



Patrick AFB Newsletter for MILITARY RETIREES



Volume XXXII, No.1

45 SWRP 36-2

January 2013

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*" A veteran is someone who, at one point in his life wrote a blank check made payable to 'The United States of America ' for an amount of 'up to and including my life.' **That is Honor**, and there are way too many people in this country who no longer understand it."*

Retiree Appreciation Day:

For those people who called and asked, mark your calendars: Patrick AFB **Retiree Appreciation Day**, is this year, Saturday, **13 April 2013**.

Format will be the same as previous years: Base Theater, 0900 – 1015, with speakers covering subjects of interest.

Tables setup to open at 1015 hrs and manned in **bdg 530, DEOMI** by Base offices and local agencies, handing out information and answering questions.

Bldg 537: Personnel, will be manned to issue or **renew ID cards**. Security Forces will direct and control Base traffic and parking. **Base Commissary and Exchange** always have specials for that day.

Buses will be making round robin trips from the theater, DEOMI; Bldg 537 for ID cards

Looking for and getting information, meeting and renewing old friendships, then this is the place to be **13 April 2013**.

No reservations needed – any questions call our office 321-494-5463.

Get a Head Start on Retirement:

If you or people you know plan to retire early in 2013, now is the time to apply for Social Security benefits. People can apply as early as four months before they want benefits to start. The most convenient way to apply is online at social security apply on-line

<<http://naus.informz.net/z/cjUucD9taT0yNzYwNDY3JnA9MSZ1PTEwMDEyMjY2ODUmbGk9MTQwNjU5OTY/index.html>> .

Applying online for Social Security benefits means there is no need to visit a Social Security office or wait for a scheduled appointment with a Social Security representative. Retiring online can take as little as 15 minutes.

There are no forms to sign and, in most cases, no documents to submit. Tell your friends to go online to apply for benefits at social security apply on-line

<<http://naus.informz.net/z/cjUucD9taT0yNzYwNDY3JnA9MSZ1PTEwMDEyMjY2ODUmbGk9MTQwNjU5OTY/index.html>> .

"Those who expect to reap the blessings of freedom must undergo the fatigue of supporting it."

(Thomas Paine, 1777)

DFAS Review Issues:

Are You Ready? The year is now officially more than halfway over and everyone's favorite season is on its way. That's right, tax season! As you begin planning for this hectic time, DFAS would like to help you

start getting ready as well. Following are issues to review to see if action is required on your part. If so, click on the website provided for instructions on how to proceed:

- **Paper Checks to End.** The Department of the Treasury has announced that all payments from the federal government must be made electronically and not by paper check beginning March 1, 2013. If you're still getting a paper check, sign up for direct deposit today. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/treasurymandateeft.html>.
- **Getting Your 1099R by Snail Mail?** If you choose to receive your 1099R from DFAS in the mail, it's important to make sure the mailing address you have on file with us is current. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/snailmail1099.html>.
- **Want to Convert to Electronic 1099R?** You can have your tax statement weeks earlier on myPay than it takes to arrive in the mail. Find out how to switch to electronic 1099R. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/wanttoconvert.html>.
- **Getting Your 1099R by Email?** If you get your 1099R electronically, and your email address has changed, you need to update it in myPay. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/email1099.html>.
- **Delta Dental Premium Change.** If you've enrolled in the TRICARE Retiree Dental Program, you may notice a change in your Oct. 1 payment. This change is due to the regularly scheduled annual adjustment in your monthly premiums. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/news/deltadentalchange.html>.
- **New Fast Forms Have Arrived.** Automated versions of the DFAS 2558 Authorization to Start or Stop an Allotment and the DFAS 2866 Retiree Change of Address/State Tax Withholding Request are now available. Refer to <http://www.dfas.mil/retiredmilitary/newsevents/newsletter/newfastforms.html>.
[Source: DFAS Newsletter 17 Sep 2012 ++]

Navy Lodge Gulfport MS:

