proof of DOD affiliation is eligible," Mr. Yount said. "This kind of a product hasn't been available on a lot of military bases since 1999, when the Army and Navy parted company with commercial travel contractors providing leisure travel services on many installations. And it's never been available at a price this low."

Deployed servicemembers approved to take authorized R and R leave can click on the "R and R Troop Travel" link for more information. MWR patrons can also click on the "Great Travel Deals" link. Deals include numerous vacation packages to all eight of Australia's states.

Mr. Yount said prices fluctuate based on the season, but said there is no bad time to visit Australia.

"Australian seasons are the opposite of ours, with winter occurring in June, July and August, and summer starting in January," Mr. Yount said. "Weather patterns are much milder than a winter in the northeastern United States or the Midwest."

New York, Los Angeles and Honolulu are the embarkation points. Travelers can make arrangements from their nearest airport as part of the travel package using a Qantas code-share partner, or they may make their own travel arrangements to those destinations.

If travelers do not have access to a local travel office, they can make arrangements via e-mail or telephone. A deposit that includes the full price of the airline ticket and a percentage of the land packages will be required upon booking. Travelers will have until 45 days before departure to finish paying for the package.

"Somebody who wants to book a year out is going to be able to take their time paying, and it probably won't be painful at any one time," Mr. Yount said. "If somebody wants to pay all at once and leave in a week or two, that's their privilege, too. If they make (the reservation) within 45 days, they have to pay immediately."

Mr. Yount said the Australian vacation's affordability is tough to beat.

"We regard this opportunity as a great example of MWR in action to provide affordable, top-quality services and products at a price unavailable off the base," he said.

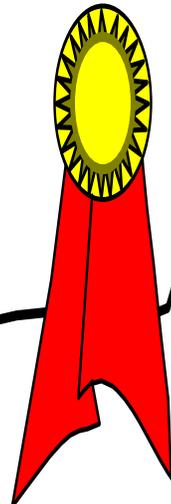
Here is the web site

<http://www.armymwr.com/portal/travel/travelresources/>

****TRANSITIONS****

RETIREMENTS

- Archer, Scott A., SFC
- Barnes, Edward H., SGT
- Beylerian, Alfred J., 1SG
- Bilodeau, Arlene V., SSG
- Bunker, Stephanie A., SFC
- Burgess, Mark D., SSG
- Dionne, Mark R., SSG
- Drew, Frank A., SGT
- Hafford, Michael L., 1SG
- Hawes, Alan R., SFC
- Jandreau, Larry J., SGT
- Lacasse, Gerard R., SGT
- Markey, Edgar A., SFC
- McAfee, Michael D., SSG
- Michaud, Douglas J., SSG
- Morin, Michael J., SFC
- Newey, Richard W., SFC
- Nicholas, Michael D., SSG
- Pottle, Rickey J., SFC
- Rediker, Mark A., SSG
- Skodinski, Richard W., SGT
- Stetson, Todd M., SSG
- Thurlow, Melzer F., SSG
- Turcotte, Andre J., SSG
- Young, Donald C., Jr., SFC
- Young, Jeffrey D., SGT



*(**Any names that are not on this list, was not done intentionally, please advise.)*



****TAPS****

ISG (Ret) Dick Simard

SSG (Ret) Edward C. Badore

CW4 David E. Butler

It is suggested that the Headquarters at Camp Keyes, Augusta, Maine be made aware of a deceased retiree. Upon receiving notification, word will be disseminated to Staff and Units of the Maine Army National Guard. This will enable any active guard member who may have served with the retiree to pay their condolences. Person to call is the Chief of Staff at 626-4280,



We will never forget

Flying Angels

24 May 2005

Today started out like almost every other day for me since I have been in Iraq. I got up at 0400, took a cold shower, and used my headlamp to dress in the dark so as not to wake my roommates. I walked just over a mile to the squadron hangar to receive the day's flight brief.

I did not have time to eat breakfast as the chow hall had not yet opened. I picked up a nutrition bar laying on my desk and a bottle of water so I could eat and drink something before I went flying as I didn't know if I would be back before lunch or not. I grabbed my flight equipment, M-16, and my emergency assault pack and proceeded to my helicopter.

We pre-flighted the aircraft, started up, and taxied for take off. I assumed that today flight would be like yesterdays, and similar to the day before. Moving people and supplies from one part of Iraq to the other. We call it "Ground Hog" day, after the movie starring Bill Murray.

Every day starts to seem the same here. However, today was not like the others. Today was different. Today was real. Our mission today was to extract Army soldiers from the field. They had been conducting operations to quell insurgent activities in their area of operations.

Our Operations department had briefed us that the soldiers had been out patrolling for over two weeks. I knew the soldiers would be tired, dirty, and more than likely a little ripe! I also knew the soldiers would be very appreciative on

getting a helicopter ride back to their base camp as they could get a well deserved hot meal and a shower.

As a Marine, I like to give the Army a hard time. The Army seems to enjoy giving it right back at me. This is just good-natured professional rivalry. Every service likes to think they are the toughest, smartest, and best-looking troops in the world. I was looking forward to making a few pointed remarks to my fellow warriors over the intercom system and listening to their replies. However, I never got the chance.

Our mission was changed while in route. The extract was cancelled. Instead, we were to land at their base camp and pick up five Angels. An Angel is the brevity code we use to describe the deceased. Instead of picking up hungry and tired soldiers, we now were going to be flying out the same soldiers who were just recently sharing a laugh with their friends.

The five Angels were carefully loaded on our aircraft one at a time. The Commanding Officer of the unit we were supporting helped load the Angels himself. He walked past the cockpit, and reached out his hand, as the senior pilot gave the Commanding Officer his hand in return.

A quick squeeze of the hand, between two strangers, and two different services, over individuals we Marines never had the pleasure to meet.

However, in that quick instant, the Army and the Marines Corps were one in the same. Fellow warriors had died! The simple squeeze of the hand between the two Officers let the Army know we understood their sorrow.

After the Angels were loaded, we completed our Take Off Checklist and began our departure from the camp. The unit stood at attention, over fifty rigid soldiers, saluting their fallen comrades as we exited the landing zone. I would be lying if I told you I did not shed a tear as I transitioned to forward flight. The Army was paying its last respects to their friends and brothers in arms.

I was honored to have been a witness to this magnificent display of devotion. It is this dedication, commitment, and brotherhood, which make me proud to serve in our Armed Forces. Though the five Angels on our aircraft will never know it, they were sent off with dignity and honor. However, something tells me they do know!

LtCol Jacques "Jackal" Naviaux II
Commanding Officer
HMM-764
Al Asad, Iraq

WILL SUCCESSION PLAN:

It's unavoidable. You are going to die sometime. To make it easier for your survivors you should have a will of some type. In your will, you should name an executor to act as

quarterback for your estate. In some states, an executor is known as an administrator or personal representative. After your death, it will be up to your executor to inventory your possessions, pay bills, file tax returns, and make sure your assets are distributed according to your instructions.

Therefore, you should give careful thought to choosing an executor. You might not want to name your spouse as an executor because he or she probably will be too upset to act effectively. A grown son or daughter might be a better choice. If that's not practical, you can name a professional advisor, such as an accountant or an attorney. For professionals, a fee schedule should be worked out in advance. Whomever you choose as your executor, make sure you get his or her consent to serve before naming someone in your will. You should line up a backup executor, too, in case your original selection becomes unable to serve. Then, go over everything with your executor. Your executor should know what your assets are and where the paperwork can be found.

[Source: New Mexico e-Veterans News 29 JUL 05]

Volunteers Welcome In Helping To Conduct Military Funeral Honors:

The POC for this is:

Mr. Frank R. Norwood, MSG (Ret)

Military Funeral Honors

Contract Coordinator

(207) 626-7822

Cell: (703) 901-8531

All volunteers are welcome to be AP3 certified and placed on the resource list in helping to conduct Military Funeral Honors, honoring those who served. The rendering of Military Funeral Honors is a way to show the Nation's deep gratitude to those who, in times of war and peace, have faithfully defended our country. Funds are available to compensate certain categories of retirees and buglers. The process involves training by a Military Service to ensure a civic organization and / or retirees participating in rendering military funeral honors can perform honors to standard. The training and certification are done at a location to be determined by the needs of the organization. The training takes just a 2 -3 hours depending on the individuals. After the standard of training is met, a certificate and Military Funeral Honors pin like the one shown is provided to the individual(s). In addition, a video is provided for refresher training down the road.



Here is the web site address that will lead you to a web page that explains the Authorized Provider Partnership Program (AP3), the program's standards and training, etc. <http://www.mfhcmdrs.osd.mil>

****MISCELLANEOUS****

AAFES Honors Retirees

The Army & Air Force Exchange Service (AAFES) will formally honor military retirees during its annual "Still Serving" weekend, Sept. 16-18, at PXs and BXs throughout CONUS and in select stores in Europe and in the Pacific. Throughout the "Still Serving" weekend, AAFES stores will host special events such as drawings, free refreshments, free product samples, vendor demonstrations and door prizes. Retirees can learn about activities planned for their Exchange by calling their local store manager. Contact information can be found online at the AAFES website at <http://www.aafes.com>, by clicking on the "store locator" link.

