



## Vietnam Veterans of America Chapter 825 South Jersey

PO Box 700 Mays Landing, New Jersey 08330

September 2013

This newsletter is a production of Chapter 825 of the Vietnam Veterans of America. Its intended purpose is to provide our readers with information dealing with Chapter activities, veterans' issues and other useful information. It is made possible through the efforts of our members and our sponsors. Please support us by supporting our sponsors.

Thank you!



Meetings are held on the 1<sup>st</sup> Monday of the month at 7:30 PM, unless otherwise indicated, at the Township of Hamilton Rescue Squad 1400 Route 50 in Mays Landing.

[We would like to see you there:](#)  
Please make an effort to attend!

*View our website*

<http://vchapter825.org>

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### Take Notice!

The September monthly meeting will take place September 9<sup>th</sup>, 2013 (the second Monday) at 7:30 PM at the Hamilton Township Rescue Squad building. Enjoy Labor Day!

### New Site On Female Vets Unemployment

A new Labor Department website focuses on unemployment among female veterans. The site contains links with information on employment opportunities, education and health care options, and data from the Bureau of Labor Statistics and other government agencies. It also addresses economic challenges faced proportionally more by female veterans, who are:

More likely than their male peers to have a service-related disability rated at 50 percent or more - 35 percent of female veterans versus 26 percent of male veterans.

Nearly twice as likely (18 percent versus 10 percent) to be divorced.

Far more likely to be single parents, at 11 percent versus 4 percent of male veterans.

The site is at:  
[www.dol.gov/vets/womenveterans](http://www.dol.gov/vets/womenveterans)

### Sallie Mae to Be Accused of Overcharging Military Personnel on Loans

Federal regulators plan to accuse Sallie Mae, the giant student lending corporation, of charging military personnel excessive interest on student loans, and the government is looking into similar allegations against other lenders.

Sallie Mae revealed the pending action against in August in its quarterly earnings report, stating that the Federal

Deposit Insurance Corporation warned in July that it planned to take "new formal enforcement action" against the lender. Both corporations declined to describe the allegations, but Sallie Mae said they would deal in part with the Servicemembers Civil Relief Act.

That law caps interest on loans to military personnel at 6 percent, along with providing protections against default judgments and garnishments, and a person briefed on the matter said compliance with the 6 percent limit would be a key part of the F.D.I.C. action. Under the law, if a person borrows money at a higher rate and then enters the military and requests a lower rate, the lender must reduce the rate to 6 percent, and forgive any interest above that level.

In recent months, Sallie Mae has created a Web site specifically for military personnel, and has taken other steps to notify them of their legal rights regarding student loans.

In enforcing the 6 percent rule and other credit protections for service members, the government has focused primarily on mortgage borrowing. In the last three years, the Justice Department and the states have reached several settlements with banks, directing billions of dollars in payments to service members, some of whom had lost their homes, and subjecting new foreclosure actions to more scrutiny.

In October 2012, the government's new Consumer Financial Protection Bureau identified improper student lending as "the next front" in protecting service members financially. Additionally, in a July 31 hearing of the Senate Committee on Veterans Affairs, when asked about predatory student lending, a Justice Department official said that the department was looking into some of the same kinds of violations as the F.D.I.C.

Sallie Mae began four decades ago as a government-sponsored enterprise,

like the mortgage lenders Fannie Mae and Freddie Mac, but has been independent since the end of 2004. It lists as its primary assets \$145.6 billion in student loans. The company also acts as a servicer and collector for loans made by banks and the federal government.

The F.D.I.C. primarily oversees local and regional banks, not major national institutions, but Sallie Mae comes under its jurisdiction because of the role of its Utah-based arm, Sallie Mae Bank, which provides banking services directly to consumers and is an F.D.I.C. member.

**TRICARE For Life Beneficiaries May Have Higher Costs When Using VA Facilities for Non-service Connected Treatments**

Many TRICARE For Life (TFL) beneficiaries use VA facilities for care related to their service connected disabilities. But, as TFL is a comprehensive Medicare wraparound coverage, beneficiaries are reminded they run the risk of unexpected out-of-pocket costs if they use a VA facility for care not related to a service connected disability.

Medicare can't by law, pay for care at a government facility, such as the VA. When a TFL beneficiary chooses to obtain care from a provider that Medicare can't pay, TRICARE can only pay up to 20 percent of the TRICARE-allowable charge. The TFL beneficiary is responsible for paying the VA the remainder.

Beneficiaries who have been getting care at a VA facility that is not related to a service connected disability should talk to a VA representative about other VA options, including how VA can work with other health insurance (OHI) plans.

As part of the intake process at VA facilities after October 1, 2013, TFL beneficiaries will be asked if they're using their VA or TFL benefit or if they have other health insurance (OHI). When electing to use their TFL benefit at the VA, they will also be informed they must pay the remaining bill after TRICARE pays its portion of the TRICARE-allowable charge. They

may be asked to sign a form indicating they understand their responsibility.

TRICARE and the VA recommend getting care for service-connected disability at a VA facility. For other care, TFL beneficiaries may still consider using their VA benefit or they should use TFL with a Medicare-certified provider. When using Medicare providers, TFL beneficiaries typically have no out-of-pocket costs for services covered by both Medicare and TRICARE.

**Social Media Could Help Educate More Vets About Benefits**

Social media may comprise part of a new Veterans Affairs Department program to reach out to returning soldiers who aren't taking advantage of VA benefits, a contractor said.