If you have plans to visit the Gulf Coast remember that the Navy Lodge in Gulfport, Miss., opened its new 43,930 sq. ft., 50-room expansion on 14 AUG This brings to 80 the total number of rooms available to guests. Navy Lodge Gulfport held the ground breaking ceremony for the new lodge on 6 APR 2011. "Guests will find all the latest amenities and comforts that are offered in civilian hotels, but at a significant savings. Navy Lodges offer a 40 percent savings compared to other hotels and there are no extra person charges." There are 12 business class rooms that feature one queen bed, microwave and refrigerator. Finally, guests can stay in one of the 28 extended stay rooms which have two queen beds and a full kitchenette with dishwasher. The Navy Lodge also offers guests a fitness room, vending areas, guest laundry, a patio area with gas grills and free WiFi. Guests can also take advantage of the free continental breakfast offered each morning. To make reservations at any Navy lodging facilities or to receive a Navy Lodge directory, call 1-800-NAVY-INN, 24 hours a day, seven days a week or go online at <http://www.navy-lodge.com>. Reservations are accepted on an as-received basis without regard to rank. Like other facilities on military installations, these are open to eligible customers of all branches — active-duty, National Guard and reserves, and retirees.
[Source: Militarylife.com Newsletter 24 Aug 2012 ++]

Military Titles:

The Department of Defense (DoD) permits Retirees to use their military titles and status under certain circumstances. Such use is regulated, however, to ensure that the conduct of retired personnel neither discredits the service nor implies that the DoD is endorsing any nonofficial commercial activities. When military titles are used by members to sign their names to documents that pertain to them personally, they must show that they are in a retired status after the grade as follows:

- 1) "USA Retired" will be used by all Regular Army (RA) personnel retired for service, age, or physical disability, including RA personnel on the Temporary Disability Retired List (TDRL).

2) "AUS Retired" will be used by all personnel on the Army of the United States (AUS) Retired list, including non-regular Army personnel on the TDRL.

General Restrictions - DoD regulations permit Retirees to use their military titles socially and in connection with commercial activities as long as they don't involve any ethically-questionable associations. They are not allowed to use their military title in connection with any activity, commercial or otherwise, when such use implies the DoD sponsors or otherwise approves of that activity. Retirees may not use their military titles during public appearances in other countries, unless authorized by the theater commander, to prevent other nations from inferring that the U.S. military supports foreign groups or causes not officially sanctioned by the DoD and the U.S. State Department.

Job-related Restrictions - Retirees who accept jobs as federal civil servants after retirement have some further restrictions placed on them, both legal and practical. For example, retired military civil servants may not use their military rank as part of a signature block on official correspondence, as their former military standing isn't relevant to federal civilian policy. When working as a civilian as part of a military command, a Retiree may not answer telephones using his or her retired rank, as doing so would cause confusion in the mind of the caller as to who was taking the call. Common sense also dictates that Retirees working at military commands don't ask to be called by their retired rank when that rank is senior to other officers in their military/ civilian chain of command, especially if that includes the commanding officer.

Social Restrictions - If Retirees have business cards that include their rank, they must reflect the fact that the individual is retired, as must any social calling cards they have, by including the phrase "(Ret.)" after their rank. The same restriction pertains to Retirees who use their military title or rank to sign personal documents. Finally, Retirees are entitled to wear their uniforms only at: military funerals, memorial services, weddings, inaugurations, military balls, military parades, other patriotic parades or ceremonies in which any active or reserve United States military unit is taking part, meetings and conferences, or functions of associations formed for military purposes. Retirees may wear medals on civilian clothing for patriotic, ceremonial, and social functions of a military nature. For more information, refer to Chapter 30 of Army Regulation 670-1, Wear and Appearance of Army Uniforms and Insignia, at http://armypubs.army.mil/epubs/pdf/r670_1.pdf. [Source: Army Echoes Sep-Dec 2012 ++]

SURVIVOR BENEFIT PLAN (SBP) AND DIVORCE:

