

# VETERANS JOURNAL



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*Fall 2007 Issue*

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The information in this journal is being provided to make the veteran community aware of some current events, activities and veterans issues that are of mutual concern. From time to time, we will include some relevant information important enough to be repeated to insure that veterans and their families are aware of the full range of benefits and entitlements available to them.

## VA success story

Monday, August 20, 2007 3:28 AM

By [Gail Martineau](#)

### THE COLUMBUS DISPATCH



### ERIC ALBRECHT DISPATCH

**Performing tricks with a yo-yo, volunteer William Terrian, 26, entertains veteran Frank Reynolds, 82, at the VA Medical Center in Chillicothe. Terrian's father was a Vietnam veteran who received VA care, which inspired Terrian to pursue a nursing degree.**

CHILLICOTHE, Ohio -- They seem an unlikely pair, the 26-year-old

high-school dropout and the 82-year-old World War II veteran.

But William Terrian says there is nowhere he would rather be than the Veterans Affairs Medical Center, helping out and sharing time with patients such as Frank Reynolds.

Sometimes, Terrian and Reynolds swap stories of their lives, but mostly they just enjoy the sunny surroundings in comfortable silence.

When he finishes school in three years, Terrian hopes to offer more than companionship. He'd like to get a job at the VA as a nurse.

A few years ago, it would have been an unlikely goal.

Terrian was living near Flint, Mich., hanging out with other slackers in a world mired in apathy and drugs. In May 2004, he and his father decided a change in scenery was needed. They moved to Chillicothe, where a Marine friend of his father's had a trailer for sale.

"We wanted to get away from all that and kind of start over," Terrian said. "Flint was going downhill, and

the only thing left was crime and drugs. I just lacked motivation and enthusiasm for life."

Now he thrives in his new surroundings. He recently earned his high-school equivalence diploma, enrolled in college and found a steady job. Even more, he now has a plan for his future.

The epiphany came with a price.

Terrian's father, Joe, a decorated Marine who fought in Vietnam, learned he had diabetes this year at the VA center. It was there that the younger Terrian found his path.

Despite recent revelations of shoddy facilities and spotty care in the nation's military health-care system, Terrian said he was impressed by the way the nurses cared for his dad and the other patients.

Terrian said that because he did not follow his father into the military, he would like to serve those who did.

"I would get to give back to the men who have served and are serving."

In June, he graduated from Ross County's adult-education program.

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He was accepted into the National Adult Education Honor Society.

"He was always looking to dig deeper into whatever the subject was, not just take it at face value," said Kitty Brewer, an instructor and coordinator for the Ross County ABLE/GED program.

"He never let his life interfere with his pursuit of his GED," she said.

Terrian said Brewer helped him enroll in nursing school at the Chillicothe branch of Ohio University and helped him find a way to pay for college.

"She was a vital part of the growth at that time," Terrian said. "She helped me get my foot in the door and get the ball rolling."

Brewer said Terrian was even more of an inspiration.

"He makes me feel like it's worth coming here every day," she said. "He's the reward teachers look for."

With college starting Sept. 4, Terrian is focusing on his future.

He recently started a job with Kroger, stocking shelves in the evenings. But he spends most of his free time at the Chillicothe VA Medical Center.

"Making someone else happy makes me happy," he said. "I get to make the most of my time."

Along with his morning coffee with Reynolds, the two play board games. Terrian entertains him with yo-yo tricks he learned online in 1998.

"I'm re-teaching him how to play chess," Terrian said. "I try to interact

with the guys. I try to keep it positive."

Reynolds said he looks forward to Terrian's visits and thinks he has a bright future.

"He's a good conversationalist," he said. "It takes a certain person to be a nurse around this place. I think he'll make a wonderful nurse."



**23rd Fall Begins**



**8th Columbus Day**

**28th Daylight Savings Time Ends**

**31st Halloween**



**6th Election Day**

**11th Veterans Day**

**22nd Thanksgiving**

National Association For Uniformed Services (Update for June 2003)

**VETERANS NEWS**



WASHINGTON, D.C. - U.S. Senator Jim Inhofe (R-Oklahoma) today praised the passage by unanimous consent of his bill S.1877) clarifying U.S. law to allow veterans and servicemen not in uniform to salute the flag. Current law (US Code Title 4, Chapter 1) states that veterans and servicemen not in uniform should place their hand over their heart without clarifying whether they can or should salute the flag.