AFRC SHADES OF GREEN UPDATE [3]:

The Shades of Green at Walt Disney World Resort in Orlando FL has announced 2005 end of summer specials available from 7 AUG through 30 SEP. Members of the military community, including retired members, are eligible for package deals designed for whatever type of vacation they are seeking. With the Fun & Sun Package, guests enjoy superb accommodations with complimentary breakfast daily at the Garden Gallery Restaurant. This 5 to 8 night package is based on double occupancy. Prices start at \$399 (for two adults) for Category 1 guests and \$499 (for two adults) for Category 2 and 3 guests. The Ultimate Access VIP Package is \$749 per person, based on double occupancy. It's a six day, five night stay at Shades of Green and a lot of scheduled activities. Resort officials indicated that Shades of Green guests have exclusive access to discounted theme park tickets, reduced rates at Disney's PGA professional golf courses, Extra Magic Hours at the parks, and much more. To book one of the End of Summer Specials, call the Shades of Green Reservations M-F from 0800-1700 EST at (888) 593-2242.

Additional information is available at www.shadesofgreen.org/funandsun.htm.
[Source: Air Force Retiree News 5 JUL 05]

****UPCOMING EVENTS****

MeARNG Retiree Council Meeting Dates for 2005:

The Council meets on Tuesdays at 0900 in the TAG conference room, Camp Keyes, Augusta. Any retiree or non-retiree is welcome to attend. Satellite teleconferencing is now available to the areas in Bangor, Aroostook County and soon to be Portland. This will eliminate travel and time for those interested in attending the council meetings.

<u>DATE</u>	<u>DAY</u>
February 15 2005	Tuesday
April 12 2005	Tuesday
June 14 2005	Tuesday
August 16 2005	Tuesday
October 18 2005	Tuesday
December 13 2005	Tuesday

All meetings at 0900 hours – TAG conference room
Al White, Chairman

Maine Army Retiree Council Meetings – Calendar Year 2005:

(Not to be confused with the MEARNG Retiree Council. This council is for all branches of service in Maine).

The Maine Army Retiree Council conducts meetings, at various times, which imparts information of interest to all military retirees. Retirees of all military services, and their spouses, are invited and encouraged to attend. Scheduled meetings for 2004 are as follows:

- 08 Apr 05, 1930 hrs, Air National Guard Base, 514 Mainiac Ave., Bangor, Me 04401
- 10 Jun 05, 1930 hrs, Post #31 American Legion Post, Washington St., Auburn, Me 04210
- 11 Aug 05, 1930 hrs, Maine Veterans Home, Scarborough, Me 04074
- 14 Oct 05, 1930 hrs, Post #40, American Legion Post, Winthrop, Me 04364

For additional information relative to these meetings, contact either of the following individuals:

- LTC William Allenack, USA (Ret) 998-3518, PO Box 52, West Poland, Me 04291
- CSM Edward L. Davis, AUS (Ret) (207) 469-7918, PO Box 50, East Orland, Me 04431
- CSM Estol R. "Mac" McClintock, USA (Ret), (207) 683-6121, 59 Huff Corner road, Wellington, Me 04942-8709
- SFC Harold L. Ware, AUS (Ret) (207) 642-2757, 110 Fort hill Road, Standish, Me 04084

"World's Biggest Case Lot Sale"

Brunswick NAS Commissary

Worldwide Wide Case Lot Sale Returns In September

The September worldwide commissary case lot sale will feature "bargains by the case" and savings of up to 50 percent off regular prices on popular items such as paper goods, beverages and cleaning supplies--and even chill or meat items in some locations. Nearly all commissaries will be

participating sometime during the month of September, but dates and times will vary from location to location. Additional information, including case lot sale schedules for specific commissaries will be available at <http://www.commissaries.com> in mid August. When the worldwide sales page goes live, it will also be announced through the Defense Commissary Agency's customer newsletter "Commissary Connection," which delivers general commissary news via e-mail. Customers can sign up to receive this newsletter of the front page of <http://www.commissaries.com>. The worldwide case lot sales are held in May and September. Commissary customers purchased over 1.4 million cases of product in the May "worldwide" case lot sale.

Brunswick Commissary Caselot Sale
September 16 - 17, 2005
Hours: September 16 - 1000 - 1900
September 17 - 0900 - 1800

NBK-Bangor Commissary

The next Worldwide Truckload/Caselot Sale will be held from September 15th through September 17th, 2005 right here at your NBK-Bangor Commissary. The Sale will feature many of your favorite items such as paper towels, toilet tissue, canned veggies, and soft drinks, and will put special emphasis on products for "back-to-school."

Enjoy the extra savings of 20 to 40% off our everyday low prices.

September 15th, 16th, and 17th for incredible selection and savings...put it on your calendar TODAY!

Bangor ANGB

September Case Lot Sale – September 1-3

Your meat department has SELECT, CHOICE and BLACK ANGUS cuts of beef available for your shopping needs. You can save when buying SELECT.

Handy Cap shoppers may enter the store 30 minutes before the store opens.

Your Internet Coupons Accepted Here!

Commissaries are once again accepting computer-generated internet coupons. To guard against possible fraud, internet coupons must have a barcode that commissary checkouts can scan and they cannot be redeemed for "free" products. Photocopied or facsimile-generated coupons are still not accepted. Later this month DeCA will begin reestablishing links to internet sites with grocery coupons geared toward military shoppers so check back at the links page at www.commissaries.com around the end of August. Commissaries stopped accepting home-printed coupons

nearly a year ago as an interim measure to protect against loss as grocery industry grappled with their fraudulent use.

Welcome National Guard and Reserves to Full Time Shopping.

Please see our community section for special events and dates.

Maine Military Historical Society Annual Meeting

Please give wide dissemination to the following information on the annual meeting of the Maine Military Historical Society scheduled for Saturday evening 22 October 2005 at the Senator Inn on Western Ave in Augusta. As you may know the society runs the military museum located at Camp Keyes.

The theme for the evening is to honor individuals who have served as combat journalists and photographers. Featured guest speaker will be Iraq Veteran Bill Nemitz from the Portland Press Herald, Portland, Maine who was imbedded with the 133rd Engr Bn. Bill's great articles and Mister Greg Rec's photos kept all readers well informed.

As you would expect this evening will be filled with a lot of RED, WHITE and BLUE. A combo from the 195th army Band will entertain during the social hour. The Maine Select Honor Guard will post colors and a special rendition of the National Anthem will follow.

Social hour starts at 1800 hours and the program starts at 1900 hours. Dress for the evening is casual.

Cost for the great Senator Inn buffet is \$25.00 per person tax and tip included.

To obtain an information letter which includes a registration form, contact Ms Soraya Thomas at 207-626-4350. Ms Thomas works at the DFE office in Camp Keyes.

Seating is limited to 150 so please act now to reserve your seat for a GREAT EVENING!

Albert J. White, Jr.
MMHS Banquet Chairman

Army Aviation Reunion

There will be an "**Army Aviation Reunion**" taking place this fall in conjunction with the dedication of the Army Aviation Support Facility. The date for this event is to be announced based on the completion of the AASF.

We are in need of addresses of individuals who have been in aviation units over the years. If anyone has any addresses would they please e-mail them to one of the following individuals:

Albert White Jr. @ (207) 442-8734 or e-mail ajwhite@awi.net

Brenda Vaillancourt @ (207) 825-3422 or e-mail brenda2877@msn.com

****FOR YOUR INFORMATION****

Significant Developments With The Maine Army National Guard:

The following chart depicts Maine Army National Guard units and personnel currently alerted, mobilized and deployed as well as the operation or mission they are supporting.

Unit/Loc	Mission	Per	Location	Status
133 rd Engineer Combat Battalion (Heavy)	Operation Iraqi Freedom	1	Togus VA Hospital (No longer on Military Duty)	Medical
152 nd Maint Co. Replacement	Operation Iraqi Freedom	31	In Maine	Medical
1 st Battalion, 152 nd FA Ops. Officer	Operation Enduring Freedom	21	Kuwait	Deployed
B Co 3-172 nd Infantry BN, (TF Sabre)	Operation Iraqi Freedom	1	Home Station	Terminal Leave
112 th Medical Company (Air Ambulance), Bangor	Operations Enduring Freedom	7	Iraq	Deployed
JFHQ Admin NCO	Operation Iraqi Freedom	2	Returned to Maine	Medical Hold
JFHQ Logistics Officer	Operation Enduring Freedom	1	Iraq with 42 nd Inf Div., New York National Guard	Deployed
Maine Army National Guard Nurse	Operation Noble Eagle	1	Kabul, Afghanistan	Deployed
152 nd Ord Co (Maint)	Operations Iraqi Freedom	1	Hanscom AFB, MA	On Station
		108	Iraq in support of 256 th Inf BDE, Laarng	Deployed

52 nd Troop Command	Operation Iraqi Freedom	1	Kuwait	Deployed
52 nd TC JAG Officer	Operation Iraqi Freedom	1	In support of 43 rd MP Bde, RI ARNG	Mobilization Station
B Co. 3-172 nd Infantry BN	Operation Iraqi Freedom	1	Baghdad, Iraq	Deployed
286 th QM BN	Operation Noble Eagle	1	Ft. Irwin, CA	On Station
1136 th Trans Co.	Operation Noble Eagle	1	Ft. Irwin, CA	On Station
Maine Army National Guard Soldiers	Security	25	Camp Keyes; Army Aviation Support Facility/Augusta Armory	On Station
Co B, 3 rd BT 172 nd Inf Bn	Operation Enduring Freedom	5	Afghanistan	Deployed
1 st Battalion, 152 nd FA	Operation Noble Eagle	23	Fort Sill, Oklahoma	On Station
Maine Army National Guard Doctor	Operation Enduring Freedom	1	Home Station	Terminal Leave
Maine Army National Guard Doctor	Operation Enduring Freedom	1	Fort Lewis, Washington	Mob Station
Det 2, G 126 AV	Operation Iraqi Freedom	5	Fort Dix, NJ	Mob Station
Grand Total:		239		

Cancer Linked to Nerve Agent

USA Today / July 26, 2005

For the first time, a study has found an increase in brain-cancer deaths among Gulf War veterans who might have been exposed to the



nerve agent Sarin by the destruction of Iraqi weapons in 1991.

