

May 1, 2022

Electromagnetic Warfare

March Russian Attack in Ukraine Shut Down by SpaceX Starlink

Russia's halting efforts to conduct electromagnetic warfare in Ukraine show how important it is to quickly respond, and immediately shut down, such attacks, Pentagon experts said 20 APR. But the U.S. needs to get much better at its own EW rapid response, they said during the C4ISRNET Conference Wednesday — and can learn a lot from how the private sector has handled these situations. Brig. Gen. Tad Clark, director of the Air Force's electromagnetic spectrum superiority directorate, said modern wars will increasingly involve electromagnetic warfare, particularly to shape the battlefield when conflicts begin.

Dave Tremper, director of electronic warfare for the Office of the Secretary of Defense, pointed to SpaceX's ability last month to swiftly stymie a Russian effort to jam its Starlink satellite broadband service, which was keeping Ukraine connected to the Internet. SpaceX founder Elon Musk steered thousands of Starlink terminals to Ukraine after an official sent him a tweet asking for help keeping the besieged country online. "The next day [after reports about the Russian jamming effort hit the media], Starlink had slung a line of code and fixed it," Tremper said. "And suddenly that [Russian jamming attack] was not effective anymore. From [the] EW technologist's perspective, that is fantastic ... and how they did that was eye-watering to me."

The government, on the other hand, has a "significant timeline to make those types of corrections" as it muddles through analyses of what happened, decides how to fix it and gets a contract in place for the fix. "We need to be able to have that agility," Tremper said. "We need to be able to change our electromagnetic posture to be able to change, very dynamically, what we're trying to do without losing capability along the way." Redundancy is also critical so the U.S. could keep operating on another system if an EW attack succeeded at knocking one out, Tremper said.

The U.S. needs to think a lot more innovatively when it comes to building new EW equipment, Clark said. It won't be enough to just buy upgraded versions of legacy systems, he said — the U.S. has to come up with new systems that allow for much greater resilience and speed. This includes incorporating artificial intelligence and machine learning into next-generation systems to be able to respond faster, he said. Increased use of digital engineering can also help the military model new equipment with a computer and work out the kinks before going through the time-consuming typical acquisition and testing process. Clark said the Air Force's in-development Compass Call, the EC-37B, is a prime example of how digital engineering is transforming how the service approaches new electromagnetic warfare capabilities. Software coders and engineers are working with Compass Call operators on the ground to figure out creative ways to jam enemy signals, Clark said.

Russia's invasion of Ukraine has taught the U.S. a great deal about the sophistication and reliability of Russian equipment, they said, and their troops' ability to carry out missions in a synchronized way. In particular, Tremper said, it has shown how important it is to properly train the personnel assigned to carry out electromagnetic warfare operations. Trying to carry out EW while moving forward inside the territory you're invading, and not in a secure location, makes it even trickier. "It's a very hard problem, if you don't have well-trained operators," Tremper said. "The degree of coordination and synchronization of these types of operations is such that the undertrained operator will have a harder time pulling off those types of events successfully." Tremper said the Pentagon expected a "much stronger" EW showing from Russia — but cautioned that isn't to say all of Russia's efforts have failed. [Source: DefenseNews | Stephen Losey | April 20, 2022 ++]

Space 'A' Travel

Update 20: Its Back After 2-Year COVID-19 Pause

After more than two years of a COVID-19 pandemic-induced pause on Space Available travel, Defense officials have brought back the benefit. Space-A allows eligible travelers to fly on military or military-contracted aircraft at little or no cost — if space allows. Defense officials issued a memo to the services and to U.S. Transportation Command on Friday, lifting all restrictions. The limitations were placed on Space-A travel on March 21, 2020, to help limit the spread of COVID-19. This reopening allows Space-A travel on military and DoD-contracted aircraft for uniformed service members, retirees, dependents and reservists to travel within the continental U.S. and outside the continental U.S.

Travel and COVID-19 requirements change frequently and depend on the country of travel. Medical screening protocols may still apply for travelers going overseas. Those traveling to a foreign country should check for any testing requirements within the Electronic Foreign Clearance Guide at <https://www.fcg.pentagon.mil/fcg.cfm>. Although a federal judge has struck down the mask mandate for airplane travel, TRANSCOM has directed that the mask requirement will continue, until a policy change is received from defense officials, according to the Air Mobility Command website.