'The salute is a form of honor and respect, representing pride in one's military service,' Senator Inhofe said. 'Veterans and service members continue representing the military services even when not in uniform. 'Unfortunately, current U.S. Law leaves confusion as to whether veterans and service members out of uniform can or should salute the flag. My **legislation will clarify this regulation, allowing veterans and servicemen alike to salute the flag, whether they are in uniform or not.** 'I look forward to seeing those who have served saluting proudly at baseball games, parades, and formal events. I believe this is an appropriate way to honor and recognize the 25 million veterans in the United States who have served in the military and remain as role models to others citizens. Those who are currently serving or have served in the military have earned this right, and

their recognition will be an inspiration to others.'

**This Bill was passed July 25, 2007.** Let your veteran friends know about the Passage of this Bill.

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**Excessive thirst, extreme hunger, increased fatigue, irritability? Millions of Americans have these symptoms? What could it be?**



Diabetes is a growing problem in America, affecting an estimated 20.8 million people. The most common form – type 2 - accounts for 90 to 95 percent of all diagnosed cases. Unfortunately, almost one-third of those with type 2 diabetes don't know they have it, and millions more are unaware that they could be at risk.

### **LIFESTYLE CAUSES**

Scientific evidence shows a consistent link between poor nutrition, obesity and increased risk for diabetes. Our bodies turn most of the food we eat into glucose (sugar), the basic fuel for our cells. With every meal, the pancreas releases insulin, a hormone that helps move glucose into the cells so the body can use it properly. Type 2 diabetes usually begins as insulin resistance, a disorder in which the cells do not use insulin properly. As the body's need for insulin

increases, the pancreas gradually loses its ability to produce enough insulin to meet the increased demand. When glucose builds up in the blood, symptoms of diabetes may begin.

### **TIPS TO HELP KEEP DIABETES AT BAY**

A National Institute of Health study of individuals with pre-diabetes found that simple lifestyle changes reduce their risk of developing type 2 diabetes by 58 percent. To control your risk, consider the following.



1. **Eat right.** Be sure your diet includes lots of vegetables and fruits choose whole grain over processed grain products and drink water instead of sugar-sweetened drinks.
2. **Exercise.** Schedule 30 minutes of exercise into your routine five days a week.
3. **Lose weight.** Reducing your weight by 5 to 10 percent in combination with eating right and exercising may help you delay or avoid diabetes altogether.
4. **Control blood pressure.** Experts recommend reaching a blood pressure reading of 130/80 or below.
5. **Quit smoking.** Kicking the habit can improve your body's ability to use insulin properly.
6. **Talk to your doctor.** Discuss your risk factors for pre-diabetes and whether you should be tested.

### **ARE YOU AT RISK FOR DIABETES?**

Adults with diabetes have a high risk for heart disease, and are two to four times more likely to have a stroke. Diabetes is the leading cause of new cases of blindness among adults and end-stage kidney disease. Due to nerve damage, lower-limb amputations occur among people with diabetes.

You may be at a higher risk for type 2 diabetes if you have any of the following characteristics:

- Family history of diabetes
- Low activity level
- Poor diet
- Over 45 years old
- Excess body weight (especially around the waist)
- High blood pressure
- High cholesterol
- Previous diabetes during pregnancy or giving birth to a baby weighing more than nine pounds
- Certain ethnicity, including African-American, Hispanic-American and American Indian.

### **KNOW THE SYMPTOMS**

See your doctor if you experience these symptoms of diabetes:

- § Frequent urination
- § Excessive thirst
- § Extreme hunger
- § Increased fatigue
- § Irritability
- § Sudden vision changes
- § Tingling or numbness in hands or feet
- § Sores that are slow to heal

§ More infections than usual

For more information, go to [www.diabetes.org](http://www.diabetes.org).

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## GROUND BREAKING CEREMONY FOR NEW COUNTY COURTHOUSE

Central Crossing High School NJROTC from Grove City Ohio presented the colors at the ground breaking ceremony for the new county courthouse that will be located on the lots at Mound and High Streets, just north of the current county complex.

Franklin County Commissioners noted that the July 3, 2007 groundbreaking date is historically significant because after the original county courthouse was destroyed by fire in 1879, the cornerstone for a second courthouse was laid over 100 years ago, on July 3, 1887.