VA recently awarded the Virginia-based contractor Reingold a \$13.8 million contract to reach out to the 40 to 50 percent of veterans who don't take full advantage of those benefits through a new website and through paid media such as television ads, according to a press release.

"There is also a potential social media outreach component to the contract that is being hammered out," a Reingold official said. "One idea being discussed is developing content that partners would be able to disseminate through social media channels to draw attention to VA resources."

VA's Make the Connection program spent \$2 million on Facebook advertisements for a similar program to connect veterans with services last year and plans to spend an additional \$1million on Facebook ads this year.

Facebook is, by far, the most popular social networking site among veterans. The military services have also spent money on Facebook ads aimed mainly at recruitment.

A VA spokesperson quoted in the press release said the contract is "part of a comprehensive and synchronized VA outreach campaign to expand access to earned care and benefits for eligible veterans, their survivors, and family members."



**We Pause To Remember**  
MSG Mike J. Scott  
USA 02 September 1932  
1LT Albert S. Graf  
USMC 08 September 1944  
Sp4 Walter E. Demsey, Jr.  
USA 17 September 1949  
SGT Donald Iandoli  
USA 19 September 1946  
CPT Ronald M. Mayercik  
USAF 23 September 1943  
LCPL Theotis Collins  
USMC 27 September 1949

**Corrupt Charities Help Veterans In Name Only**

It has not escaped my notice, nor that of many others I speak with that the number of so-called charities advertising they helped veterans appears to be on the increase. Not all of these operations are above board and it enrages some of us to know that people take advantage of patriotism to con those who served in the military.

It's become more prevalent nationwide and reached a point that Rep. Dina Titus, D-NV., has asked the U.S. Department of Justice to investigate and hold accountable corrupt charitable organizations, particularly those aimed at veterans.

"Put 'veterans' in the name of anything and you're going to get people to support it," Titus said recently. "It's super American, and it's easy for them to prey on veterans."

Titus was prompted by an investigation by the Tampa Bay Times and the Center for Investigative Reporting and CNN, which uncovered "dozens of so-called charities that are little more than corrupt schemes to

enrich their founders and the for-profit companies that they hire to solicit donations.”

“As the Ranking Member of the Veterans’ Affairs Committee Subcommittee on Disability and Memorial Affairs, I am committed to ensuring that our nation’s veterans and their families are cared for,” Titus wrote. “I am disturbed that many of the organizations included in this report claim to be helping veterans but provide little actual assistance.”

“Charity Watch looked into some of this, and they gave us some pretty amazing statistics,” Titus said July 12<sup>th</sup>, 2013. “The Disabled Veterans National Foundation raised \$61 million between 2008 and 2010 and said it was for badly needed goods for disabled veterans.”

The goods turned out to be 11,520 bags of M&Ms and 26 bags of cough drops, Titus said.

Check out this link at <http://www.tampabay.com/americas-worst-charities/> from the Tampa Bay Times newspaper listing 50 of the worst charities over the past 10 years as far as money paid to solicit donations.

Just because the charity has kids, cancer, police, firefighters or veterans in the name doesn’t mean it’s a reputable nonprofit.

The eighth worst on the list is the National Veterans Service Fund. It raised \$70.2 million, paid \$36 million to fundraisers and spent 8.6 percent of its direct cash aid on the veterans. Five more veterans charities were on the list.

### A Dozen Agencies Produced 19 Finalists for Tech Innovation Awards

The *Nextgov* editorial staff has selected 19 finalists for Bold Awards from more than 180 nominations. 4 of the finalists work in Veterans Affairs. The honors recognize federal employees who have taken risks to implement innovative programs that make government more effective.

The finalists hail from 12 agencies where their efforts have enhanced veterans’ health care, boosted national security and saved lives during emergencies. They’ve advanced international relations, strengthened environmental protections, and saved taxpayers’ money.

They are:

Kathleen Frisbee and Neil Evans, co-directors of the Veterans Health Administration’s Connected Health program, and the Web and Mobile Solutions Team, developed multiple applications that have improved veterans’ health. One observer credits the program as pushing VA past the private sector in telehealth.

Peter Kuzmak, a computer specialist in Veterans Affairs’ Office of Information Technology, developed a process to match digital medical images from Defense and other providers with VA’s electronic health records system. It replaced a formerly manual process, taking 15-20 minutes per image, with one that takes about 1 minute.

John Wallace, a program analyst in informatics at Veterans Affairs, developed an application that automates inspection of non-VA medical care payments to ensure accuracy prior to payment. Preliminary data shows the system has averted almost \$6 million in improper payments.

### VA Claims Backlog Falling

Critics of the VA culminated a four-month petition drive Tuesday by demanding the president take immediate action to end the million-veteran disability claims backlog.

Supporters of the VA have dismissed the petition, organized by the conservative Concerned Veterans for America, as little more than a political stunt. Organizers, on the other hand, insist their concerns about the still massive benefits backlog are still relevant, and the VA’s recent progress is no guarantee of future success.

According to Pete Hegseth, CEO of CVA quoted in a August 19, 2013 article in Stars and Stripes;

“There is still a lot of question about how they reduced those numbers, and the problem is clearly not gone, so we have to keep focus on it.”

The backlog — the number of claims that have taken more than 125 days to process — never totaled 1 million veterans. It peaked this year, in March, at around 608,000 cases.

However that’s four times more than in late 2009 — just a few months after Obama administration officials

first vowed to end the problem — when the figure hovered around 150,000.

VA officials have blamed the steady growth of the backlog on dramatic increases in the claims filed by veterans, a decision to open tens of thousands of new cases for illnesses related to Agent Orange exposure, and antiquated paper-processing systems that have taken years to update.