If a retired member with SBP divorces, his/her spouse ceases to be a covered beneficiary as of the date the divorce is final. The coverage and payment of premiums is suspended upon notification to DFAS. However, there are several possibilities the retiree and former spouse need to be aware of to avoid serious problems. (1) Coverage of a Former Spouse (FS) is not mandated in law but may be directed as part of the divorce settlement. The court order must refer to the SBP specifically and not just be a general statement such as "that the FS shall be eligible to receive the member's retirement benefits". In addition to the requirement that the decree clearly identify the SBP specifically, **a signed election request must be submitted by the service member to DFAS before the first anniversary date of the divorce.** If the member fails or refuses to submit the decree and election request, the FS may do a "deemed election" by submitting a written request to DFAS **before the first anniversary date. This rule is strictly adhered to. If the deadlines are not made it will be almost impossible to provides coverage to a FS regardless of the court order.** Several Former Spouses found they were not covered because of failure to meet the deadline and even a letter to one's Congressman cannot negate this provision of the law. (2) If coverage is not ordered by the court, a voluntary FS election may be made with the member requesting a change of status from spouse to Former Spouse within the one year time limit.(3) If neither a court order or voluntary election is made the SBP is suspended but is automatically resumed on the first anniversary date of **a remarriage** unless the member indicates in writing that he/she does not wish to resume coverage. (4) If the FS who is the beneficiary remarries before the age of 55, coverage is suspended but may be resumed if the subsequent marriage is terminated by death or divorce. (5) as long as a FS beneficiary is alive, the member may not name a current spouse as beneficiary unless in **a voluntary election**, the FS waives the benefit in writing. This article covers only the highlights. It is strongly recommended that any retiree contemplating or involved in a divorce obtain more information at www.retirees.af.mil. (Hanscom AFB letter)

Sequestration:

Veterans' health care funding may be exempt from automatic, across-the-board budget cuts that are due to begin in January, but military health care is not — and a new think-tank report says Congress would have to reprogram \$3 billion from other Defense Department budget accounts to fully pay for military health care should the cuts occur. DoD personnel programs are exempt from the 10 percent cuts under sequestration, including basic pay, allowances for housing and subsistence, retirement pay, and bonuses. And the Budget Control Act of 2011, which set up the mechanism for cutting federal programs if a deficit spending agreement isn't reached, also exempted veterans' benefits. In April, the White House announced veterans medical care expenses also are exempt. But health care for military personnel and families, including Tricare, fall under DoD's operations and maintenance programs and consequently could suffer as a result of the cuts, known as sequestration.

Tricare Preventive Health Program Update: Preventive care can help you maintain good health through early detection and treatment of disease.

TRICARE covers many preventive medical services including preventive health screenings. As a TRICARE Standard beneficiary, you can receive the following preventive medical services for no out-of-pocket costs:

- **Prostate cancer screening:** TRICARE covers annual prostate exams and prostate-specific antigen (PSA) tests for men age 50 and older. TRICARE also covers these screenings for certain men as young as age 40 who have family histories of prostate cancer.
- **Breast cancer screening:** Annual mammograms for women are covered beginning at age 40. Women younger than age 40 who are at high risk for breast cancer should talk to their health care providers about when and how often they should have mammograms and physical exams, which may also be covered by TRICARE.
- **Cervical cancer screening:** TRICARE covers a Pap smear annually for women starting at age 18 (younger if sexually active) or less often at patient and provider discretion (though not less than every three years). Human papillomavirus (HPV) DNA testing is covered as a cervical cancer screening only when performed in conjunction with a Pap smear, and only for women age 30 and older.
- **Colorectal cancer screening:** TRICARE covers colorectal cancer screening beginning at age 50 for beneficiaries at average risk. Frequency varies according to screening type (i.e., fecal occult blood testing, proctosigmoidoscopy or flexible sigmoidoscopy, colonoscopy). If you have an increased risk for colon cancer due to family medical history or other risk factors, talk to your doctor about starting screenings at an earlier age.
- **Well-child care:** The TRICARE well-child benefit covers children from birth until reaching age 6. The benefit includes comprehensive health promotion and disease-prevention exams, immunizations and developmental and behavioral assessments. Your child can receive preventive-care well-child visits as frequently as the American Academy of Pediatrics® recommends, but no more than nine visits in two years.
- **Immunizations:** TRICARE covers age-appropriate vaccinations, including annual flu shots, as recommended by the Centers for Disease Control and Prevention.