The new Courthouse will lead by example, utilizing high-performing, sustainable building materials that will save the county significant energy costs and minimize various forms of pollution. It will provide a healthy, productive and respectful work setting for employees, and for jurors whose civic service is a keystone to our judicial and democratic process.

(Color Guard from left to right: Amber Muncy, Bri Hurd, Caleb

Long, and Ben Harr)



## Nicholson to leave VA and Return to the Private Sector

### *Under his Leadership, VA Makes Strides in Health Care and IT Modernization*

WASHINGTON (July 17, 2007) -- Secretary of Veterans Affairs, Jim Nicholson announced today he has tendered his resignation to President George W. Bush, effective no later than October 1, 2007.

Under Nicholson's leadership, the Department of Veterans Affairs (VA) continued its evolution as a leader in health care innovations, medical research, education services, home loan and other benefits to veterans. He transformed the VA health care system to meet the unique medical requirements of the returning combatants from Iraq and Afghanistan.

In his letter of resignation, Nicholson praised and thanked the President for the honor of serving him and our Nation's veterans in this key post at such a "critical time in our nation's global war on terror."

"The VA is a dynamic organization dedicated to serving our nation's finest citizens – our veterans," Nicholson said. "It has been an honor and privilege to lead the VA during this historic time for our men and women who have worn the uniform. We have accomplished so much and the VA is always striving to improve our services to veterans."

Nicholson said he wants to return to the private sector. "This coming February, I turn 70 years old, and I feel it is time for me to get back into business, while I still can." He said he has no definite plans at this time.

He also addressed an assembled group of Washington VA employees and those watching around the country on VA's closed-circuit television. In his message to employees, Nicholson told them how privileged he felt to have worked with them in fulfilling our nation's promises and obligations to

its veterans.

"VA has come a long way in meeting the growing needs and expectations of our veterans and you deserve the credit," Nicholson said.

Nicholson, a Vietnam Veteran, was sworn in as Secretary of Veterans Affairs on February 1, 2005.

During Secretary Nicholson's tenure at the Department of Veterans Affairs:

- Directed each of our veterans of the global war on terror who come to the VA for any kind of care to be carefully screened for brain damage (TBI) and post traumatic stress disorder (PTSD).
- Hired 100 new Outreach Coordinators to provide services to returning OIF/OEF veterans. The new coordinators are located in Vet Centers throughout the country especially near our military processing stations.
- Created a new Advisory Committee on OIF/OEF Veterans and their families to advise him on ways to improve programs serving OIF/OEF veterans.
- Directed the Veterans Benefits Administration to give priority to Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF) veterans in its compensation and pension claim system.
- Launched a major information technology transformation in the VA with the way it uses and safeguards personal and health information of veterans.
- Created a new Office of Operations, Security, and Preparedness to deal with emergency planning and security.

- Initiated the overhaul of the VA's vast contracting and acquisitions systems.

- Created a blue ribbon Genomic Research Advisory Committee to use the VA's expansive medical data holdings to advance the science of predictive medicine.

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- Commenced a major campaign to reduce the high rate of diabetes in veterans.

- Launched a national effort in the Veterans Health Administration to eradicate staph infections in VA hospitals.

- Approved 82 new Community-Based Outpatient Clinics (CBOC) to bring VA top notch care closer to the veterans who have earned it.

- Created a new multi-campus Nursing Academy through partnership with the nursing schools throughout the country to help address a shortage of nurses within the VA and nationwide.

- Directed the hiring of suicide prevention counselors at each of VA's 153 facilities to strengthen one of the nation's largest mental health programs. He also established a 24-hour national suicide prevention hotline that will be operational by the end of July 2007.

- Hired 100 new Patient Care Advocates to help severely injured veterans and their families manage VA's system for health care and financial benefits.

- Led the President's recent Task Force on Returning Global War on Terror Heroes to improve the delivery of federal services and benefits to Global War on Terror service members and veterans.

"This is a very big Government agency that, among many other things, sees over 1 million patients a week in its health care system, and is doing a world class job,"

Nicholson said. "The American people can feel proud about the way we are treating our veterans. The President and the Congress have been very supportive and for that I am grateful as well."

Nicholson thanked the President, "he has given me terrific opportunities to serve my country and under his strong and supportive leadership, it has been a real privilege."

Nicholson left the private business world over 10 years, where he ran a successful residential development and construction company. He was elected Chairman of the Republican National Committee in January 1997. Immediately prior to becoming Secretary, he served as the U.S. Ambassador to the Holy See.