For months, the department has been hammered by advocates, lawmakers and veterans for the problem. CVA and others have called for VA Secretary Eric Shinseki to resign, dismissing the explanations for the increase.

VA reports it has made significant progress since that March 2013 peak, dropping the backlog to about 489,000 — almost 20 percent — as of mid-August 2013. In June, raters finished all claims pending for more than two years, and officials insist they’re on pace to eliminate the backlog in 2015.

In August 2013 while addressing the Disabled American Veterans convention President Obama claimed “We’re turning the tide, and we’re not going to let up until we eliminate the backlog once and for all.”

The recent progress is in part a result of the department’s new Veterans Benefits Management System — a paperless ratings software — and increased use of the Fully Developed Claims (FDC) process, which ensures veterans have all relevant paperwork ready before starting their case. The VA also hired new raters, instituted mandatory overtime this spring, and started issuing partial decisions on more complex cases to help pull down the numbers.

Questions persist as to whether those changes are sustainable, systemic improvements, or whether the moves will provide only temporary relief.

VA officials in a statement said they are confident in the plans noting; “The claims backlog is a decades-old problem, and fixing the outdated and paper-intensive claims system is an extraordinarily complex task.” The VA added “While we have much more work to do, we are making progress, and we expect that progress to continue.”

If VA raters can keep up the processing pace of the last five months,

the backlog would hit zero by early summer 2015.

However mandatory overtime for claims workers ends in October, and some employees have voiced concerns about how difficult it might be to migrate older cases into the new software systems.

Some veterans groups have praised the secretary's efforts, and said they are cautiously optimistic about the end of the backlog.

Earlier in August, VA began awarding one year of retroactive benefits to veterans filing FDCs, an incentive worth potentially tens of thousands of dollars in extra payouts. Officials said they expect that to boost the FDC case numbers, and in turn help continue the backlog reduction.

### VA Reverses Denial Of Benefits For Veteran In Agent Orange-Related Case

The VA has reversed its denial of Agent Orange-related disability benefits for an Air Force veteran who flew on potentially contaminated C-123 aircraft after the Vietnam War, a decision advocates describe as the first of its kind for veterans seeking compensation for postwar exposure to the toxic defoliant.

Paul Bailey, a retired Air Force Lieutenant Colonel who is gravely ill with cancer, received notice in early August that he would receive "a total grant of benefits" for cancer associated with his 1970s-era service in the United States aboard the aircraft, which had been used to spray the toxic defoliant during the war.

Nearly three-dozen rugged C-123 transport planes formed the backbone of the U.S. military's campaign to spray Agent Orange over jungles hiding enemy soldiers during the Vietnam War. And many of the troops who served in the conflict have been compensated for diseases associated with their exposure to the toxic defoliant.

The C-123s were used to spray Agent Orange from 1962 to 1971 as part of Operation Ranch Hand. After the war, about 1,500 Air National Guard and Reserve crew members flew the planes on cargo missions in the

United States until the last aircraft were retired in 1982.

Now a bitter fight has sprung up over whether those in the military who worked, ate and slept in the planes after the war should also be compensated. Sen. Richard Burr (N.C.) and Sen. Jeff Merkley (D-Ore.) are now questioning the Department of Veterans Affairs' assertions that any postwar contamination on the planes was not high enough to be linked to disease.

Complicating the debate is that few of the planes remain to be tested. In 2010, the Air Force destroyed 18 of the Vietnam-era aircraft in part because of concerns about potential liability for Agent Orange, according to Air Force memos documenting the destruction.

According to the VA decision, dated July 31, 2013 "The preponderance of the evidence suggests that you were exposed to herbicide onboard U.S. Air Force C-123K aircrafts." "Reasonable doubt in regards to the exposure to certain herbicide, to include Agent Orange, as the result of occupational hazards onboard C-123K aircrafts is resolved in your favor."

Lt. Col. Bailey was featured in a August 3<sup>rd</sup>, 2013 Washington Post article about a controversy concerning C-123 aircraft, many of which were destroyed in 2010 by the Air Force. Tests in the 1990s showed that some of the planes might still be contaminated with TCDD dioxin, a carcinogen associated with Agent Orange.

The decision is "greatly significant," said Wes Carter, a retired Air Force major and friend of Bailey's who heads the C-123 Veterans Association. The organization contends that postwar crews should be eligible for the same disability compensation for Agent Orange exposure provided to military veterans who served in Vietnam during the war.

Several C-123 veterans in recent years have been granted disability benefits after appealing denials to the Board of Veterans' Appeals, an administrative tribunal. But Lt. Col. Bailey's case marks "the first time an award has been made short of the BVA," Carter said.

VA said there is no policy against C-123 claims. The department said in a

statement that it does not track whether there have been previous claims granted for C-123 crew members but that the ruling in the Bailey case does not establish a precedent.

"Where cases are not clear cut, reasonable doubt is always decided in the claimant's favor," according to the VA.

Rick Weidman, executive director for policy and government affairs for the Vietnam Veterans of America, called the decision "fantastic news" and added: "That's the first case we've heard of that's been successful."

Sen. Richard Burr (N.C.), the ranking Republican on the Veterans' Affairs Committee, was also pleased with the reversal.

"I hope this is a sign that VA will start to make decisions on these claims based on the weight of information submitted in each case, rather than blanket-denying every claim from C-123 veterans," he said.