About 100,000 of the 350,000 Army soldiers in the Persian Gulf could have been exposed to Sarin after soldiers blew up two large ammunition caches in Khamisiyah, [Iraq](#), in March 1991, according to a study commissioned by the military and performed by the Institute of Medicine. The institute advises the government on health policy.

At the time, the military didn't know that the destroyed Iraqi rockets contained Sarin, says Michael Kilpatrick, deputy director for the Deployment Health Support Directorate in the Department of Defense. Soldiers showed no signs of exposure to chemical warfare.

Later, however, United Nations inspectors found that some of the weapons contained Sarin, which can cause convulsions and death. The military has since contacted about 300,000 veterans who were in or near areas that might have been affected. The potential "hazard area," where shifting winds could have carried traces of chemicals, extended at times as far as Kuwait and Saudi Arabia.

According to the study, soldiers inside the hazard area were about twice as likely as those outside it to die from brain cancer. Because the actual number of brain-cancer cases was small, the overall mortality rate was the same for veterans in the hazard area and outside the area, according to the study, published in the American Journal of Public Health.

Among unexposed soldiers, researchers found a brain-cancer death rate of 12 per 100,000 from 1991 to 2000, says William Page, director of the study. During the same period, researchers found 25 brain-cancer deaths per 100,000 veterans who were exposed.

"It's a doubling of risk, but it's still a pretty small risk," says Page, a senior program officer at the Institute of Medicine. The study did not address "Gulf War syndrome," as some have called the collection of ailments experienced by returning veterans. It examined whether soldiers possibly exposed to the destruction of Iraqi weapons were more likely to die for any reason. The study also singled out specific diseases: breathing problems, infections, circulatory problems, digestive ailments, accidents and suicides, as well as four types of cancer.

The study's authors note that Sarin has never been shown to cause cancer. Page suggests that researchers follow veterans to see whether the risk of brain cancer, which is believed to develop over 10 to 20 years, changes over time. Page also notes that the study doesn't prove that being in the hazard area caused brain cancer.

Melissa Bondy, a professor of epidemiology at M.D. Anderson Cancer Center in Houston, questions why only one or two days of exposure would increase brain-cancer mortality. Other experts note that the study could shed light on the causes of brain tumors, about which doctors know little.

"It's a very solid study," says Faith Davis, a professor at the University of Illinois-Chicago. "It needs to be taken seriously."

CFB Gagetown & Agents Orange/Purple Update

Information Paper as of 06 July 2005

The Canadian Department of National Defense (DND) announced that for three days in June 1966 (14-16) and four days in June 1967 (21-24), testing of various defoliants, including Agent Orange and Agent Purple, took place over a limited portion of the Canadian Forces Base (CFB), Gagetown, New Brunswick.

Additionally, according to the Canadian DND and the Canadian Forces (CF) website, "the testing was conducted under strictly controlled conditions, ensuring minimal spray drift, in an area of the base that was difficult to access", "the testing did not involve wide-spread spraying", and "these tests are the only known instances, based on available information, in which Agents Orange and Purple were sprayed at CFB Gagetown." The testing area was comprised of two small areas covering approximately 83 acres of the 180,000 plus acres of CFB Gagetown. Additional information is available at the Canadian DND/CF website: (http://www.forces.gc.ca/site/newsroom/view_news_e.asp?id=1685).

The Canadian DND also stated that they will be initiating a soil, vegetation, and water sampling program this summer in the areas where Agents Orange and Purple were tested. Upon completion of the testing the results will be made available to the public. The Canadian DND will also work with the U.S. Department of Defense (DoD) to research the relevant files concerning Agent Orange and the 1966/1967 testing to better understand and evaluate any issues of concerns. Once the Canadian DND and CFB Gagetown finish soil testing, and publicize the results, various U.S. federal agencies may review the results and determine the potential threat to and/or effects on U.S. forces.

In the mean time, the Maine National Guard remains determined to look after our soldiers, both past and present. We will ensure all precautionary measures are taken while our soldiers train for war. The Maine National Guard began training at CFB Gagetown in 1971, four years after the completion of Agents Orange and Purple testing, and continued at Gagetown through June 2005. Upon completion of the testing and validation process the Maine National Guard will evaluate CFB Gagetown as a future training site. The next scheduled training is in June 2006, although this is subject to change.

The Maine National Guard and the Maine Department of Veteran's Services take very seriously the health and safety concerns of both present soldiers and veterans. In that regard,

a link will be established on the Maine National Guard internet website (<http://www.me.ngb.army.mil/Default.htm>) regarding this matter which will provide updates regarding this issue as the situation changes. In addition, soldiers and veterans will be afforded the opportunity to be added to a contact list of soldiers who trained at CFB Gagetown. Should the need arise; these individuals will be contacted. For those without internet access, you can call the Department of Veteran's Services in Augusta, Maine at 207-626-4464 to obtain updates and manually register.

Since the initial use of Agent Orange, significant studies and validation of effects on personnel have resulted in various national programs and assistance for affected veterans. The Veteran's Affairs (VA) currently maintains an active VA Agent Orange Registry and provides medical treatment or disability compensation to Vietnam veterans. In 2001, the program expanded to examinations of Korean veterans who served in Korea in 1968 and 1969 and may have been exposed to dioxin or other toxic substances while serving in the military. Additional information, fact sheets, and newsletters are available online at www.va.gov/agentorange or call the toll-free helpline at 1-800-749-8387. To download this letter select one of the following: for MS Word [format CFB Gagetown - Agents Orange/Purple v3.doc](#) for Adobe PDF format [CFB Gagetown - Agents Orange Purple v3.pdf](#)

If you would like to be placed on the contact list please click this link. [Gagetown Agent Orange Contact List](#)

PTSD Assistance Programs:

As a result of service experiences 10 to 20% of veterans will subsequently develop post-traumatic stress disorder (PTSD), a psychiatric disorder that occurs after a life-threatening event, such as personal assault, natural disaster, or military combat. The affects of PTSD can be debilitating with symptoms ranging from severe nightmares and flashbacks to insomnia and increasing social isolation. In recent years, the focus for the military has been on the rising occurrences of combat-related disorders as more and more soldiers return from war. It is common for soldiers to deal with post-combat depression, insomnia, nightmares and family issues; however, it's the duration and intensity that differentiate normal reactions from a diagnosis of PTSD. According to clinical psychologists it's normal to be affected by combat. However, when the nightmares become so vivid and horrible they wake the soldier from sleep or the soldier develops a profound anger that the symptoms become problematic. If these and other symptoms continue for six months, PTSD is a strong possibility. To start the healing process, psychiatrists recommend a variety of methods, such as relaxation techniques, sleep strategies and, in some cases, medication. Each military branch has programs for its servicemembers, and the Department of Veterans Affairs offers free counseling

sessions. For more information on PTSD or VA assistance, refer to The National Center for Post-Traumatic Stress Disorder (PTSD) website www.ncptsd.va.gov or contact the local military mental health facility. [Source: *Military.com Report 18 JUL 05*]

Army Announces New Combat Action Badge Design

*Army News Service
May 27, 2005*

WASHINGTON - The Army announced today the design for the Combat Action Badge.

The design was approved by Gen. Peter J. Schoomaker, Army chief of staff.



The CAB, featuring both a bayonet and grenade, may be awarded to any Soldier performing assigned duties in an area where hostile fire pay or imminent danger pay is authorized, who is personally present and actively engaging or being engaged by the enemy, and performing satisfactorily in accordance with the prescribed rules of engagement, according to its authorizing language. Award is not limited by one's branch or military occupational specialty.

"Warfare is still a human endeavor," Schoomaker said. "Our intent is to recognize Soldiers who demonstrate and live the Warrior Ethos."

"The Global War on Terrorism and its associated operations will be the first era of conflict considered for this award," said Lt. Col. Bill Johnson, Human Resources Command chief of military awards. "September 18, 2001, is the effective date for the new award. That is when President Bush signed Senate Joint Resolution 23, authorizing the use of military force against those responsible for the recent attacks launched against the United States."