***Note: If you are at risk for specific diseases, talk to your doctor about your individual and family medical history to determine when you should begin preventive screenings. For additional information Visit <http://www.tricare.mil/preventivecare>. [Source: TRICARE Standard Health Matters 2012 E-Publication Aug 2012 ++]

Retiree Newsletters:

The latest edition of the military service's retiree newsletters can be accessed at:

- The Navy Shift Colors <http://www.public.navy.mil/bupers-npc/reference/Publications/ShiftColors/Pages/default.aspx>
- The Marine Corps Semper Fidelis https://www.manpower.usmc.mil/portal/page/portal/M_RA_HOME/MM/SR/RET_ACT/Semper_Fideli
- The Coast Guard/NOAA Evening Colors <http://www.uscg.mil/ppc/retnews>.
- The Air Force Afterburner <http://www.retirees.af.mil/afterburner>.

□ The Army retiree newsletter Army Echoes <http://www.armyg1.army.mil/rso/echoes.asp>.
[Source: NAUS Weekly Update 17 Aug 2012 ++]

Medal of Honor:

There are 81 living recipients of the famed Medal of Honor, the military's highest decoration for valor in combat "above and beyond the call of duty." More than 50 of them will be in Honolulu Oct. 1-6 at the Hale Koa Hotel for the annual Medal of Honor Convention. Close brushes with death in warfare somehow didn't claim them, but old age, disease and other factors are now taking a toll on their ranks. At the time of last year's convention in Louisville, Ky., there were 85 living recipients. There were 91 in 2010, 96 in 2009, and 100 in 2008. Retired Marine Corps Sgt. Maj. Allan J. Kellogg Jr., a Kailua resident who smothered a grenade in a Vietnam rice paddy and survived the blast, remembers there were 157 living Medal of Honor awardees in 1982, when the last such convention was held in Hawaii. "I don't know if you can really say there's a rhyme or reason (for the dwindling numbers) except for, they are veterans who are aging," said Victoria Kueck, director of operations for the Congressional Medal of Honor Society, which was chartered by President Dwight D. Eisenhower in 1958.

Space "A" Travel

Space-available flights are likely to decrease as a result of budget constraints and a falling load of worldwide air missions, Defense Department officials said in a recent report studying the feasibility of expanding the free-flight program. Defense officials told the General Accountability Office that efficiency efforts and force structure changes would mean fewer seats for service members and other authorized Space-A fliers, who are able to board flights when seats are available on military aircraft flying scheduled missions. "DOD officials also stated that 90-95 percent of space-available travel is on commercially contracted aircraft, and DOD is planning to reduce its use of contracted aircraft as a result of mission reductions and budgetary constraints," James R. McTigue Jr., the GAO's acting director of defense capabilities and management, wrote in a Sept. 10 letter to the chairmen of the House and Senate armed service committees. The GAO study concluded that opening international Space-A travel to "gray-area retirees" would adversely affect uniformed service members, for whom Space-A was first established. Gray-area retirees include reservists entitled to retirement pay. The study also examined extending benefits to the dependents of gray-area retirees, as well as widows and families of deceased service members. Congress has recently considered expanding Space-A to those groups, which prompted the GAO study.

Stolen Valor:

Veterans advocates are optimistic that Congress will have enough time left this year to pass several meaningful initiatives for their members, starting this week with a law to replace the Stolen Valor Act. The original act, which mandated jail time for those who falsely claimed or wore military medals, was struck down in June by the Supreme Court, whose members argued it unfairly limited free speech. The justices wrote that a more narrowly written bill might meet constitutional standards, and lawmakers from both parties promised

- to revisit the issue to protect the honor of military heroes. On 11 SEP, the House was expected to approve a new version of the law (H.R.1775), this one written by Rep. Joe Heck (R-NV). His bill would make it illegal to falsely claim military medals "with the intent to obtain money, property or anything of value." The Senate isn't expected to vote on the bill until this fall, but the legislation is expected to be one of the few successes for a divided Congress that has agreed on little and put into law only a handful of measures.