Burr and Sen. Jeff Merkley (D-Ore.) had asked the VA Office of Inspector General to review whether the department is "inappropriately" denying disability compensation to veterans who say they were sickened by postwar contamination. "It appears that [VA] does, in fact, plan to deny any C-123 claims regardless of the evidence submitted in a particular case," the senators wrote in a June letter requesting the inquiry.

While stationed at Westover Air Force Base in Massachusetts in the 1970s, Bailey often flew the most famous of the C-123s, known as Patches for the holes left by enemy fire. After it was retired to a museum, tests by Air Force toxicologists in 1994 found that Patches was "heavily contaminated" with dioxin.

Lt. Col. Bailey's claim for disability benefits was denied in February by the office in Manchester, N.H., which wrote that "VA regulations do not allow us to concede exposure to herbicides for Veterans who claim they were exposed to herbicides after the Vietnam war while flying in aircraft used to spray these chemicals."

Lt. Col. Bailey appealed the decision in April.

In a statement Wednesday addressing the VA reversal, Brad Mayes, director of the Manchester

office, said “the issues described in Lt. Col. Bailey’s claim illustrate the difficulty VA faces when evaluating whether a particular veteran’s claim of Agent Orange exposure outside of Vietnam has merit. VA considers these issues on an individual basis, along with any other evidence available.”

Sen. Burr said he is “concerned that there are other veterans who did not receive this same level of attention to their claims.”

Officials at Hill Air Force Base in Utah, which oversaw the planes, approved a consultant’s recommendation in 2009 to “dispose of/recycle the 18 UC-123K ‘Agent Orange’ aircraft as soon as possible to avoid further risk from media publicity, litigation, and liability for presumptive compensation,” according to a base memo in August 2009.

The C-123 aircraft cases might open up claims for postwar service, as well, according to Alvin Young, the Agent Orange consultant who advised the Air Force. “What this means is that a whole new class of veterans may claim that their exposure was due to the fact they were members of aircrews or mechanics associated with the contaminated aircraft that returned from Vietnam,” Young wrote in a June 2009 memo to Hill AFB.

Young, a retired Air Force Colonel and former professor of environmental toxicology at Oklahoma State, frequently serves as a consultant on Agent Orange for the Defense Department. The 2009 memos list him as a consultant on Agent Orange to the Office of Secretary of Defense; Young said he was advising Hill AFB in an “unofficial capacity.” Both Young and the Pentagon say the consultant was not under contract with the Defense Department at the time.

The longer this issue remains unresolved, the greater the likelihood of outside press reporting on yet another ‘Agent Orange Controversy,’” consultant Alvin Young wrote in a report.

Base officials recommended that the aircraft be “shredded into cell phone-size pieces” and melted. “Smelting is necessary for these 18 aircraft so the Air Force will no longer be liable for ‘presumptive compensation’ claims to anyone who ever works around this ‘Agent Orange’

metal,” an Air Force memo said in September 2009.

A 2011 Air Force epidemiological study of the crews that sprayed Agent Orange — “the most heavily exposed veterans of the Vietnam War,” according to the report — found no link between Agent Orange exposure and their diseases.

Last year, the VA hired Young to investigate the postwar C-123 claims, and his report in November concluded that “ample evidence” disproves the veterans’ claims.

“The VA is very concerned, because it amounts to a lot of money to be paid for the rest of their lives when there isn’t the science to back it up,” Young said.

But a number of outside medical experts have concluded the veterans were likely exposed to dangerous levels of dioxins. In November, 14 prominent toxicologists sent the VA a letter saying the department’s scientific conclusions are based on “erroneous assumptions.”

That the Air Force would try to downplay the problems and that the VA would tend to go along with this injustice foisted onto veterans exposed to Agent Orange should surprise no one. This reversal is the first in a long-overdue step to resolve the many Agent Orange claims that should be resolved in favor of those who served their country and were exposed to toxins while serving.

**Eliminating VA Senior Exec Bonuses for 5 Years Would Save \$18 Million**

According to the Congressional Budget Office, a five-year moratorium on all bonuses for senior executives at the Veterans Affairs Department would save the federal government \$18 million.

The provision was included as an attachment to the 2013 Putting Veterans Funding First Act (HR813/S932) to ensure VA is funded one year in advance. That bill was introduced by House Veterans Affairs Committee Chairman Jeff Miller, R-Fla., and primarily aims to shield VA from future budget uncertainty. It won the committee’s approval but hasn’t yet made it to the House floor.

This was not the first time the veterans committee has targeted performance awards for employees in the Senior Executive Service; a similar amendment was included on the 2013 GI Bill Tuition Fairness Act (HR357/S257), which also cleared the committee but has not yet been taken up by the full House.

The Demanding Accountability for Veterans Act (HR 2072) which targets “bureaucrats in Washington who drag their feet and don’t do their jobs,” according to the bill’s author, Rep. Dan Benishek, R-Mich. also recently cleared the House panel. The bill would make it easier for supervisors to remove performance bonuses or fire employees who are not adequately addressing problems identified by the VA’s inspector general.

Amendments attached to that bill would increase fees for certain veterans applying for VA loans and verify the incomes of VA pension recipients to ensure they qualify for their benefits. These two changes would save the federal government \$182 million over five years, according to the CBO.

Another amendment would allow veterans whose nursing home care is paid for by VA to live in medical foster homes. This provision would cost \$170 million over five years, CBO said.