The CAB will go into immediate production and should be available late this summer or early fall through unit supply and military clothing sales stores.

First Female since WWII To be awarded the Silver Star

SGT Leigh Ann Hester, vehicle commander, 617th Military Police Company, Richmond, KY, stands at attention before receiving the Silver Star at an awards ceremony at Camp



Liberty, Iraq, June 16. SGT Hester is the first woman Soldier since World War II to receive the Silver Star.

Photo by SPC Jeremy D. Crisp

By SGT Sara Wood

American Forces Press Service

Courtesy of DefendAmerica.mil

6/16/05, WASHINGTON – For the first time since World War II, a woman Soldier was awarded the Silver Star Medal today in Iraq.

SGT Leigh Ann Hester of the 617th Military Police Company, a National Guard unit out of Richmond, KY, received the Silver Star, along with two other members of her unit, SSG Timothy Nein and SPC Jason Mike, for their actions during an enemy ambush on their convoy. Other members of the unit also received awards.

SGT Hester's squad was shadowing a supply convoy March 20 when anti-Iraqi fighters ambushed the convoy. The squad moved to the side of the road, flanking the insurgents and cutting off their escape route. SGT Hester led her team through the "kill zone" and into a flanking position, where she assaulted a trench line with grenades and M203 grenade-launcher rounds. She and SSG Nein, her squad leader, then cleared two trenches, at which time she killed three insurgents with her rifle.

When the fight was over, 27 insurgents were dead, six were wounded, and one was captured.

SGT Hester, 23, who was born in Bowling Green, KY, and later moved to Nashville, TN, said she was surprised when she heard she was being considered for the Silver Star.

"I'm honored to even be considered, much less awarded, the medal," she said.

Being the first woman Soldier since World War II to receive the medal is significant to SGT Hester. But, she said, she doesn't dwell on the fact. "It really doesn't have anything to do with being a female," she said. "It's about the duties I performed that day as a Soldier."

SGT Hester, who has been in the National Guard since April 2001, said she didn't have time to be scared when the fight started, and she didn't realize the impact of what had happened until much later.

"Your training kicks in and the Soldier kicks in," she said.

"It's your life or theirs. ... You've got a job to do -- protecting yourself and your fellow comrades."

SSG Nein, who is on his second deployment to Iraq, praised SGT Hester and his other Soldiers for their actions that day. "It's due to their dedication and their ability to stay there and

back me up that we were able to do what we did that day," he said.

SGT Hester and her fellow soldiers were awarded their medals at Camp Liberty, Iraq, by Army LTG John R. Vines, Multinational Corps Iraq commanding general. In his speech, LTG Vines commended the Soldiers for their bravery and their contribution to the international war on terror.

"My heroes don't play in the (National Basketball Association) and don't play in the U.S. Open (golf tournament) at Pinehurst," LTG Vines said. "They're standing in front of me today. These are American heroes."

Three Soldiers of the 617th were wounded in the ambush. SGT Hester said she and the other squad members are thinking about them, and she is very thankful to have made it through unscathed. The firefight, along with the entire deployment, has had a lasting effect on her, SGT Hester said.

"I think about it every day, and probably will for the rest of my life," she said.

VA Services for Veterans of Operation Iraqi Freedom and Operation Enduring Freedom

The Department of Veterans Affairs (VA) and the Department of Defense (DoD) continue their partnership to meet the needs of our newest veterans – the men and women who served in Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF) – by assisting them with a smooth transition from active duty to civilian life.

VA's goal is to ensure that every seriously injured or ill serviceman and woman returning from combat receives priority consideration and world-class service. Together VA and DoD are finding ways to move records more efficiently between the two agencies; share critical medical information electronically; protect the health of troops stationed in areas where environmental hazards pose a threat; process benefits claims quickly and efficiently; and, in every way possible, hold open the doors to an uncomplicated passage from soldier to citizen.

Benefits and Services

Active-duty personnel, and Reservist or National Guard members who serve in a theater of combat operations are eligible for hospital care, medical services, and nursing home care for injuries or illnesses they believe are related to combat service for a period up to two years beginning on the date of discharge or release from service. This two-year eligibility for medical care is available even if there is insufficient medical evidence to conclude that the veteran's illness is the result of combat service. At the end of the two-year period,

these veterans can continue to receive free health care for injuries and illnesses officially connected to military service.

In addition to health care, VA offers a spectrum of programs for veterans, including disability compensation, vocational rehabilitation, prosthetic services, life insurance, pension, education benefits, specially adapted housing and automobile grants, and survivor and burial benefits. Many VA services are provided at a higher priority or on an expedited basis for this newest generation of combat-disabled veterans. VA programs for veterans with a service-connected injury or illness apply equally to those who served in the regular active duty forces and to National Guard members or reservists returning from federal activation.

Seamless Transition – 2/2/2/2

VA Outreach

In an effort to assist wounded military members and their families, VA placed benefits counselors at key military hospitals where severely wounded service members from Iraq and Afghanistan are frequently sent.

Currently, six staff members are assigned full-time to work with patients at both the Walter Reed Army Medical Center in Washington, D.C., and the Bethesda Naval Medical Center in Maryland. Four of the counselors specialize in benefit programs and two are social workers who facilitate health care coordination as service member's transition from military to VA care.

On a part-time, or as-needed basis, similar teams work with patients, discharge planners, and other military staff at three other key DoD medical centers caring for seriously injured troops: Eisenhower Army Medical Center, Ft. Gordon (Ga.); Brooke Army Medical Center, Ft. Sam Houston (Texas); and Madigan Army Medical Center at Western Regional Medical Command, Tacoma (Wash.).

Throughout the nation, VA officials review military disability retirement lists to identify service members from Iraq or Afghanistan for special outreach efforts. Iraqi Freedom and Enduring Freedom coordinators at each VA benefits office and medical center coordinate with DoD discharge staff to ensure a smooth transition to VA services at locations nearest to the veteran's residence after discharge. Through this coordination, the veterans are known at the local VA facilities that process their benefits claims, and continuity of their medical care, including medications and therapy, is ensured.

Military Services Briefings

Military Services Briefings are designed to ensure that servicemembers are aware of their VA benefits and to provide assistance as needed. Briefings include separation and retirement seminars, pre- and post-deployment briefings as well as the formal Transition Assistance Program. For those leaving active duty due to medical problems, the outreach effort is intensified to ensure a full understanding of the VA

compensation process and vocational rehabilitation and employment programs.

Generally briefings range from one to three hours; however, the formal TAP workshop is a three-day seminar conducted by VA, DoD and the Department of Labor at military installations for personnel within 90 days of separation. It provides a number of services to assist military personnel in making a smooth transition to civilian life. All military services briefings cover the full range of benefits administered by VA including compensation, education, vocational rehabilitation and employment, health care, insurance and more.

Seamless Transition – 3/3/3/3

Benefits Delivery at Discharge

A joint VA-DoD initiative is helping personnel file for and receive service-connected disability compensation benefits more quickly than in the past. The goal is to adjudicate claims within 30 days of discharge by examining service members as part of the discharge process. By comparison, VA's national average processing time is 163 days for claims requiring a disability rating.

In the Benefits Delivery at Discharge program, the medical information needed to begin the VA claims process carries over from DoD to VA seamlessly. In addition, if a service member is found to be disabled, additional applicable vocational and employment services may be quickly initiated.

Veterans Disability Benefits Commission:

The Veterans Disability Benefits Commission was created through a provision in the 2004 Defense Authorization Act. It held its first meetings in May and June during which it took testimony from invited groups. The 13-member panel is tasked with issuing its final report to Congress in AUG 06. Congress has instructed the Commission to examine the appropriateness of:

- Compensation for disabled vets and survivors of vets who died from causes related to military service.
- The level of such benefits.
- A standard for determining whether a disability or death of a veteran should be compensated.

VFW and other veterans advocates are concerned that the commission panel will attempt to roll back increases in benefits disabled vets and dependents of deceased veterans have gained since 1999 by suggesting current VA rating evaluations are too generous. The belief is that the commission's goal is to cut future benefits and remove veterans from VA compensation rolls. Some issues under review that would do this are:

- Changing the definition of when an active-duty service member is actually on active duty. Last year Dr. David Chu, the Pentagon's undersecretary for personnel and readiness, questioned whether active-duty GIs who get hurt while participating in activities during their free time--like weightlifting or other forms of physical training--should be eligible for service- connected benefits.
- Consideration of a controversial proposal to offer lump-sum payments to veterans with current disability ratings of 20% or less. Proposed by VA's Inspector General (IG), the payments would disqualify disabled vets from future compensation or appeals and supposedly allow Veterans Benefits Administration (VBA) employees to concentrate on more complex claims.
- Consideration of an IG suggestion during their June meetings that the VBA review post-traumatic stress disorder (PTSD) and individual unemployability claims for errors or evidence of fraud. The plan is for 10 VBA staffers to review an initial batch of 2,100 cases before moving on to the main task of inspecting 100,000 of those ratings.

VFW will be monitoring all of the commission's open meetings in order to keep their membership informed of the Commission's progress and potential impact of their decisions.