## **Injured Iraq veterans sue for better care**

Class -action lawsuit names Department of Veterans Affairs

Monday July 23, 2007  
By Hope Yen  
Associated Press  
Columbus Dispatch

WASHINGTON- Frustrated by delays in health care, a coalition of injured Iraq war veterans is accusing VA Secretary Jim Nicholson of breaking the law by denying them disability pay and mental-health treatment.

The class-action lawsuit against the U.S. Department of Veterans Affairs, filed today in federal court in San Francisco, seeks broad change in the agency as it struggles to meet growing demands from veterans returning home from Iraq and Afghanistan.

Suing on behalf of hundreds of thousands of veterans, it charges that the VA has failed warriors on several fronts: providing prompt disability benefits; adding staff to reduce wait times for medical care; and boosting services for post-traumatic stress disorder.

The lawsuit also accuses the VA of deliberately cheating some veterans by allegedly working with the Pentagon to misclassify PTSD claims as pre-existing personality disorders to avoid paying out benefits. The VA and Pentagon have generally denied such charges.

VA spokesman Matt Smith said Monday he could not comment on a pending lawsuit. But he said the agency is committed to meeting the special needs of Iraq war veterans.

"Through outreach efforts, the VA ensures returning Global War on Terror service members have access to the widely recognized quality health care," he said. "VA has also given priority handling to their monetary disability benefit claims."

The lawsuit comes amid intense political and public scrutiny of the VA and Pentagon following reports of shoddy outpatient care of injured soldiers at Walter Reed Army Medical Center and elsewhere.

"Unless systemic and drastic measures are instituted immediately, the costs to these veterans, their families, and our nation will be incalculable, including broken families, a new generation of unemployed and homeless veterans, increases in drug abuse and alcoholism, and crushing burdens on the health-care delivery system," the complaint states.

It asks that a federal court order the VA to make immediate improvements that would speed disability payments, ensure fairness in a ward and provide more complete access to mental-health care.

Earlier this month, a federal appeals court in San Francisco issued a

strong rebuke of the VA in ordering the agency to pay retroactive benefits to Vietnam War veterans who were exposed to Agent Orange and contracted a form of leukemia.

"The performance of the United States Department of Veterans Affairs has contributed substantially to our sense of national shame," the opinion from the 9<sup>th</sup> U.S. Circuit Court of Appeals read.

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Nicholson abruptly announced last week he would step down by Oct. 1 to return to the private sector. He has repeatedly defended the agency during his 2 1/2 -year tenure while acknowledging there was room for improvement.

More recently, after high-profile suicide incidents in which families of veterans say the VA did not provide adequate care, Nicholson pledged to add mental-health services and hire more suicide-prevention coordinators.

Some veterans say those measures aren't enough. In the lawsuit, the note that government investigators warned as early as 2002 that the VA needed to fix its backlogged claims system and make other changes.

Yet, the lawsuit says, Nicholson and other officials still insisted on a budget in 2005 that fell \$1 billion short, and they made "a mockery of the rule of law" by awarding senior officials \$3.8 million in bonuses despite their role in the budget foul-up.

Today, the VA's backlog of disability payment is between 400,000 and 600,000, with delays up to 177 days to process an initial claim and an average of 657 days to process an appeal. Several congressional committees and a presidential commission are now studying ways to improve care.

"While steps can and will be taken in the political arena, responsibility

for action lies with the agency itself," said Melissa W. Kasnitz, managing attorney for Disability Rights Advocates, in a telephone interview. Her group is teaming up with a major law firm, Morrison & Foerster, to represent the veterans.

"We don't believe the problems will be fixed by the VA if we wait for them," she said. "In the meantime, it is veterans who risk their lives for our country who are suffering the consequences."

The lawsuit cites violations of the Constitution and federal law, which mandates at least two years of health care to injured veterans.

The veterans groups involved in the lawsuit are Veterans for Common Sense in Washington, which claims 11,500 members, and Veterans United for Truth, based in Santa Barbara, California, with 500 members.

### To Learn More:

Disability Rights Advocates:

[www.dralegal.org](http://www.dralegal.org)



## Disability Benefits For Wounded Warriors

Military service members can receive expedited processing of disability claims from Social Security. Benefits available through Social Security are different than those from the Department of Veterans Affairs and require a separate application.