**HUD & VA Announce More Vouchers To Help Homeless Vets Get Into Permanent Homes**

The Department of Housing and Urban Development and the Department of Veterans Affairs announced August 21<sup>st</sup>, 2013 the second round of HUD-Veterans Affairs Supportive Housing (HUD-VASH) funding to local public housing agencies across the U.S. and Puerto Rico. The \$7.8 million will provide housing and clinical services for 1,120 currently homeless veterans. In May of this year, the two agencies announced \$60 million in HUD-VASH vouchers. See state/local distribution of the assistance announced today.

The supportive housing assistance is provided through the HUD-Veterans Affairs Supportive Housing (HUD-VASH) Program which combines rental assistance from HUD with case

management and clinical services provided by VA. Since 2008, a total of 58,140 vouchers have been awarded and 43,371 formerly homeless veterans are currently in homes of their own because of HUD-VASH.

New Jersey's Department of Community Affairs partnering with the Philadelphia VA Medical Center received 15 vouchers totaling \$133,011.

### Most VA Privacy Breaches Trace To Paper, Not PCs

According to a August 14<sup>th</sup>, 2013 article in Information Week, most data breaches at the Veterans Affairs Department involve mishandled paper documents, not information technology assets, proving that the agency is doing a good job of protecting its computer systems

"Between 96 and 98 percent of our [data breach] incidents -- it varies from month to month -- deal with physical paper where ... people are not thinking about the fact that that piece of paper they're carrying around making benefits determinations has sensitive information and they need to protect it," said Stephen Warren, VA acting assistant secretary for information and technology. "It's an area that we spend a lot of time and training on. We are constantly updating our campaign to inform the staff that they have to take this seriously. We are constantly reinforcing the message that it matters."

The central point that Warren makes to VA employees who handle sensitive information is that patients can't get critical services if their identity has been stolen. "It has huge impact on an individual," he said.

Most of these data breach incidents are cited as "mishandled or misused physical or verbal information" in the department's monthly reports to Congress of data incidents, which are assembled by the VA Office of Information Security's Incident Resolution Team.

In one case involving the VA's Milwaukee, Wis., facility last April, a paper notification letter was inadvertently sent to the wrong beneficiary. The letter contained the beneficiary's name, address, home phone number, Social Security number

and bank account information. The beneficiary who erroneously received the document called VA to report the incident and returned it to the facility.

The VA employees involved in the Milwaukee incident were counseled on the importance of handling personally identifiable information, according to the April report.

In another April case, documents containing the full names and the last four digits of the Social Security numbers of 270 veterans were found on two separate occasions in men's restrooms in a Nashville, Tenn., VA office. The veterans were notified of the incident and investigators concluded that the documents were "inadvertently" left in the restrooms by unidentified employees who had attended morning meetings in the building.

According to the April report, there were 227 incidents of data breaches across the VA between April 1 and April 28 in which information was manually mishandled in one way or another. In comparison, only eight cases of stolen or missing PCs or laptops were reported and investigated in the same month.

Missing laptop or PC cases often involve inventory mixups, Warren said. For example, in an April incident at a Coatsville, Pa., VA facility, four desktop PCs were reported missing from the inventory; three of them were later found. No personally identifiable information or protected health information was stored on any of the PCs, the response team found.

"If you consider the fact the VA has about 440,000 people that we service and that the department over 900,000 devices on the network, [a data breach count relating to IT assets] of somewhere between one and 10 in a month is pretty good," Warren said. "And many of those are things disappearing in inventory. Many are found subsequently because they got moved somewhere."

**The battle, sir, is not to the strong alone; it is to the vigilant, the active, the brave...**

**Patrick Henry**

### VA Leads The Private Sector In Telehealth

The VA's focus on efficiency and controlling the costs of treating aging patients have made it a telehealth model for the nation as well as the world.

The VA has long been ahead of the private sector in health IT. Its Vista electronic health record (EHR) system, for example, was in use throughout the VA's hospitals and ambulatory clinics long before non-VA providers began to adopt EHRs en masse in the past few years. And as recent VA figures show, the department has also left the private sector in the dust in the area of telehealth.

Last year, almost half a million veterans received some of their care remotely, either through virtual visits, home monitoring, or a store and forward system, according to Adam Darkins, MD, who leads VA's telehealth program. Included in that total are roughly 148,000 veterans who participated in remote consults with clinicians and 119,000 veterans whose conditions were monitored at home. Remote monitoring enabled 42,000 patients to stay at home rather than be institutionalized.

Following some pilots that started in the late '90s, VA began rolling out its telehealth program in 2003, and it is has now become an integral part of how the system delivers care, Darkins noted. Besides the benefits to patients, which include better outcomes, more independence, reduced travel time, and less time taken off from work, telehealth also saves VA a significant amount of money. A combination of remote patient monitoring and care coordination, for example, reduced hospital bed days by 25% and admissions by 19%, according to a VA study.

Considering these results, it would seem like a no-brainer for the private sector to follow suit. But outside of a few large organizations like Kaiser Permanente, Partners Health Care, and Geisinger, observers say, remote patient monitoring is still in a nascent stage. Virtual visits are catching on more rapidly because some big national health plans are sponsoring remote consultations between members and

on-call doctors who are not their personal physicians. Mobile monitoring and consults for patients who have chronic conditions is not yet a factor in the market, mainly because providers are not being paid to view this monitoring data.

The major difference between the VA system and privately delivered healthcare is that the former is a large integrated delivery system in which providers receive salaries, whereas private practitioners are mostly paid on a fee-for-service basis. The VA's goal is to provide high-quality care efficiently in a way that increases access and lowers the costs to the organization. In contrast, the incentive of providers in the private sector is to maximize billing, largely for the face-to-face encounters that are covered by insurance.