[VFW Magazine Tim Dyhouse article AUG 05]

Low Income VET Benefits:

Low Income disabled and senior citizen veterans have a number of VA, Social Security, and in many areas of the country city & state benefits available to them. Vets should check with VA, SSA, and their local County Social Services Office for eligibility. Although not all inclusive some of these follow:

1. Low Income Veterans age 65 and over who earn less than \$846 per month from Social Security, Widow, or Retirement Income or Disability Insurance or from any other source, and who were in the service 90 days or more of which at least one day was during a period of War (regardless whether they were actually in a combat zone or not) are entitled to VA's non-service connected disability pension (NSCP). Federal Veterans Law states that for the purposes of the Non-Service Connected Pension, Veterans age 65 and over are considered "automatically disabled" and unable to perform a "substantial gainful occupation" even if they are not actually disabled. This

pension is not payable to those who have assets that can be used to provide adequate maintenance. There is also a limit on cash assets that does not include the home in which they reside, furniture, or one vehicle they drive. Veterans should contact the Veterans Service Officer of their choice to see if they qualify.

2. If a Veteran 65 and over does not qualify for VA's NSCP and his or her income from Social Security Widow or Retirement or Disability Income or any other source, is less than \$599 per month, and has less than \$2,000 in cash assets, then he or she is automatically eligible for additional Income from SSI which currently pays \$599 per month. They are also eligible for Medicaid. For example if a Senior is receiving \$450 from Social Security they would be eligible for another \$149 from SSI. Plus their State may also pay for their Medicare monthly payments. These benefits also apply to non-Veterans who meet the same criteria.
3. In Florida, Veterans receiving Social Security Widow or Retirement Income or Disability Insurance whose total income is less than approximately \$1068 per month for a single person, and whose total cash assets are less than approximately \$3000, the state states will pay their monthly "Medicare" payment for them. More income is permitted if married... This benefit also applies to non-Veterans who meet the same criteria.
4. The State of Florida Office of the Public Counsel will give a Credit directly to your Local Telephone Service Company of about \$13.50 per month for any Low Income Seniors and Low Income Disabled Persons of any age on SSDI or SSI. To apply for "LIFE-LINE" call toll free 1(800) 540-7039.
5. Low-Income Veterans who live in Florida and who earn under \$846 per month and are not eligible for the NSCP, may also be eligible for help with their monthly Electric and/or Gas bills through their County Social Services Office. There are also Private Non-Profit Organizations that will assist Low-Income Disabled Persons and Seniors with up to \$75 once a year for their Gas or Electric bills. This benefit also applies to non-Veterans who meet the same criteria.
6. Veterans under 65 year-old even if they are receiving Social Security Widow or Retirement Income, are still eligible for Social Security Disability Insurance (SSDI) which pays

approximately \$300 more per month than Social Security Widow or Retirement Income. Veterans in this category who cannot perform "Substantial Gainful Activity" due to a Physical or Mental Disability should apply for SSDI directly with the SSA or through an Attorney. This benefit also applies to non-Veterans who meet the same criteria.

7. Low-Income Veterans whether Disabled or not who do not have a Motor Vehicle and who live in Pinellas County, Florida, may be eligible for a Monthly Bus Pass costing only \$4.25 per month through GPTMS. The phone number is (727) 545-2100. Similar Programs may be available in other Florida Counties and other States. This benefit applies to non-Veterans who meet the same criteria.

[Source: *Independent Veterans Advocate Terry Richards veteranscorner@yahoo.com AUG 05*]

Bill Targets Fake Heroes

Rep. John Salazar, D-Colo., has introduced "The Stolen Valor Act of 2005," which would authorize authorities to prosecute individuals who falsely claim to rate military decorations, medals, or badges. The bill would close a loophole in the law that currently only allows prosecution against a person who actually wears an unauthorized medal.

The bill would set fines and imprisonment of up to six months, or both, for anybody who falsely claims verbally or in writing to have been awarded a decoration or medal authorized by Congress for the armed forces. Unauthorized ribbons, buttons and rosettes are included in the bill.

Fines would rise and maximum prison terms would be doubled to one year for offenders who falsely claim to have earned a Distinguished Service Cross, Air Force Cross, Navy Cross, *Silver Star* or *Purple Heart*.

Group to Help Patients and Families

A group based at the Walter Reed Army Medical Center in Washington, D.C. has stepped forward to help families of wounded service members with expenses to stay in that area while their loved ones recover. Out of concern for the overwhelming number of family members of war-wounded service members showing up at the hospital's doorstep needing financial assistance, the Walter Reed command asked the Walter Reed Society to help. "So on March 19, 2004, we created the Iraqi Freedom and Enduring Freedom Family Support Fund," said retired Army Sgt. Maj. Daniel J. Bullis, the society's vice-president for patient relations and committee member of the support fund." Since this is such a high-cost area (Washington metropolitan area), we help families with living expenses, keeping up with bills back

home, child care, just a host of financial needs they have." The government pays one-time round-trip transportation costs for up to three family members of patients whom doctors verify as "seriously ill" or "very seriously ill," Bullis said. For family members of patients who are not in either of these categories, "there's a program for free frequent flyer air miles available through the Fisher House Foundation," he said.

Training the Iraqi Army

*By Sgt. Jennifer J. Eidson
22nd Mobile Public Affairs Detachment*

FORWARD OPERATING BASE O'RYAN, Balad, Iraq – Coalition Soldiers are working around the clock to make sure their Iraqi counterparts are ready and capable of protecting Iraq and its citizens.

Soldiers from 1st Battalion, 128th Infantry are helping the country's soldiers transition into overseeing the missions being conducted in their area of operations.

At the Iraqi army training facility here the soldiers are taught how to set up traffic control points, identify improvised explosive devices and vehicle-borne improvised explosive devices, conduct personnel searches, distinguish between insurgents and civilians and how to react to enemy contact.

Task Force 1-128 Soldiers from 1st Battalion, 128th Infantry Regiment, Wisconsin Army National Guard and Troop K, 3rd Squadron, 278th Armored Cavalry Regiment, Tennessee Army National Guard are conducting the training.

The Iraqi army soldiers are doing well with their training said Staff Sgt. John Macullouch, an instructor with Troop K.

"I don't feel that they will have any problems taking over the area," Macullouch said. "We have spent a lot of hours with these guys."

The Iraqi army is young, but with the proper training, they will grow into an army capable of defending their own country, he said.

"Their soldiers are kind of like a fledgling eagle and we are representative of a full grown eagle that represents freedom," he said. "We have to take them under our wing right now and teach them how to protect this country in the same manor that we would protect it."

Sergeant Chad Stellpflug, Company C, 1st Battalion, 128th Infantry, said the instructors try to develop a small group of trainees at a time in hopes that they will be more effective when joining a larger unit.

"If you have four squared-away squads, then you are going to have a squared-away platoon," Stellpflug said. "So we break down the training. We start small and work big. It takes a little bit [of work], but if you get them squared away, they are going to be tough."

Sergeant Shaun Dekok, a medical sergeant and instructor with 1st Battalion, 128th Infantry Regiment, said they push the soldiers in order to make sure they are prepared to face whatever obstacles that might come before them when the Task Force Liberty Soldiers return home.

“When the [Coalition Forces] leave Iraq, not all of the country’s problems will be solved and we want to make sure they are ready when the time comes,” Dekok said.

The first lieutenant in charge of the 4th Platoon, 4th Battalion, 1st Brigade, 4th Division, Iraqi army soldiers that are currently going through the training said he feels his men have become well-rounded soldiers and will be able to conduct the task at hand thanks to the Coalition Soldiers who are training them.

“As an Iraqi army officer, I hope that all the Iraqi army gets trained by the Coalition Forces,” he said. “They train us very well.”

He said the improvement in the Iraqi security force’s abilities can be seen through the reducing numbers of Iraqi service members who have been killed in action.

“[Because of] the training that we receive, we can say that we are prepared and can manage the whole thing after the (Coalition Forces) leave Iraq,” he said. “... We got trained well and we became more progressed and more developed. We have reduced our losses to the minimum level.”

Sgt. Matthew W. Kuhnert, an Iraqi army instructor with Company A, 1st Battalion, 128th Infantry Regiment and a native of Columbus, Wis., agrees with the lieutenant about the soldiers’ improvement since they began working together.

“We have come a long way with them as far as doctrine, training them how to react as a group, think as a group, work as a team ... all those things come down to discipline,” Kuhnert said. “We are just teaching these guys how to function as a team and look out for each other, so that on the battlefield, they function as a team.”

Stellpflug said the job they do with the Iraqi soldiers is a vital step in the countries ability to stand on its own.

“This training is important for Iraq as a whole,” Stellpflug said. “It shows a lot of character in the guys. When we first got here the IA soldiers were afraid to even put the uniform on. Now, they are coming together as a whole. More and more Iraqis are ready to take the challenge and [this training plays] a vital role in getting Iraq stable.”

Graham, Michael, "Handing Over The Mic: Troops Talk From Iraq."

National Review Online, July 21, 2005. Radio-talk host Michael Graham covers southern politics from his home in Virginia. He is an NRO contributor.

I just spent a week in Iraq and Kuwait cultivating a skill that I, as a talk-show host, have found nearly impossible to master: shutting up.