VA Fee-Basis Care:

Fee-basis care may be authorized to treat service-connected disabilities when VA has determined that available VA facilities do not have the necessary services required for treatment; the veteran is not able to access VA health care facilities based on geographic constraints or due to medical emergencies; or when it is economically advantageous to provide treatment using fee basis. These determinations are left to local management because they

are in the position to best apply these considerations. All fee requests are reviewed individually to determine the entitlement of veterans in accordance with established Veterans Health Administration guidelines and to determine clinical urgency. You may be eligible for a fee basis ID card if:

- You have a service connected disability;
- You will need medical services for an extended period of time; or
- There are no VA health care facilities in your area.

VA Claims Backlog:

The Department of Veterans Affairs announced 20 SEP that the Veterans Benefits Administration (VBA), which oversees the delivery of disability compensation and other benefits to the nation's Veterans, processed over one million disability claims during fiscal year 2012, marking the third year in row VBA claims processors have exceeded the one million mark. "We have made great strides, but we realize much work remains to be done to better serve Veterans," said Undersecretary for Benefits Allison A. Hickey. "Too many Veterans still wait too long. That's unacceptable, and that is why VA has begun implementing a paperless, digital disability claims system- a lasting solution that will transform how we operate and eliminate the claims backlog." In August, VA had its most productive claims processing period in its history, completing a record 107,462 claims and surpassing the previous monthly record of 103,296 set in 2010. This high level of production is accompanied by an increase in the overall accuracy of rating decisions, which has risen from 83 to 86 percent since September 2011, as determined by VA's national quality assurance program.

Claims production is at historic highs, incoming disability claims have increased nearly 50 percent since 2008, outpacing VA's current claims processing capacity. On 17 SEP the department reported it had 895,248 compensation and pension entitlement claims pending, with 592,792, or 66 percent, pending for more than 125 days. This year, VBA is beginning a nationwide organizational transformation to increase its claims decision output by retooling procedures and deploying paperless data systems that will speed claims processing and improve quality. All 56 VBA regional offices will be operating under the new organizational model by the end of 2013. [Source: VA News Release 20 Sep 2012 ++]

VA Women Vet Programs:

• A study of women who served in Iraq and Afghanistan found significantly higher rates of reproductive and physical health problems in those veterans who also had a mental health diagnosis. Researchers at the San Francisco Veterans Affairs Medical Center and UCSF analyzed national Veterans Affairs data from more than 71,000 female Iraq and Afghanistan war veterans who were new users of the Veterans Affairs health system from October 2001 through December 2010. Of the more than 31,000 patients with at least one mental health diagnosis, the researchers found higher prevalence of nearly all categories of reproductive and physical disease diagnoses. Researchers have shown increasing interest in studying the how military service affects the minds and bodies of women since women are the fastest growing demographic within the veteran population. The study was published in the September/October issue of the journal Women's Health Issues. [Source: San Francisco chronicle | Victoria Colliver | 19 Sep 2012 ++]

Navy Lodge Gulfport MS: Navy Lodge opened its new 43,930 sq. ft., 50-room expansion on 14 AUG. This brings to 80 the total number of rooms available to guests. Navy Lodge Gulfport held the ground breaking ceremony for the new lodge on 6 APR 2011. Guests will find all the latest amenities and comforts that are offered in civilian hotels, but at a significant savings. Navy Lodges offer a 40 percent savings compared to other hotels and there are no extra person charges." The new Navy Lodge features three different types of rooms to fit the needs of all its guests. full kitchenettes with dishwashers and a balcony off of living area; 12 business class rooms that feature one queen bed, microwave and refrigerator. Finally, there are 28 extended stay rooms which have two queen beds and a full kitchenette with dishwasher. The Navy Lodge also offers guests a fitness room, vending areas, guest laundry, a patio area with gas grills and free WiFi. Guests can also take advantage of the free continental breakfast offered each morning. To make reservations at any Navy lodging facilities or to receive a Navy Lodge directory, call 1-800-NAVY-INN, 24

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Tricare Access to Care:

Have you had trouble finding a health care provider that accepts TRICARE within the past year? If so, you are encouraged to take 3-4 minutes to fill out a brief TRICARE access survey. DoD has asked The Military Coalition (TMC) to help identify areas of the country that may be having access issues so they can better target their formal surveys to identify and address problem areas. If TRICARE beneficiaries in your area have been having problems, here's your chance to try to do something about it. The survey can be accessed at <https://www.surveymonkey.com/s/JS9ZZTV>. [Source: MOAA Leg Up 12 Oct 2012 ++]