This is starting to change in Accountable Care Organizations (ACOs) and other organizations that hold or are moving toward risk contracts of various kinds. These entities recognize that they must manage population health to contain costs and that a key part of this strategy is to provide effective, continuous care between patient encounters. Consequently, many organizations have become interested in remote patient monitoring. However, most of these providers are still working out how they're going to assimilate this data into their clinical workflow.

One of the ways the VA has solved this problem is to integrate telehealth data into its EHR. This makes it easier for physicians and nurses to use the information, because they don't have to leave their workflow to visit a Web portal. Recognizing this advantage, Partners Healthcare recently began to funnel home monitoring data into its EHR. WellDoc, which markets a diabetes management system that includes a mobile app, has also piloted integration of its data with Allscripts' EHR. But most EHR vendors are not yet ready to provide this integration to their customers.

VA is ahead of the curve partly because its patients are older, on average, than people who are commercially insured, Darkins noted, and it had to find a way to increase their access to services, especially in rural areas. But the entire U.S.

population is getting older, so other providers also should prepare to offer them services that are easy to access and that help them manage their own health.

Already, Darkins said, many of the private-practice doctors with whom VA contracts receive telehealth training, most of it Web-based and are using these technologies to treat veterans. Medicare should seriously consider offering generic telehealth training to all physicians who participate in its program. It should also begin covering certain kinds of telehealth, and not just in rural areas, instead of waiting for most providers to join ACOs and start taking financial risk. Based on the VA's track record, telehealth in the private sector could save more than it costs.

### VA & Pentagon Announce PTSD Research Consortia

The VA and DoD have set up two joint research consortia, at a combined investment of \$107 million, to research the diagnosis and treatment of PTSD and mild traumatic brain injury (mTBI) over a five-year period.

The Consortium to Alleviate PTSD is a collaborative effort between the University of Texas Health Science Center at San Antonio, San Antonio Military Medical Center, and the Boston VA Medical Center that will attempt to develop the most effective diagnostic, prognostic, novel treatment, and rehabilitative strategies to treat acute PTSD and prevent chronic PTSD.

The Chronic Effects of Neurotrauma Consortium is a collaborative effort between Virginia Commonwealth University, the Uniformed Services University of the Health Sciences, and the Richmond VA Medical Center will examine the factors which influence the chronic effects of mTBI and common comorbidities in order to improve diagnostic and treatment options, VA said.

The consortia were formed in response to an executive order calling for a national research action plan on PTSD and mTBI.

### VA Website Has Answers To How The Affordable Care Act Will Affect Veterans

The VA has launched a new website explaining the likely impact of the Affordable Care Act on former troops and their families.

The site (<http://www.va.gov/health/aca/>) addresses questions such as whether the law affects those already receiving VA health care (it doesn't), who is eligible for VA care, and options available to uninsured family members.

Under the Affordable Care Act, veterans who qualify for VA health care — including all who fall into the Veterans Affairs Department's eight health care priority groups — do not have to buy health insurance under the law's requirement that all individuals must have coverage.

VA wants all eligible veterans who aren't already in the system to visit the website and sign up.

"VA encourages eligible veterans who are not enrolled in VA's health care system to take advantage of the world-class care we provide to the men and women who have served this nation in uniform," VA Secretary Eric Shinseki said.

For eligible veterans, VA health care carries no enrollment fees, monthly premiums or deductibles.

According to VA data, nearly 8.6 million veterans are enrolled in the Veterans Health Administration. An estimated 6.6 million more of the nation's 23 million veterans are eligible, but many have other insurance.

VA believes that roughly 1.3 million veterans are uninsured and may be eligible for VA care.

Nearly 1 million spouses and children of veterans also do not have health insurance. For them, the law created a health insurance marketplace where the uninsured can shop for a policy.

By law, U.S. citizens who do not have health insurance and do not qualify for government programs could face penalties starting in January. Annual fines would start at \$95 for an adult, \$47.50 for a child and \$285 per family or 1 percent of family income, whichever is greater.

In 2016 and beyond, fines would rise to \$695 per adult and \$347.50 per child; and \$2,085 per family or 2.5 percent of family income, whichever is greater.

The fines would be paid out of an individual's tax return.

Federal and many state marketplaces or insurance exchanges are set to open for business on October 1<sup>st</sup>, 2013.

## VA Performance Bonuses

It was recently reported that 8 out of 10 healthcare providers working in the Veterans Health Administration, the healthcare arm of the VA received some form of pay-for-performance bonuses totaling \$150 million in 2011 even though the U.S. Government Accountability Office (U.S. GAO), the investigative arm of Congress charged with examining matters relating to the receipt and payment of public funds found no written criteria for the bonuses or any written evaluations justifying them.

The GAO visited four VA medical centers and learned that several providers who had been disciplined still received bonus pay, according to a 39-page report, "VA Health Care: Actions Needed to Improve Administration of the Provider Performance Pay and Award Systems."

"At these medical centers, all providers the GAO reviewed who were eligible for performance pay received it, including all five providers who had an action taken against them related to clinical performance in the same year the pay was given."

One physician practiced with an expired license for three months and only achieved two of three performance goals but still received more than \$7,600 in performance pay despite being "reprimanded" by his employer because having a current license was "not a factor that was considered" in determining whether to make the payment.

Another provider repeatedly refused to see patients in the emergency room thereby increasing wait times for patients because he believed they were falsely admitted. That doctor failed on 12 of his 13 performance goals, but still

received more than \$7,500 in performance pay.