Turns out, it was easier than I thought, at least in Iraq. When you're listening to a 20-year-old kid from Indiana tell how he earned his second Purple Heart, speechlessness is the natural reaction.

I was there as part of the much-maligned "Truth Tour" organized by Move America Forward, a conservative group based in California. According to reports in the mainstream media, I was part of a "propaganda" junket paid for by the Pentagon to buy some desperately needed positive coverage of the unwinnable military quagmire. All I can say is: If this was a junket, it was the worst-run junket in the history of public relations.

My radio station and I had to pay all my expenses, I slept on a bare cot in a tent in the desert, and at some locations the only available "food" (and I use that term under protest) were MREs -- which stands for "Meals Ready to Eat" -- assuming you've already eaten both shoes and most of your undergarments.

This alleged "junket" failed in another way, too. The Pentagon didn't control what went out over the airwaves. Then again, neither did I. I left it all up to the soldiers.

I traveled about Iraq from Camp Victory at the Baghdad International Airport to Camp Prosperity on the very edge of the Red Zone, then down the Baghdad Highway to Camp Falcon, and on to the Command Headquarters in the heart of the city and, eventually, to the deserts of Kuwait and Camp Arifjan. And everywhere I went, I flipped on my mic, sat back, and let the troops tell their story.

These soldiers weren't stooges from Public Affairs or handpicked flag wavers foisted on me by media handlers. I found some in the mess hall, others working security checkpoints; others sought me out because they have family living in the D.C. area where my radio show is broadcast.

The least fortunate were the soldiers in Humvees stuck with "tourist duty," four friendly but serious young men who got stuck with a couple of bonehead radio hosts riding along on patrol.

In all, I spoke to more than 100 soldiers, sailors, airmen, and Marines, with different ranks and different duties at their FOBs (forward operating base), and yet they overwhelmingly had the same things to say about the war in Iraq:

- "We believe in the mission."
- "We're making progress."
- "The Iraqis are making progress, too."

And, perhaps most important of all:

- "We're going to win."

I expected to hear this sort of positive assessment from General George Casey, commander of operations in Iraq, when I interviewed him at his headquarters deep inside the International Zone. When he pointed out that, one year ago, there was just one standing battalion in the Iraqi army, but there are 107 battalions today, he was doing his job of supporting the war. And I expected it from Lt. General Steve Whitcomb, commanding general of the 3rd Army, as he talked about successfully moving more than one million gallons of fuel across Iraq every day, despite the best efforts of the insurgents.

Generals are supposed to be gung ho. It comes with the pay grade. But I heard the same, positive assessments from 23-year-old sergeants from New Iberia, La., and from PFCs from Wisconsin and Alabama. I heard it from Lieutenant Li, whose Humvee had been hit by IEDs so many times he'd lost count. I heard it from Airman Truong, who was born in Vietnam and had recently returned to his native country to marry. Two weeks after "I do," Airman Truong was headed back to Kuwait to do his duty for his adopted country.

Again and again, from "white-collar" soldiers working in the relative safety of Camp Victory at the Baghdad airport to the "real" soldiers patrolling Route Irish (a.k.a the "Highway of Death"), I heard that America and their Iraqi-army allies are winning the war against the insurgents. I was told again and again by the soldiers themselves that their (our) cause is just, the strategy is working, and the enemy they fight represents evil itself.

In other words, I heard things seldom heard on CBS or read in the pages of the New York Times. It was only a week, and I have my obvious Bush-supporting, troop-cheering biases, but how much closer can a reporter get to delivering unspun, bias-free objective reporting than live-mic broadcasting instantly back to the states? No edits or filters or editorial meetings. Just the young men in the hot desert telling what they've seen, what they've heard, and what they now believe based on those experiences.

Isn't it at least significant that not one in 100 thought invading Iraq was a mistake? Was it mere coincidence that a random selection of 100 soldiers all believe their mission is worthwhile? Should we detect the hand of the Vast Right-Wing Conspiracy in the fact that the vast majority of the troops find the media coverage of the war ignorant, harmful or both?

I'm proud to say that, for a week, the soldiers had their say. If I were the editor of a major daily newspaper or a national network, I would be concerned that what they said is so contrary to what I am printing or broadcasting.

But the mainstream media don't need to hear from the soldiers. They already know that the war was a terrible mistake, that the world would be safer if we'd left Saddam in power, and that there is no chance for victory in Iraq.

Me, I'm not so smart. I like to let the guys on the ground tell their story. I believe it is completely possible that they know something that -- and the New York Times editorial page -- do not.

VA Health Care Mandatory Funding Update 01:

Recent announcements that the Department of Veterans Affairs had underestimated its fiscal 2005 and 2006 health care budgets by billions of dollars came as no surprise to the four veterans' service organizations that co-author The Independent Budget. Senior leaders from the Veterans of Foreign Wars, AMVETS, Disabled American Veterans and Paralyzed Veterans of America are telling the administration and Congress that the VA's funding formula was flawed and The Independent Budget recommendations were far more realistic than the administration's. The budget shortfall is causing VA medical centers and clinics to take drastic measures from now to the end of the government's fiscal year on 30 SEP. The VFW has alleged that some facilities are shortening hours, not filling employee vacancies, or not accepting new patients. Others are prescribing less expensive medications, or have replaced expensive temporary staffs with less expensive, less skilled employees.

[Source: *Armed Forces News* 5 AUG 05]

Veteran's Taxable Pay:

When filing your federal income tax you can use the following guidelines to determine what income to report:

- All VA benefits are exempt from taxation and should not be reported to the IRS. This includes the VA Work Study Program. Moneys paid to participants in the Work Study Program are educational assistance benefits paid under the same Chapter under which the student is receiving educational assistance.
- VA does not issue W-2 or 1099 forms, with one exception: amounts of overpayments that are waived by VA are taxable income, and are reported as such to the IRS (1099 form issued).
- Secondary interest on VA benefits may be taxable. For example, if a VA beneficiary deposits his or her compensation check in an interest bearing account, the interest is not tax exempt.
- VA benefits are subject to collection for tax liens, i.e. in cases where the beneficiary owes the IRS.
- Military Retired Pay: Veterans in receipt of military retired pay who are awarded VA compensation benefits retroactively may claim an exclusion for their income in the amount of the VA compensation they would have received had they not been in receipt of military retired pay. Affected veterans should claim the exclusion by submitting the award

letter showing the amount and effective date of compensation they would have received but for the receipt of military retired pay. IRS instructions tell affected veterans to submit a "VA Form 20-8993."

VA Form 20-8993 is the award letter. If the veteran doesn't have it, VA can provide a letter in lieu of it.

[Source: *eFloridaVets News* dtd 25 FEB 05]

Coping With The Kiddie Tax

When you open investment or savings accounts for your young children, you'll have to cope with the "kiddie tax." In 2005 as in 2004, children younger than 14 can receive as much as \$800 in tax-free income from interest, dividends, or capital gains.

Above that level, the youngster's investment income will be taxed at the child's lower rate: 10 percent, or 5 percent on dividends and capital gains.

However, when investments and savings held by a child generate annual returns of more than \$1,600, the "kiddie tax" takes effect. Subsequently, the child's unearned income is taxed at the parents' rate.

If you have children under age 14, then, keep their taxable income under \$1,600 per year. That's not hard to do these days: \$50,000 earning 3 percent yields only \$1,500 in interest income.

More investment income-capital gains, for example-can be deferred until after the child turns age 14 and the kiddie tax no longer applies.

Individual Inherited IRAs

If you inherit an IRA, you'll be able to extend tax deferral over your life expectancy. However, if you share this inheritance you may have to break out your own account, by certain deadlines, in order to enjoy maximum tax deferral.

Dividing an inherited IRA into separate accounts for each beneficiary allows you to:

- Take distributions on the schedule you'd like.
- Name successor beneficiaries of your choice.
- Follow your own investment philosophy.

Moreover, if you set up separate accounts, each IRA beneficiary can use his or her own life expectancy, for the purpose of calculating minimum required distributions. Otherwise, the shortest life expectancy must be used.

Say you are 40 and your sister is 50 when you jointly inherit an IRA. You must take minimum distributions over her 33.3-year life expectancy. (You may take larger distributions, if you wish.)

However, if you separate that IRA into two IRAs, you'd be entitled to take smaller distributions over your longer life expectancy and thus enjoy more tax deferral. To get this favorable tax treatment, you must separate the IRA by December 31 of the year after the IRA owner's death.

Put The Brakes On Insurance Costs

Rates for auto insurance are jumping faster than they have in a decade, the Wall Street Journal reported at the end of 2002. How can you get the right kind of coverage without paying a fortune?

One suggestion: when you buy collision and comprehensive insurance, choose a high deductible. Instead of a \$100 deductible, choose a \$500 or even a \$1,000 deductible. That is, you'll agree to pay for the first \$500 or \$1,000 worth of damage repairs before the insurance kicks in.

Insurance salespeople may try to sell you on taking a low deductible, pointing out how much you've paid for the car and how important it is to have coverage every time you scratch the paint. However, your premiums will be much higher with a \$100 deductible, rather than a \$500 or \$1,000 deductible. With a higher deductible you'll save money and you'll still be covered if you have a serious accident.