VRAP Update:

Veterans Retraining Assistance Program applicants are advised of a potential scam targeting veterans who have either signed up or have been approved for VRAP! A veteran has reported receiving a call from

someone named “James” who congratulated him on his VRAP approval. He advised him that he knew the exact amount he was approved for and that the \$8500 would be directly deposited into his account within 45 minutes of him giving his banking account number and routing number and paying \$205 for the service fee. This person is not affiliated with the Department of Veterans Affairs (VA). VA will never charge you to access your benefits or ask you to provide private information over the phone. If you do receive a call like this, contact the Federal Trade Commission at <http://www.ftc.gov/bcp/edu/microsites/phonefraud/index.shtml>. [Source: Military.com | Terry Howell | 9 Oct 2012 ++]

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Aid and Attendance (A&A)

Is an increased monthly pension amount paid to a Veteran or surviving spouse. You may be eligible for the increased A&A amount if:

- * You are eligible for basic pension benefits AND
- * You require the aid of another person in order to perform activities of daily living, such as bathing, feeding, dressing, toileting, adjusting prosthetic devices, or protecting yourself from the hazards of your daily environment, OR
- * You are bedridden, in that your disability or disabilities require that you remain in bed apart from any prescribed course of convalescence or treatment, OR
- * You are a patient in a nursing home due to mental or physical incapacity, OR
- * You have corrected visual acuity of 5/200 or less, in both eyes, or concentric contraction of the visual field to 5 degrees or less.

For more information contact a Veterans Service Officer or your nearest VA Regional Office: Call 1-800-827-1000.

Tricare for Life

When traveling outside of the United States and U.S. Territories.

A think in your medical benefits Armor? If you are traveling internationally, maybe! If Tricare for Life members are traveling outside of the U.S. **or even on a cruise**, they should be aware and consider that Medicare coverage and Tricare for Life does not provide coverage.

The Tricare for Life coverage will become Tricare Standard. Tricare Standard has a deductible and then only it will cover a portion of the bill. The members should read the Tricare for Life handbook or online edition for additional information about traveling to other countries and cruises concerning medical emergencies or coverage.

You may look into purchasing a supplemental Policy, **this is a very good idea**, for the trip but read the fine print carefully before you buy to be certain the supplement will meet all your needs outside the U.S. **Some of the insurance providers have riders on their policies that also cover potential custom travel coverage that might be needed to return to the U.S.**

Tricare Prime Update :

This October retirees have seen their TRICARE Prime enrollment fees increased to \$269.28 per year for

individuals and \$538.56 per year for retirees with families. However, retirees should know that TRICARE is warning that these enrollment fees could increase again when Congress passes the final FY 2013 budget. Retirees can choose to pay the enrollment fees annually, quarterly or monthly. But they must keep in mind that TRICARE Prime enrollment fees are non-refundable, in most cases. TRICARE is recommending that retirees pay either monthly (through automatic deduction/charge) or quarterly due to the chance enrollment fees may increase again before the end of the fiscal year. NOTE: To date there have been no changes to TRICARE for Life – enrollment remains free to retirees over age 65. The current fee payments for TRICARE Prime are:

Annual payment per individual: \$269.28- Family: \$538.56

Quarterly payment per individual; \$67.32- Family: \$134.64

Monthly Payment per individual: \$22.44- Family: \$44.88

An exception to the fee increase applies to survivors of active duty deceased sponsors and medically retired uniformed service members and their dependents. Their fees remain frozen at the rate in effect at the time they are classified in the Defense Enrollment Eligibility Reporting System (DEERS) as survivors or medically retired and enrolled. Fees remain frozen as long as there is no break in their TRICARE Prime enrollment. Payment requirements differ slightly for each region. Retirees enrolled in the TRICARE Prime in the North, South and West regions can pay by allotment from retired pay, online, pay-by-phone, and through electronic funds 30 transfer and first time TRICARE Prime enrollees can pay the initial enrollment fee by check. TRICARE North and West beneficiaries can also pay by recurring credit card charges. TriWest currently offers beneficiaries the added ability to pay by check monthly. Refer to http://tricare.mil/mybenefit/Download/Forms/PrimeFee_FS.pdf TRICARE Prime Fact Sheet for additional info. [Source: Military.com