The expedited process is used for military service members who become disabled while on active military service on or after October 1, 2001, regardless of where the disability occurs.

The following are answers to questions most people ask about

applying for disability benefits. Knowing the answers to the questions will help you understand the process

### What types of benefits can I receive?

Social Security pays disability benefits through two programs: the Social Security disability insurance program, which pays benefits to you and certain members of your family if you are "insured," meaning that you worked long enough and paid Social Security taxes; and the Supplemental Security Income program, which pays benefits based on financial need.

This fact sheet is about the Social Security disability program. For more information about the Social Security disability program, ask for Disability Benefits (Publication No. 05-10029). For information about SSI disability program for adults, ask for Supplemental Security Income (Publication No. 05-11000). These publications also are available online at [www.socialsecurity.gov/woundedwarriors](http://www.socialsecurity.gov/woundedwarriors)

### What is Social Security's definition of disability?

By law, Social Security has very strict definition.

To be found disabled:

- You must be unable to do substantial work because of your medical condition(s); and
- Your medical condition(s) must have lasted, or be expected to last, at least one year or be expected to result in death.

While some programs give money to people with partial disability or short-term disability, Social Security does not.

### How does military pay affect eligibility for disability benefits?

You cannot engage in substantial work activity for pay or profit, also known as substantial gainful activity. **Active duty status and receipt of military pay does not, in itself, necessarily prevent**

## payment of disability benefits.

Receipt of military payments should never stop you from applying for disability benefits from Social Security. If you are receiving treatment at a military medical facility and working in a designated therapy program or on limited duty, we will evaluate your work activity to determine your eligibility for benefits. The actual work activity is the controlling factor and not the amount of pay you receive or your military duty status.

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### How do I apply?

You may apply for disability benefits at any time while in military status or after discharge, whether you are still hospitalized, in a rehabilitation program or undergoing out-patient treatment in a military or civilian medical facility. You may apply online at [www.socialsecurity.gov/woundedwarriors](http://www.socialsecurity.gov/woundedwarriors), in person at the nearest Social Security office, by mail or by telephone. You may call 1-800-772-1213 to schedule an appointment. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778. Online we have a "disability starter kit" available to help you complete your application.

### What do I need to apply?

Claimants and their representatives must provide information and documentation about age, employment, proof of citizenship, Social Security coverage and information regarding all impairments and related treatment. Social Security will make every reasonable effort to help you get the necessary medical evidence.

**Important:** *You should file the application for disability benefits as soon as possible with any documents readily available.* Do not delay filing because you do not have all the documents mentioned below.

- Original or certified copy of your birth certificate or proof of U.S. citizenship or legal residency if foreign born;

- Form DD 214, if discharged from the military service;
- W-2 Form or income tax return from last year;
- Military or workers' compensation to include proof of payment;
- Social security numbers of your spouse and minor children;
- Checking or savings account number, if you have one;
- Name, address, and phone number of a contact person, in case you are unavailable; and
- Medical records that you have and/or that you can easily obtain from all military and civilian sources.

### How does Social Security make the decision?

Your claim is sent to a state Disability Determination Services (DDS) office that makes disability decisions. The state has medical and vocational experts who will contact your doctors and other places where you received treatment to get your medical records. The state agency may ask you to have an examination or medical test. You will not have to pay the costs of any additional exams or tests you are asked to take. If the state does request an examination, **make sure you keep the appointment.**

### How long does it take for a decision?

The length of time it takes to receive a decision on your disability claim can vary, depending on several factors, but primarily on:

- The nature of your disability;
- How quickly we obtain medical evidence from your doctor or other medical sources; and
- Whether it is necessary to send you for a medical examination in order to obtain evidence to support your claim.

### Can I do anything to speed the decision?

Yes. You can speed the decision by being prepared for your interview and having information available regarding all the doctors you have seen and your work history. It is very important that you notify Social Security of any address changes that you have while we are working on your claim or any changes in doctors, hospitals, or out patient clinics where you are receiving treatment. This will help to prevent delays.

After the application for Social Security disability benefits is received, it is uniquely identified as a military service member claim, and it is expedited through all phases of processing, both in Social Security and the DDS. Disability claims filed online also are expedited.