In any case, use a well-rated insurance company. You want to be confident the company will be able to pay its claims. Weiss Ratings is one firm that provides reliable ratings of auto insurers.

Moreover, you can tell a lot about an insurance company from the behavior of its agents. At a good company, the agents want to know whom they're insuring. They won't write a policy until they've interviewed you and the other drivers in the household. Some agents will even come by after they've written a policy, if your youngsters commit a minor traffic violation, to impress upon them the potential seriousness of such infractions.

Settling Down

Selling your life insurance policy to a third-party is known as a "life settlement." You get cash and the buyer collects the death benefit, at your death.

Does it make sense to sell? Only if you have absolutely no need to keep your life insurance. If you have no desire to leave money to loved ones or charities, and your heirs won't need insurance proceeds to pay for post-death expenses such as estate taxes, selling an old policy might be a source of ready cash.

If you're in that category, shop around. The amounts companies are willing to pay vary considerably and you can actually get a bidding war going between firms that buy policies. Enter "life settlements" on an Internet search engine to find potential buyers. If you start a bidding war, you can maximize the amount you'll receive for selling your policy.

Ideally, you'll sell to someone who'll bundle several policies for sale to a group of investors. That way, no one will have a huge interest in your death--and know where to find you.

Last of WWII Comanche Code Talkers Dies

Associated Press | July 22, 2005

OKLAHOMA CITY - Charles Chibitty, the last survivor of the Comanche code talkers who used their native language to transmit messages for the Allies in Europe during World War II, has died. He was 83.

Chibitty, who had been residing at a Tulsa nursing home, died Wednesday, said Cathy Flynn, administrative assistant in the Comanche Nation tribal chairman's office.

The group of Comanche Indians from the Lawton area were selected for special duty in the U.S. Army to provide the Allies with a language that the Germans could not decipher. Like the larger group of Navajo Indians who performed a similar service in the Pacific theater, the Comanches were dubbed "code talkers."

"It's strange, but growing up as a child I was forbidden to speak my native language at school," Chibitty said in 2002. "Later my country asked me to. My language helped win the war and that makes me very proud. Very proud."

In a 1998 story for *The Oklahoman*, Chibitty recalled being at Normandy on D-Day, and said someone once asked him what he was afraid of most and if he feared dying.

"No. That was something we had already accepted," he said. "But we landed in deeper water than anticipated. A lot of boys drowned. That's what I was afraid of."

"I wonder what the hell Hitler thought when he heard those strange voices," he once told a gathering.

Chibitty was born Nov. 20, 1921, near Medicine Park and attended high school at Haskell Indian School in Lawrence, Kan. He enlisted in 1941.

In 1999, Chibitty received the Knowlton Award, which recognizes individuals for outstanding intelligence work, during a ceremony at the Pentagon's Hall of Heroes.

"We could never do it again," Chibitty told *Oklahoma Today*. "It's all electronic and video in war now."

NDA Delay Stalls Hot Issues

Some key issues derailed by the postponement of Senate consideration of the fiscal 2006 National Defense Authorization Act include an amendment to require mandatory funding for the Department of Veterans Affairs medical system, adjusted annually for inflation and patient load. Other amendments would reduce the Guard and Reserve retirement age (for retired pay purposes) from the current 60 years. Another amendment would give retirement credit to Guard members who were mobilized in state status as airport guards after the September 11 attacks. And another would authorize a full housing allowance for Reserve Component members activated for more than 30 days instead of the current 140 day requirement. Also postponed is an amendment that would encourage civilian employers to pay the difference between the military pay of their activated employees and the civilian pay they were receiving prior to mobilization.

Vet Groups Seek VA Independent Budget

Recent announcements that the Department of Veterans Affairs had underestimated its fiscal 2005 and 2006 health care budgets by billions of dollars came as no surprise to the four veterans' service organizations that co-author *The Independent Budget*. Senior leaders from the Veterans of Foreign Wars, AMVETS, Disabled American Veterans and Paralyzed Veterans of America are telling the administration and Congress that the VA's funding formula was flawed and *The Independent Budget* recommendations were far more realistic than the administration's. The budget shortfall is causing VA medical centers and clinics to take drastic measures from now to the end of the government's fiscal year on Sept. 30, states VFW commander John Furgess. Some facilities are shortening hours, not filling employee vacancies, or not accepting new patients. Others are prescribing less expensive medications, or have replaced expensive temporary staffs with less expensive, less skilled employees.

VA Parkinson's Disease Program:

In 2001, the Department of Veteran's Affairs (VA) created six Parkinson's Disease, Research, Education and Clinical Centers (PADRECCs) in an effort to improve care for veterans with Parkinson's disease (PD) and other movement disorders. The Centers are located in Portland/Seattle, San Francisco, West Los Angeles, Houston, Richmond, and Philadelphia. These specialty centers are composed of internationally known neurologists, neurosurgeons, nurses, researchers and educators who are experts in Parkinson's disease care. PD is a neurological disorder or disorder of the brain. Symptoms often include tremor that occurs during rest, limbs that are stiff, gait or balance problems, and slowness of movement. Although the exact cause of PD is unknown, it is

linked to a chemical in the brain called dopamine. Dopamine plays a crucial role in producing smooth, controlled movements of the body. Today PD affects as many as 1.5 million Americans. The PADRECCs have three missions:

- **Clinical Care and Treatment:** Provide comprehensive patient care by addressing every aspect of PD. Our Parkinson's disease treatment team provides a thorough assessment of symptoms, mental health issues, rehabilitative concerns, medication management and surgical options.
- **Education and Support:** Through educational program and materials, its mission is to raise PD awareness across the United States. Centers offer educational opportunities for patients, family members, healthcare providers, and the general public. Support groups and community outreach programs also play an important role in the educational mission.
- **Research and Discovery:** The key to discovering new ways to control or delay PD is by testing new therapies. They are dedicated to developing new treatments that control the symptoms of PD and find its cure.

A component of the PADRECC is the National VA Parkinson's Disease Consortium. The Consortium was established by the VHA's National Neurology Director in an effort to magnify the impact of the PADRECCS. This program is designed to complement the PADRECCs in their mission to reach and serve the approximately 60,000 veterans diagnosed with PD. The Consortium was developed to network nationally dispersed VA clinicians who possess expertise or interest in PD related fields. Members include movement disorders specialists, neurologists, geriatricians, primary care providers, and multidisciplinary clinicians. If you or a veteran that you know suffers from Parkinson's disease, you should contact your local PADRECC at:

Northwest PADRECC: Portland: (503) 721-1091 or Seattle: (206) 277-4560 San Francisco PADRECC: (415) 379-5530 Southwest (West Los Angeles) PADRECC: (310)478-3711x48001 Houston PADRECC: (713) 794-7841 Southeast PADRECC (Richmond): (804) 675-5931 or (800) 784-8381 x5931 Philadelphia PADRECC: (215) 823-5934 (888) 959-2323

[Source: *New Mexico e-Veterans News* 8 JUL 05]

Identity Theft Victim Action:

Identity theft is considered to be the fastest growing crime in America. According to the Federal Trade Commission, the number of identity theft incidents reached 9.9 million in 2003.

If you suspect that you have been a victim of this damaging crime, it is important to take action right away. A few weeks could be the difference between a simple credit card fraud and

an all out identity attack. If you receive a bill for something you or your family obviously did not charge take the following immediate actions:

- **Step 1 - 10 minutes:** Call the creditor to notify them of the fraud right away. The creditor should reverse the fraudulent charges and lock your account. You should have photocopies of your credit cards and credit contact numbers stored in a safe place just for this kind of emergency. Be sure to record the times, dates and names of the people you contact in a log for future reference. An excellent Creditor Contact Worksheet is available at <https://www.truecredit.com/help/learnCenter/fightingIDTheftWS.jsp?mn=50275popup=true> for use in keeping track of your contacts. A copy is also available as TAB 5 of the RAO Bulletin.
- **Step 2 - 10 minutes:** Your next step is to contact the credit reporting agencies to report the crime and request that a 90-day fraud alert is placed on your credit report. You only need to contact one of the three bureaus have fraud alerts placed on all three of your credit reports. Contact information for the credit bureaus is:
 - Experian: 1-888-EXPERIAN (397-3742); www.experian.com
 - TransUnion: 1-800-680-7289; www.transunion.com
 - Equifax: 1-800-525-6285; www.equifax.com

This 90-day alert will notify creditors that you may be a victim of fraud and advise them to verify your identity before opening any new accounts. This alert also entitles you to a free credit report from each bureau for your review. Fraud resolution experts with the credit reporting agencies can also help you check your credit data for other signs of identity theft and can help you restore your account security. Don't forget to record the results of your contacts in your identity theft log.

- **Step 3 - 10 minutes:** Your last ten minutes should be spent on the Federal Trade Commission's Web site <http://www.ftc.gov/bcp/conline/pubs/credit/affidavit.pdf> filling out an ID theft affidavit. A copy is also available as TAB 6 of the RAO Bulletin. Once you complete this affidavit worksheet, you can use it to report fraud to creditors and can keep it in your records for future reference. If your identity theft goes beyond credit card fraud, you should also contact your local law enforcement agency to file a police report. Add copies of your affidavit and police report to your identity theft log and store these documents in a safe place. How quickly you spot and report identity theft can make all the difference.