GAO found one VHA radiologist "failed to read mammograms and other complex images competently," but still received more than \$8,000 in incentivized pay. A VHA surgeon left a surgery during the procedure and allowed his residents to continue unsupervised. The doctor was suspended for 14 days without pay, but still received more than \$11,000 in performance pay.

Yet another physician received a three-day suspension for not responding when on call and creating "an atmosphere of fear and poor morale" through outbursts of yelling. The doctor received a performance payment of more than \$10,000.

In fiscal 2011, the VHA spent \$150 million on its performance pay program in which 80% of its 22,500 physicians and dentists received a pay bump. That's \$8,049 each, on average. In addition, 20% of VHA providers received a separate "performance award," with a total payout of another \$10 million, or about \$2,589 per recipient.

"Moreover," the report noted, the VHA "has not reviewed the goals set by medical centers and (regional) networks and therefore does not have reasonable assurance that the goals make a clear link between performance pay and providers' performance."

Performance pay is one of three main components of providers' pay packages at the VA, along with base pay—which includes a component for years of service—and market pay, which takes into consideration a provider's medical specialty.

I think we all know the basics: if you punish a behavior, you discourage it, and if you reward a behavior, you encourage it.

Author unknown



## VA Says Shaheen Bill Needed To Address Discrimination

August 27<sup>th</sup>, 2013 the Associated Press published an article reporting that Congress or the courts may still have more work to do before the VA can start providing federal benefits to married, same-sex couples, according to VA Secretary Eric Shinseki.

June 2013 the Supreme Court ruled that the federal Defense of Marriage Act, denying federal tax, health and pension benefits to married, same-sex couples was unconstitutional. The law governing veteran's benefits contained similar provisions, according to Secretary Shinseki.

The law on VA benefits specifically defines spouse and surviving spouse as someone of the opposite sex, which has prevented same-sex married couples from accessing such benefits as enhanced disability or pension payments.

To date no court has deemed that particular provision unconstitutional, although three federal cases are pending. Congress has not taken action to change the definition of spouse.

Meanwhile the DoD has announced that same-sex spouses of military members will be eligible for the same health care, housing and other benefits enjoyed by opposite-sex spouses starting September 3<sup>rd</sup>, 2013.

It was reported that Shinseki said the VA would be prepared to move quickly were Congress to revise the definition of spouse when it comes to veteran's benefits or if a court determined the language governing VA benefits was unconstitutional.

August 27<sup>th</sup>, 2013 U.S. Senator Jeanne Shaheen (D-NH) announced plans to press forward with the Charlie Morgan Military Spouses Equal Treatment Act after the VA indicated that legislation is still necessary to grant veterans in same-sex marriages benefits for their spouses and families.

Earlier this summer, Shaheen asked the VA if legislative action was still necessary in the aftermath of the Supreme Court's decision declaring the Defense of Marriage Act (DOMA) unconstitutional. In a letter responding to her inquiry, Secretary Eric Shinseki acknowledges the VA will need to consider policy changes to comply with



current law. Shinseki specifically notes, "Certain provisions in title 38, United States Code, define 'spouse' and 'surviving spouse' to refer only to a person of the opposite sex." The Department of Defense has already announced plans to award active duty and civilian couples benefits regardless of "sexual orientation."

Shaheen's legislation would update and expand federal benefits for legally married, same-sex veteran couples including certain survivor benefits by amending the definition of "spouse" in the federal code. The legislation is named after New Hampshire National Guard Chief Warrant Officer Charlie Morgan, who passed away earlier this year after a battle with breast cancer. Morgan's wife and daughter have not been eligible for certain benefits because of the definition of "spouse" in federal code. The bill has already cleared the Senate Veterans' Affairs Committee.

In the VA's response to Senator Shaheen, Secretary Shinseki said should the definition of spouse currently in use by the VA be amended to include same-sex couples the VA is "prepared to update its policies and systems in a timely manner and ensure that the delivery and quality of veterans' benefits remain at the highest standards."

### Understanding VA Health Care

VA health care is something that may be better understood when we think of it as buying a television.

A TV manufacturer like Zenith (an American manufacturer several decades ago) may contract with many suppliers to build sets.

Like Zenith did for TVs, the VA brings together the different component parts of care for the patient – primary care, specialists, hospitals, home health care, pharmaceutical needs, electronic health records, telehealth, etc. – and ensures that all of the "parts work well together."

The problem with most other health systems today is that patients are getting each part of their health care separately from different providers who do not communicate with one

another.

Some people may want to buy individual circuit boards, not a whole TV.

If VA can show them that the TV works better, maybe they'll buy into it, as opposed assembling a patchwork of services themselves.

VA has proven that the overall health care product they're creating does work better and costs less, serves to encourage veterans to utilize the VA health care system and gives taxpayers the best deal for federally provided health care.

### Labor Rules To Boost Employment For Vets

Veterans who often struggle to find work could have an easier time landing a job under new federal regulations.

August 27<sup>th</sup>, 2013 the U.S. Department of Labor announced two final rules to improve hiring and employment of veterans and for people with disabilities. One rule updates requirements under the Vietnam Era Veterans' Readjustment Assistance Act of 1974; the other updates those under Section 503 of the Rehabilitation Act of 1973. For more than 40 years these laws have required federal contractors and subcontractors to affirmatively recruit, hire, train and promote qualified veterans and people with disabilities respectively.

The rules will require most government contractors to set a goal of having veterans make up at least 8 percent of their employees, a rate that could change from year to year depending on the overall number of former military members in the workforce.