### Can my family get benefits?

Certain members of your family may qualify for benefits based on your work. They include:

- Your spouse, if he or she is age 62 or older;
- Your spouse, at any age, if he or she is caring for a child of your who is younger than age 16 or disabled;
- Your unmarried child, including an adopted child, or, in some cases a stepchild or grandchild. The child must be younger than age 18 or younger than age 19 if in elementary or secondary school full time; and
- Your unmarried child, age 18 or older, if he or she has a disability that started before age 22. (The child's disability also must meet the definition of disability for adults.)

**NOTE:** In some situations, a divorced spouse may qualify for benefits based on your earnings if he or she was married to you for at least 10 years, is not currently married and is at least age 62. The money paid to a divorced spouse does not reduce your benefit or any benefits due to your current spouse or children.

Contacting Social Security

For more information and to find copies of this publication, visit our website at [www.socialsecurity.gov](http://www.socialsecurity.gov) or call toll free, 1-800-722-1213 (for the deaf or hard of hearing, call our TTY number, 1-800-325-0778.) We can answer specific questions from 7a.m. to 7 p.m., Monday through Friday. We can provide information by automated phone service 24 hours a day.

We treat all calls confidentially. We also want to make sure you receive accurate and courteous service. That is why we have a second Social Security representative monitor some telephone calls.

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**NATIONAL ASSOCIATION FOR**  
**UNIFORMED SERVICES**  
**NAUS WEEKLY UPDATE FOR**  
**SEPTEMBER 14, 2007**

## **VA Distorts Report to Congress on Patient Wait Times, Says Inspector General**

NAUS shares the concerns expressed by Sen. Daniel Akaka, Chairman of the Veterans' Affairs Committee, about a report from the Department of Veterans Affairs Inspector General (OIG) that says VA repeatedly understated data on waiting times for injured veterans seeking medical care.

Chairman Akaka said that the Inspector General's report demonstrates VA "continues to skew" information reported to Congress that nearly all primary and specialty care appointments were scheduled within 30 days or less. He called the report on patient waiting times "disturbing," especially in light of the fact that a similar report on wait times was issued by the OIG in 2005.

The OIG report contradicts VA claims that 96 percent of all veterans seeking primary care and

95 percent of all veterans seeking specialty care were seen within 30 days of their desired dates. The OIG found that veterans waited 30 days or less for only 75 percent of them.

Additionally, OIG found VA's electronic waiting lists were incomplete, with 10 facilities understating lists by more than 53,000 veterans, of whom 62 percent had waited more than 30 days for a scheduled appointment.

NAUS is determined to work with the Chairman and other champions of veterans health care to resolve the appointment problem, eliminate lengthy waiting times and improve access for sick and disabled veterans. And we fully agree with the Chairman's statement, "VA's underreporting of waiting times and backlog volumes makes it harder to identify problem facilities and allocate resources effectively."

The OIG examined 700 outpatient appointments for primary and specialty care scheduled for October 2006 at 10 VA medical facilities in the following cities: Atlanta; Birmingham; Columbia; San Antonio; Dallas; Temple, Texas; Cincinnati; Detroit; Indianapolis; and Chillicothe, Ohio.

Read the OIG report at [www.va.gov/oig](http://www.va.gov/oig).

**NATIONAL ASSOCIATION FOR**  
**UNIFORMED SERVICES**  
**NAUS WEEKLY UPDATE FOR**  
**SEPTEMBER 7, 2007**

## **Senate Passes MilCon/VA Bill**

On Thursday, the Senate passed the Military Construction/VA spending bill (H.R. 2642) by a vote of 92-1.

The bill provides \$21.6 billion for military construction accounts, \$391 million more than the President requested and \$3.6 billion above last year's level. It would also

provide \$43 billion in discretionary funding for VA, which is \$3.6 billion more than asked. The VA portion mainly aims to accommodate the medical needs of veterans and reduce the backlog in benefits claims. Emphasis is given to veterans with severe trauma and brain injuries, geriatric care for older veterans and research into prosthetics and the use of artificial limbs.

In addition, the bill addresses funding for military construction infrastructure requirements as well as the health care and benefits for veterans. The construction funding will prepare the military for the rebasing of nearly 70,000 troops, mainly from Germany and South Korea that will be moving back home over the next five to six years. It will also fund BRAC additions to bases and take care of the needs of a base that is going to be closed.

Though the bill is \$4.1 billion more than the requested, the President has indicated that he would sign it despite some concerns with more than 60 member-requested earmarks in the bill. Differences between the House version, passed before the August recess, and the Senate version will be sorted out in conference committee.