- After 30-60 days, check your credit reports and financial accounts again to see if there are any new signs of identity theft or records that still need to be removed. Print and complete a new version of your fraud worksheet and keep it in a safe place with your other fraud resolution records. Don't let a thief steal your credit again. Purchase a cross cutting shredder to destroy sensitive documents before throwing them away. Install a locking mailbox and keep a close eye on your account statements for signs of new fraud.

One of the best ways to guard against fraud is to sign up for a credit monitoring service. Most services include Identity Theft Insurance, so you know you're covered.

[Source: TrueCredit Newsletter AUG 05]

POSTAL MONEY ORDER SCAM:

Postal Money Orders (PMO) are often requested and used for payments by mail. They are generally accepted as safe because of their security features that help distinguish between real and counterfeit notes. However, foreign scammers are now counterfeiting US Postal Money Orders. According to U.S. Postal Inspector Larry Dziomba, hundreds of thousands of dollars worth of bogus US Postal Money Orders have been sent from overseas in recent months. A typical scam is for someone overseas to contact you and request you cash their U.S. money order for them since they cannot do it overseas. In exchange you can keep a portion of the funds and return the balance to them by mail. If you receive a money order you can determine if it is an official one by holding it up to the light to view the Ben Franklin images (watermarks) repeated on the left side (top to bottom) and a dark security thread running (top to bottom) to the right of the Franklin watermark, with the tiny letters "USPS" facing backward and forward. If either of these security features is not present you are holding a fraudulent Postal Money Order. Also be aware that:

- Denominations are indicated on two locations.
- Discoloration of the denomination amounts indicates erasure (fraudulent).
- Maximum value for domestic postal money orders is \$1,000
- Maximum value for international postal money orders is \$700. If you have questions about accepting Postal Money Orders, call your nearest U.S. Postal Inspection Service Office or Post Office. If you think you have received a counterfeit PMO call the fraud hotline at 1(800) 372-8347 (M-F) or visit www.usps.com/postalinspectors for additional information.

[Source: www.scambusters.org & www.usps.com AUG 05]

Responsibility of Taxes After Selling:

Thinking about selling your home? Need to keep in mind that legally you as the owner/seller are responsible for the taxes on the home/real-estate and the sewer bill, (if applicable), if you sell after April 1st to July of that year. That means that you will be responsible for all the bills coming in for taxes and sewer for the 12 month period within that tax period.

****TRIVIA QUESTIONS****

This popular TV game show host and Vietnam Vet, while serving a tour in Vietnam with the Armed Forces Radio made his morning show by yelling out "Good Morning, Vietnam!"

(Answer on page 32)

****FEEDBACK****

This is your newsletter, and if you would like to have something noted contact one of your Retiree Counselors.

I want to thank all of you who gave me feedback. Amazingly, none were negative, all being positive.

****Retiree E-Mail Addresses****



Listed below are e-mail addresses of some of our retirees. This is a way of keeping in touch, providing upcoming events and news of interest between regular issues of the newsletters. If you would like to have your e-mail address included in this list, contact one of your Retiree Counselors.

If you change your e-mail address you will need to provide me with the change. An incorrect e-mail address can affect my distribution group for sending out e-mails. One bad address can affect the entire group. This is also a way of keeping you informed of deaths, legislative issues, family support, etc.

Adams, Earl, MG – adams_earl@msn.com
 Armstrong, Read, CW4 – armstrong1@ghi.net
 Amoroso, Francis (Frank) J, COL – colonelandbetty@nlis.net
 Ash, George, SGT - gla1956@yahoo.com
 Atkins Ernest D. Jr, SGM. - MILRETSGM@aol.com
 Azzarello, Leonard S., SSG - the_chip3@maine.rr.com
 Barron, Mike, SSG - ma1fcs@hotmail.com
 Barry, Bruce M., LTC – barrybm@msn.com
 Beale, Donald, SFC – gnfshng437@aol.com
 Benedetto, Joe, 1SG - xexman44@netlink.net
 Bennett, Eldon A., SFC - elben@pioneercable.net
 Benson, Donald, 1SG – dabenson@verizon.net

Bilodeau, Arlene V., SSG – meandblu@midmaine.com
 Birmingham, Kerry, SGM - khh@megalink.net
 Bishop, Wayne, MSG - carwaybis@aol.com
 Blaine, Bill, blainewh@rcas.ngb.army.mil
 Blair, David, COL - dhblair@watervillesd.com
 Boudreau, Herman J., CSM - trooperhjboudreau@yahoo.com
 Braley, Gary, CW4 – gabraley@midmaine.com
 Brown, Vic, 1SG – frostyJAB@msn.com
 Burnett, Mark, MSG – mapo57@aol.com
 Burpee, Larry - sluf@xpressamerica.net
 Burr, Ken, CW3 - kensal@awi.net
 Cannon, John M. 1SG – shermanmaine@yahoo.com
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Correct Mailing Address



It is imperative that we have your correct mailing address in order for you to receive your newsletter.

Please provide your correct mailing address by contacting a member of the Retiree Council or mailing it to:

Dept. of Def., Vet. & Emerg. Mgmt.
33 State House Station
Augusta, Maine 04333-0033

This will help keep the cost of mailing down and ensuring a retiree is getting his or her newsletter. The newsletters are mailed out by bulk mailing and not first class, which means if an incorrect mailing address is on the newsletter, it will not be returned as in most cases with first class mailing. We really have no way of knowing if the mailing address is correct.



The intent of the Retiree Council and the Retiree Newsletter is to keep the retirees informed and maintain comradery. We are now up to 1,454 members strong.

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****ANSWERS TO TRIVIA****

Pat Sajak of the ever popular game show "Wheel of Fortune" was born in Chicago, Illinois on October 26, 1946. He spent all of his young life in that city, attending both Goethe and Gary Elementary Schools, Farragut High School and Columbia College. He was the oldest of three brothers, and he remains so today, except even older.



His first chance to broadcast came in 1965 when his name was drawn on WLS Radio's "Dick Biondi Show" to be a "Guest Teen DeeJay." Biondi was ill the night Pat was to appear, so he went on with Dick's replacement, Art Roberts, for a full hour that Saturday night, reading commercials, announcing records and trying to sound professional. He was hooked.

While attending Columbia College in Chicago, (and working nights as a desk clerk at the Palmer House Hotel) one of Pat's broadcasting instructors, a local announcer named Al Parker (who passed away recently after an incredible 50-plus years at Columbia) told him that they might be looking for an newsman at a little local radio station called WEDC. Pat went in, read a few things for the Program Director, and was hired to work from midnight until 6 a.m. doing an hourly five-minute "rip and read" newscast (you ripped it off the newswires and read it as was).

In 1968, Pat left Columbia after only three years, joined the U.S. Army, and was promptly sent to Vietnam. After a few months as a finance clerk, he was transferred into Armed Forces Radio and given the morning show on AFVN in Saigon where he yelled, "Good Morning, Vietnam!" for a year and a half. He finished his military career at the Pentagon in 1970. After his discharge in late 1970, Pat stayed in Washington trying to find radio or TV work. With no success on the broadcasting front, he again found himself working as a desk clerk, this time at the Madison Hotel in downtown D.C. Finally, a



friend told him that he knew someone who owned a radio station in Murray, Kentucky, and maybe he would hire Pat. So, in 1971, he became the nighttime disc jockey at a 250-watt station in Southeastern Kentucky. It took about a year for this 25-year-old to look around and come to the conclusion that his career was not exactly "taking off". So he packed up his belongings and headed to the nearest big city, which happened to be Nashville, Tennessee.

Despite interviewing at virtually every radio and television station in town, Pat found himself (again!) as a desk clerk at a local motel. He continued to visit the local broadcasting outlets and was finally hired by the local NBC television affiliate, WSM.

He spent five years at Channel 4 as everything from an anonymous staff announcer to a talk-show host, to a disc jockey at their sister radio station, but it was as a weatherman that Pat was getting the most on-air exposure.

In Los Angeles, KNBC-TV was looking for a weatherman in 1977, and they spotted Pat in Nashville and hired him to be their full-time weatherman. He worked both the early and late newscasts, as well as a local weekend talk show called "The Sunday Show". One of those who sat home and watched was Merv Griffin. He called in 1981 and asked whether Pat would be interested in taking over for Chuck Woolery, who was leaving "Wheel of Fortune" a daytime game show on NBC, after seven years as host.

While Pat had done a few other game show pilots, most notably for Ralph Edwards and Mark Goodson, he never felt completely comfortable in the role. Assuming that "Wheel" probably had a year or two left in it, he agreed to step in. His assessment of its longevity proved to be off by a couple of decades. The nighttime version of the show went on the air in September 1983, and it has been the Number One program in syndicated television ever since.



In 1989, Pat began doing a late-night talk show on CBS. While it ran less than a year and a half, he calls it the most enjoyable 18 months of his career. It was during the run of that show that he met Lesly Brown, who became his wife on New Year's Eve of 1989. They have two children.

Pat has three Emmys, a Peoples' Choice Award and a star on the Hollywood Walk of Fame.