The rules, which apply to contractors and subcontractors with 50 employees and \$50,000 in government contracts, are scheduled to take effect 180 days after they appear in the Federal Register, which should happen "shortly". The rules will be enforced by the Office of Federal Contract Compliance Programs (OFCCP) in the Labor Department.

The goals are not hiring quotas. Still, contractors must provide

documentation that they tried to meet the goals.

Through the Vietnam Era Veterans' Readjustment Assistance Act of 1974, contractors have been encouraged to recruit and hire veterans, but the rule update requires contractors to set up a benchmark goal tied either to the national percentage of veterans in the workforce, which is about 8 percent, or to a percentage established through analysis of local veteran participation in relevant job categories.

The rule directs contractors to keep track of how many veterans apply for jobs and how many the company actually hires, the rule says.

Contractors also have to allow OFCCP to review documents related to hiring veterans, the rule says.

The new requirements could have a major impact on hiring since federal contractors and subcontractors account for about 16 million workers - more than 20 percent of the nation's workforce.

The unemployment rate for disabled workers is a staggering 14.7 percent, nearly twice the rate of 7.4 percent for the general population. The jobless rate for all veterans is 7.3 percent, but for veterans who served in the Iraq and Afghanistan wars it's 9.9 percent, according to the most recent data from the Bureau of Labor Statistics.

It is estimated that more than 200,000 veterans could get new jobs if all the companies meet the hiring goals within the first year of compliance.

The VEVRAA rule provides contractors with a quantifiable metric to measure their success in recruiting and employing veterans by requiring contractors to annually adopt a benchmark either based on the national percentage of veterans in the workforce (currently 8 percent), or their own benchmark based on the best available data. The rule strengthens accountability and record-keeping requirements, enabling contractors to assess the effectiveness of their recruitment efforts. It also clarifies job listing and subcontract requirements to facilitate compliance.

# We Pause To Remember



SSG James E. Kennedy  
USA 02 Jan 1950  
LTJG Dennis M. Erlich  
USN 03 Jan 1942  
CPT Ned R. Herrold  
USAF 08 Jan 1942  
1LT David F. Dinan III  
USAF 26 Jan 1944

MAJ Robert H. Mirrer  
USAF 05 Feb 1939  
SSG Robert F. Scherdin  
USA 14 Feb 1947  
CDR Donald R. Hubbs  
USN 19 Feb 1926

LCDR John T. Glanville, Jr.  
USN 18 March 1934  
WO William M. Konyu  
USA 18 March 1947  
LT Bruce C. Fryar  
USN 28 March 1944

LT Leon F. Haas  
USN 03 April 1943  
COL Herman L. Knapp  
USAF 11 April 1929  
1LT William C. Ryan, Jr.  
USMC 24 April 1944

LT John R. McDonough  
USN 10 May 1939

SGT Larry W. Maysey  
USAF 18 May 1946

LTJG Anthony J. Piersanti, Jr.  
USN 26 May 1946  
CPT James T. Egan, Jr.  
USMC 31 May 1943

LCPL John S. Foley III  
USMC 11 June 1947  
AX3 Eric J. Schoderer  
USN 16 June 1944  
LTJG Donald E. Siegarth  
USN 28 June 1941

MAJ Dyke A. Spilman  
USAF 14 July 1941  
CWO George P. Berg  
USA 16 July 1946  
MAJ Harold W. Kroske, Jr.  
USA 30 July 1947

1LT Joseph D. Adrian  
USAF 02 August 1942  
CWO Douglass L. O'Neill  
USA 03 August 1948  
COL Oscar Mauterer  
USAF 24 August 1925  
SSG Walter Stephen Simpson  
USA 21 August 1941  
SSG Walter A. Cichon  
USA 26 August 1946  
1LT Donald W. Bruch, Jr.  
USAF 27 August 1941  
CWO Walter F. Wroblewski  
USA 28 August 1945

MSG Mike J. Scott  
USA 02 September 1932  
1LT Albert S. Graf  
USMC 08 September 1944  
Sp4 Walter E. Demsey, Jr.  
USA 17 September 1949  
SGT Donald Iandoli  
USA 19 September 1946  
CPT Ronald M. Mayercik  
USAF 23 September 1943

LCPL Theotis Collins  
USMC 27 September 1949  
SGT James L. Suydam  
USA 04 October 1948  
TSGT Donald K Springsteadah  
USAF 23 October 1932

SFC Joseph D. Puggi  
USA 21 November 1946

MAJ Phillip L. Mascari  
USAF 03 December 1944  
LT John B. Martin II  
USN 10 December 1945  
CPT Ronald L. Bond  
USAF 14 December 1947  
MAJ Richard R. Kane  
USMC 15 December 1942


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 82<sup>nd</sup> Airborne Div  
 9 May 41 - 21 Mar 64





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**SSGT Douglas Swanstrom, U.S. Army – Ellington, NY**

173 ABN BDE Lam Dong, South Viet Nam  
 6/3/47 – KIA 5/21/69  
 Vietnam Wall – Panel 24 W Line 72  
 “When you go home, tell them of us and say,  
 We gave our tomorrow, for your today!”  
 We will not forget – Memory Eternal!

*In Memoriam*

Allen N. Rhodes

SFC U.S. Army (Ret.)

November 9<sup>th</sup>, 1938 - May 6<sup>th</sup>, 2012



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## Vietnam Veterans of America Chapter 825 South Jersey

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VA Reverses Denial Of Benefits For Veteran In Agent Orange-Related Case  
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