## **TMOP Member Choice Center**

NAUS commends MG Elder Granger, head of the TRICARE Management Authority for making it easier for TRICARE beneficiaries to change their prescriptions from their local pharmacies to the TRICARE Mail Order Pharmacy (TMOP) with the recent launch of the new Member Choice Center (MCC). A quick phone call or click of a mouse is all that's needed for military families and retirees to begin receiving prescriptions by mail. By using this new service, not only will the beneficiary obtain TMOP enrollment assistance, but the MCC will actually contact the physician to obtain new prescriptions and forward them to the TMOP for

processing, making the switch from retail to mail order virtually effortless for the beneficiary.

Beneficiaries don't have to download forms or wait to have forms mailed; they can go to the "My Benefit" portal on [www.tricare.mil](http://www.tricare.mil) or to [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) to complete the registration. There's also the option to call the MCC at 1-877-363-1433 to switch from the retail program to TMOP. To view the complete press releases go to <http://www.tricare.mil/pressroom/news.aspx?fid=310>.

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## **Congress Working on Improving Mileage Reimbursement Rate**

As part of the MilCon/VA spending bill, the Senate approved an amendment by Sen. John Tester (D-MT) that sets aside an additional \$125 million to raise the travel reimbursement rate paid to disabled veterans who have to travel long distances for VA health care. Separate legislation already passed by the Senate Veterans' Affairs Committee would increase the now 11-cents per mile rate to 28.5 cents. The final rate will be worked out in conference with the House.



**NATIONAL ASSOCIATION FOR  
UNIFORMED SERVICES**

**NAUS WEEKLY UPDATE FOR  
AUGUST 31, 2007**

## **Retro Pay Update**

Since last September the Defense Finance and Accounting Service (DFAS) and the Department of Veterans Affairs (VA) have been working on fixing problems with disabled military retiree retroactive pay, commonly called the VA Retro program. The program is designed to pay eligible military retirees any retroactive money due as a result of adjustments to Combat-Related Special Compensation (CRSC), Concurrent Retirement and Disability Payments (CRDP) and VA disability compensation.

As of August, more than 98,000 cases have been processed of the original 133,000 cases. To date, VA has paid \$133 million and DFAS has paid \$28 million with the average payment being \$1,638. Officials report that completion of all the original cases is anticipated no later than November 15.

Military retirees may call 1-877-327-4457 for issues concerning entitlement to VA Retro. Trained customer service representatives are available to answer questions on VA Retro Monday through Friday from 8:00 a.m. to 4:30 p.m. (ET). Questions concerning disability percentages should be directed to VA at 1-800-827-1000.

Additionally the latest issue of the DFAS Retiree Newsletter is out and can be read at <http://www.dfas.mil/rna-news/august2007.html>.



Before "The Caisson Song" was adopted as the official tune of the U.S. Army, it was the proud anthem of the U.S. Field Artillery Corps. During a long march in the Philippines, Lieutenant Edmund L. "Snitz" Gruber overheard an officer roar "Come on! Keep 'em Rolling!" Gruber, whose relative, Franz, composed the Christmas Song "Silent Night," was suddenly inspired and that night wrote the now-famous melody. Fellow soldiers helped with the lyrics and in almost no time, all six regiments of the U.S. Field Artillery had adopted "The Caisson Song" as a popular marching tune.

During the last days of World War I, senior artillery leaders wanted to make "The Caisson Song" official, and mistaking the piece as composed during the Civil War, allowed bandmaster John Phillip Sousa to incorporate most of the song into his own composition "The U.S. Field Artillery March." The song became a chart-topper during World War I, selling 750,000 copies. Discovering Gruber actually wrote the melody, an embarrassed but innocent Sousa made certain Gruber received his royalties. In 1948, the Army held a nationwide contest to find an official song. After four years of unsuccessful results and nearly 800 submitted scores, the Adjunct General's office decided to recycle "The Caisson Song." H.W. Arberg arranged the U.S. Army song, naming it "The Army Goes Rolling Along." The Army copyrighted the song in 1956.

***"All of us denounce war—  
all of us consider it man's  
greatest stupidity. And yet  
wars happen, and they  
involve the most passionate  
lovers of peace because  
there are still barbarians in  
the world who set the price  
for peace at death or  
enslavement and the price  
is too high."***

~ Ronald Reagan ~



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