AMC-operated air terminals, units and passenger terminals were to start accepting eligible Space-A travelers effective 22 APR, and units should continue to train and take other actions to build capability, according to a memo from Air Mobility Command officials. Units and passenger terminals are directed to take necessary actions based on assessment of capabilities, to restore full servicing by May 13. Travelers always should be flexible, as there is no guarantee a seat will be available going to or from a destination. DoD regulations set the requirements for which passengers have priority. For more information, including locations of Space-A terminals,

visit <https://www.amc.af.mil/AMC-Travel-Site> . Information is also available at militaryonesource.mil.

In related news, temporary Patriot Express flights will begin operating out of Joint Base Lewis-McChord in Washington to Kadena Air Base, Okinawa, Japan, from May 16 to Sept. 30, AMC officials have announced. These additional government contracted flights are in response to increased airlift requirements to support U.S. Forces Japan and U.S. Indo-Pacific Command, officials said. [Source: MilitaryTimes | Karen Jowers | April 25, 2022 ++]

DoD Housing Program

Update 08: Military Families Still Suffer From Lack Of Response to Mold, Leaks

After pleading guilty to fraud for how it operated its military privatized housing, Balfour Beatty Communities continued to engage in the same practices that had landed it in legal trouble years earlier, according to a new Senate investigation. The report, “**Mistreatment of Military Families in Privatized Housing**,” is the result of an eight-month study by the Senate Permanent Subcommittee on Investigations into Balfour Beatty’s operations at Fort Gordon, Georgia and Sheppard Air Force Base, Texas.

The findings are the subject of a 26 APR subcommittee hearing where service members, a spouse and a military family housing advocate are expected to testify about living conditions in Balfour Beatty housing at Fort Gordon and Sheppard Air Force Base. Officials from Balfour Beatty are also expected to testify. In December, Balfour Beatty Communities pleaded guilty to one count of major fraud against the United States, following a Justice Department investigation of the company’s practices from 2013 to 2019.

The company was sentenced to pay \$65 million in criminal fines and restitution, serve three years of probation, and work with an independent compliance monitor for three years. “Instead of promptly repairing housing for U.S. servicemembers as required, BBC lied about the repairs to pocket millions of dollars in performance bonuses,” Deputy Attorney General Lisa O. Monaco said at the time of the sentencing. According to the new Senate report, the subcommittee alleges those practices continue. Investigators “found that Balfour’s practices since 2019 at the bases it examined mirror Balfour’s practices between 2013 and 2019 that led to its December 2021 guilty plea for fraud,” the report states.

Subcommittee investigators reviewed more than 11,000 pages of records from Balfour Beatty, and additional documents from military families and former employees. They interviewed more than a dozen military family members. They reviewed medical records and analyses from physicians who treated military families, and information from 11 current Balfour Beatty employees, and received briefings from defense officials, Government Accountability Office officials and advocacy groups. One finding was that the staff at Fort Gordon “frequently ignored or delayed responding to urgent requests from military families to address conditions such as mold and roof leaks that threatened the families’ health and safety,” according to the report.

The report describes the experiences of eight military families. One Army wife described her experience at Fort Gordon beginning in May, 2020 when the family noticed their roof was leaking and reported it to Balfour Beatty. The maintenance staff decided an outside contractor was needed, but the family waited for months. The leak continued, and caused a section of the ceiling in a hallway to collapse on Aug. 14, 2020. On Sept. 29, she wrote an email to Balfour Beatty: “Four months later and still no contractors have yet to be sent to my home.... We are now 30+ days into having the ceiling cave in, And nothing has been done about it to date. I have yet to hear from the facilities manager in any capacity. I have called him multiple times and sent the video to him and the supervisor the night it happened. A leak is a life, health, and safety issue in and of itself, so I am pretty confident this hole falls into the same category.”

The Senate investigation began in August, when Sen. Jon Ossoff (D-GA), chairman of the subcommittee, visited Fort Gordon and heard from service members and families about issues in their housing, which is owned and operated by Balfour Beatty Communities. That company is responsible for housing at 55 Army, Navy and Air Force installations. Officials from Balfour Beatty Communities have not received a copy of the report, a spokesperson said. But the company does “take issue with the suggestion that the problems that were the subject of the [Department of Justice] resolution have continued,” she said, in a statement to Military Times.