HEALTH CARE NEWS

Many May Soon Lose TRICARE Prime:

Defense officials are expected to announce shortly that military retirees and their dependents that live more than 40 miles from a military treatment facility or BRAC (base closure) site will lose access to TRICARE Prime as early as next April. This move could force as many as 171,000 retirees to shift to TRICARE Standard, which would mean an increase in out-of-pocket costs, especially those with special needs dependents or other chronic health issues.

The first round of Prime service changes is "tentatively" planned to go into effect in the West region on April 1, 2013. The North and South regions will see the plan implemented by Oct. 1, 2013.

Urgent or Emergency:

You've seen them located around town: Urgent Care Clinic. Good idea to keep in mind when family member experiences problems. You could use Clinic, may be the best choice, rather than tying up the ER, when its not an emergency.

It can be difficult to know whether an illness or injury is really an emergency, but the judgment is yours to make. If the condition is obviously life threatening, or causing severe pain and distress, then the need for an emergency room is clear. TRICARE views an emergency as a medical, maternity or psychiatric condition you believe could threaten your life, limb or sight without immediate medical attention. Other emergencies include severe, painful symptoms requiring immediate attention, or when a person may be an immediate risk to themselves or others.

If you or a family member experience any of the following symptoms, go to the ER immediately:

- Chest pain or pressure
- * Uncontrolled bleeding
- * Sudden or severe pain
- * Coughing or vomiting blood

- * Difficulty breathing or shortness of breath
- * Sudden dizziness, weakness, or changes in vision
- * Severe or persistent vomiting or diarrhea
- * Changes in mental status, such as confusion

You do not need authorization for emergency care before receiving treatment. However, if you're enrolled in a TRICARE Prime plan you must contact your primary care manager or regional health care contractor within 24 hours or the next business day after you receive emergency care.

Urgent care is when an illness or injury is serious enough to seek health care right away, but not so severe as to require emergency room care. Some examples include earache, toothache, joint sprain, muscle pull or urinary tract infection. You can get urgent care from your primary care manager (PCM), or from an urgent care center if your PCM is inaccessible. Urgent care can be quicker, with a lower cost and better results, compared to a crowded ER that may require unnecessary tests or hospital stays

Agent Orange Exposed Ships:

To submit a claim to the VA for an Agent Orange related medical condition you must be able meet the prerequisites of the feet on the ground policy or prove that you were aboard a ship that had exposure. To assist you, the VA provides a list of naval vessels that have been confirmed as having been exposed to Agent Orange. If your vessel is not included in the Mobile Riverine Force, ISF Division 93 or listed designations at <http://www.publichealth.va.gov/exposures/agentorange/shiplist/index.asp#find>, check the alphabetized list of ships at either <http://www.publichealth.va.gov/exposures/agentorange/shiplist/list.asp#B> or the attachment to this Bulletin titled, "**Agent Orange Exposed Ships Nov 2012**". Ships will be regularly added to the list based on information confirmed in official records of ship operations. Currently there are 244 ships on this list. Refer to <http://www.publichealth.va.gov/exposures/agentorange/shiplist/not-on-list.asp> for instructions on how to add a ship to this list. For questions about your eligibility for disability compensation refer to <http://www.publichealth.va.gov/exposures/agentorange/disability-compensation.asp>.

Vet Cemetery Florida Update:

The Department of Veterans Affairs has announced that it has purchased land for two new national cemeteries in Florida. unshine State a. VA plans to construct one of the cemeteries in central eastern Florida between the cities of Daytona and Melbourne, and the other in northwestern Florida, in the Tallahassee area. with an open national, state or tribal Veteran's cemetery within 75 miles of their residence. as Acosta Groves, is located on U. S. Route 1 in northern Brevard County in Scottsmeer, approximately two miles from Interstate 95. S. Highway 27 (Apalachee Parkway). development firms. The cemetery will also serve Veterans in southwestern Georgia and southeastern Alabama. VA has opened three new national cemeteries in Florida over the past five years including Jacksonville National Cemetery (2009), Sarasota National Cemetery (2009) and South Florida National Cemetery (2007). Prior to that:

- Florida National Cemetery in Bushnell opened in 1988 and is now the second busiest VA national cemetery in the country with 6,728 interments completed in fiscal year 2011. Of VA's 131 cemeteries across the nation, the state of Florida is home to six national cemeteries that rank among the top 32 busiest by interment workload.
- Barrancas National Cemetery in Pensacola, established in 1868, serves Florida's western panhandle and southern Alabama. A recent expansion of the historic cemetery ensures that it will remain open with a full range of burial options for decades to come.
- Bay Pines National Cemetery was established in 1933 and has been closed to first interment casketed burials since 1989. The facility still offers cremation burial sites. St. Augustine National Cemetery, established in 1881, has been closed since 1997.

Veterans with a discharge issued under conditions other than dishonorable, their spouses and eligible dependent children can be buried in a VA national cemetery. offices, from the Internet <http://www.cem.va.gov> , or by calling VA regional offices toll-free at 800-827-1000. To make burial arrangements at any VA national cemetery at the time of need, call the National Cemetery Scheduling Office at 800-535-1117. [Source: VA News Release 26 Nov 2012 ++]

VA Claims:

For those who have submitted paperwork to the VA for claims: The VA has struggled for years to reduce the waiting times, and each year it stresses to Congress that fixing the process is a top priority. A recent performance report shows that 66 percent of claims in fiscal 2012 were more than 125 days old. That's up from 36 percent in 2010 and 60 percent in 2011.

The department has seen a massive increase in claims from veterans in recent years, both younger ones from Iraq and Afghanistan and older ones who have recently been able to file claims on new conditions. Claims the past four years have topped 1 million a year.

The new performance report shows that the VA has lost ground on many of its other benefits-related goals:

-- The average time to complete an education claim jumped to 31 days from 24 days; the long-term goal is 10 days.

-- The average time to complete a burial claim jumped to 178 days from 113 days; the long-term goal is 21 days.

-- The average time in the appeals system for veterans who dispute their disability compensation decision jumped to 866 days from 747 days; the long-term goal is 400 days.

The best one can do is be patient, and continue to follow-up

PAPER CHECKS TO END:

Reminder::

Most military retirees and annuitants receiving paper checks will be required to sign up for direct deposit by March 1, 2013. Get ahead of the rush by visiting the DFAS website at

<http://www.dfas.mil/retiredmilitary/newsevents/newsletter/treasurymandateeft.htm>.

Medical Rx Update:

The House and Senate agreed earlier this year to block Tricare health insurance fee hikes proposed by the Defense Department, limiting future increases to no more than the cost-of-living adjustment in military retired pay. A compromise allows fee increases that are much less than the Defense Department wanted.

Under the compromise, mail-order prescriptions for a 90-day supply would be free for generics, \$13 for brand-name drugs and \$44 for drugs not on the approved list, known as non-formulary drugs. At retail pharmacies, a 30-day supply of drugs would be \$5 for generic, \$17 for brand name and \$44 for non-formulary drugs. These co-pays will be allowed to increase by no more than the retirement COLA each year.

The Defense Department wanted retail brand-name drugs to be \$26, and increase by about \$2 a year, and would not have covered non-formulary drugs at retail pharmacies without a case-by-case review. For mail order, the Pentagon proposed free generics, \$26 for brand names and \$51 for non-formulary drugs, with the same \$2 to \$3 a year increase proposed for retail pharmacy co-pays. One group of retirees, though, will be forced to use mail-order pharmacies. Medicare-eligible retirees using the Tricare for Life program will be required to get maintenance drugs through a mail-order pharmacy, aides said.

“Pessimists see failure in every opportunity. Optimists see opportunities in every failure.”

(Winston Churchill)

This newsletter is distributed without profit to those who have expressed an interest in receiving the included information for educating themselves on veteran issues so they can better communicate with their legislators on issues affecting them