“The company has put in place rigorous new compliance and assurance procedures to prevent such behavior. In addition, it has implemented strict mold control procedures, and has devoted a great deal of time, effort and money to ensure that work orders are promptly entered into [the electronic maintenance work order system.] “Finally, the company always responds to maintenance requests promptly.” Although some other privatized housing companies have also been criticized for ongoing issues with military housing, no others were named in the report. Information was not available from the subcommittee on whether there will be similar investigations.

According to the Senate report, other families reported issues with leaks and mold, and the subcommittee found evidence of missing mold work orders and other inconsistencies. Balfour Beatty failed to ensure the accuracy of its work order data at Fort Gordon, the report alleges.

The reality of families' experiences is different from the work history of the homes, investigators contend. "These incidents appear to point to corporate oversight weaknesses where various parts of the business may not be adequately, effectively or accurately entering critical data" into the work order database, the report states. The subcommittee investigators also found examples since late 2019 that failures to properly remediate mold growth in military housing "subjected medical vulnerable spouses and children" to mold exposure that was "deemed by their physicians to pose significant health risks."

The focus of this report is to use the families' stories "to shine a light to expose the continued practices of Balfour Beatty," a subcommittee staff member said in a background briefing to reporters. "The company has continued to engage in very similar practices" that put families' health and safety at risk, he said. This includes throughout the two years following the Justice Department investigation.

The report notes that while the investigation focused primarily on eight families at Fort Gordon and Sheppard Air Force Base, as a case study, the information gathered shows that many other families experienced similar issues. In addition the advocacy group Armed Forces Housing Advocates has helped 350 families deal with problems related to Balfour Beatty's military housing operations, since May, 2021. Those problems range across the seven states where Balfour Beatty has those operations. The report and hearing are the first steps in the process of investigating and holding Balfour Beatty accountable, a subcommittee staff member said. "This isn't going to be an issue that goes away the day after the hearing," he said.

Congress has been focusing on this issue for several years. In the fiscal 2020 National Defense Authorization Act, lawmakers mandated comprehensive reform provisions to address pervasive issues with mold, rodents and other health, safety and environmental hazards in privatized military housing. Military families testified about frustrations over inability to get some of the private companies to fix the problems, and the lack of assistance from their military leadership on some bases. Some military families have sued their privatized housing landlords over the last several years because of the issues of mold, rodents, water leaks, and problems with repairs. [Source: MilitaryTimes | Karen Jowers | April 26, 2022 ++]

DoD Housing Program

Update 09: Subcommittee Hearing on New Senate Investigation Report

Amid ongoing complaints from military families, lawmakers and advocates are questioning whether Balfour Beatty Communities should be trusted to provide housing for service members

after admitting to a major scheme to defraud the government in their operations. During a congressional hearing 26 APR, senators pressed company officials for answers in the wake of a new report that alleges continued mistreatment of military families, even after a Department of Justice fraud investigation led to a December guilty plea by Balfour Beatty, \$65 million in fines and penalties, and three years of probation.

The results of the new eight-month probe by the Senate Homeland Security and Governmental Affairs permanent subcommittee on investigations are “alarming and disturbing,” said Sen. Jon Ossoff, D-Georgia, the panel’s chairman. The results point to “grave risks to the health and safety of service members and their families,” he said. “They reveal, in my view, neglect, misconduct and abuse that persisted even after Balfour Beatty pled guilty to a scheme to defraud the U.S. between 2013 and 2019.” The Senate investigation centered on Balfour Beatty communities at Fort Gordon, Georgia, and Sheppard Air Force Base, Texas, but the company operates military housing at 55 Army, Navy and Air Force installations in 26 states, encompassing about 43,000 homes and 150,000 residents.

Many of the same housing problems brought to light more than three years ago and addressed with congressional reforms in 2019 continue to plague military family housing managed by Balfour Beatty. “How can we get this under control?” asked Sen. Ron Johnson (R-WI), ranking member of the subcommittee. A housing advocate called for removal of Balfour Beatty from military privatized housing. “We believe ending the partnership with Balfour Beatty is the only way to ensure the readiness of our service members and the safety of their families,” said Rachel Christian, chief legislative officer of the nonprofit Armed Forces Housing Advocates. She said her organization has worked extensively with families that have encountered problems with the company.

“Balfour Beatty has already admitted to defrauding the government, but it’s not just the government that has suffered in this case; it’s service members and their families,” Christian said. “They’re the ones being forgotten, pushed aside and made sick by a company that continues to choose profits over people.” When asked later to respond to the accusation that Balfour Beatty chooses profits over people, a Balfour Beatty official called it “an unfair characterization.” “Our people make mistakes, but to suggest that the error rate is indicative of widespread broken business is totally unfair,” said Richard Taylor, president of facility operations, renovations and construction for Balfour Beatty Communities. About one third of the company’s 1,400 employees are former or retired military, or military spouses.

But Ossoff repeatedly pressed Taylor with the question: “Why should we believe your assurances when your company engaged in a six-year-long scheme to defraud the U.S.?” The recent investigation includes evidence of work orders being changed and families’ repeated requests for help not being answered, he said. “I reject that suggestion that it’s systemic failure,” Taylor said. “Things go wrong. We don’t always get it right the first time. We’re not perfect. ...

What's important for us is that we understand where our shortcomings are and we take action to correct those deficiencies." Taylor asserted that Balfour Beatty is worthy of remaining in a position of trust. He referred to information provided to subcommittee staff, the military services and DoD officials about how the company has changed its business operations over the past several years. "Results demonstrate we're taking this very seriously, we're taking proactive steps to ensure we don't repeat the mistakes of individuals that worked at the company at that time."

An Army captain and an Air Force technical sergeant testified about the problems their families have had in Balfour Beatty housing during the two years since privatized housing reforms were enacted into law. "My daughter's skin, once youthful and supple, is now reptilian in nature," said Army Capt. Samuel Choe, whose family moved into their home at Fort Gordon in August 2019. The girl, now 10, sometimes wakes up in the middle of the night with her hands bloody from scratching in her sleep, he said. She developed a potentially fatal mold allergy and has been diagnosed with severe atopic dermatitis, which, when less concentrated, is more commonly known as eczema.

These problems didn't appear until they moved into their house at Fort Gordon, he said. Doctors have told the family that the daughter could become seriously ill or die if exposed to prolonged periods of black mold, he said. It is a potentially a lifelong illness now, and her condition has not improved since they moved to South Korea. She received injections of the powerful drug Dupixent every two weeks from July 2021 until February — a drug with a retail cost averaging between \$3,000 to \$5,000 per injection, he said. He's concerned that if he leaves the military before retirement, he'd have difficulty paying for a treatment that could cost \$70,000 to \$100,000 per year.

Choe said he fervently brought up his concerns about the mold, including visible mold in the bathroom and in their children's rooms, to Balfour Beatty staff at Fort Gordon. Despite assurances, those concerns weren't addressed. He was told not to submit work orders in the online portal, but to deal directly with Balfour Beatty management at Fort Gordon. Balfour Beatty denied him a move to another house on post, he said, and when he sought to break the lease, Balfour Beatty resisted. Only when his own chain of command intervened was he allowed to terminate the lease early, in February 2021, without penalty, he said.

In the investigative report compiled by the subcommittee staff, a footnote states that the Choe family entered into a settlement agreement with Balfour Beatty in March 2022 without any admission of liability by either side. Asked about Choe's testimony, Taylor responded, "we have a different perception of what transpired." "We have a hard time drawing the conclusion that's there's a direct correlation between the condition of the home and the daughter's medical condition."

He also said he denies that the issues of mold weren't addressed over a long period of time. He said the house was inspected twice and no evidence of mold was found. He said to his knowledge there were no photos of mold existing in the home; to his knowledge the doctor didn't visit the home personally in regard to mold questions; and to his knowledge the doctor wrote a letter in late June 2020, but it was presented to the Balfour Beatty team in October 2020. "I feel if there was a life, health, safety issue, we would have removed that family so we could remediate. I feel we followed all EPA and CDC guidelines," said Paula Cook, vice president of transformation for Balfour Beatty Communities.

Air Force Tech. Sgt. Jack Fe Torres testified that after his family moved into their house at Sheppard Air Force Base on Aug. 4, 2020, his wife and three children started experiencing a variety of medical symptoms ranging from severe hair loss and skin rashes to breathing issues, nausea, headaches and fungal infections. After realizing they felt better when they were outside the home, and finding some moisture problems in the home, they believed there must be mold, he said. In March 2021, a technician repairing their hot water heater forgot to isolate the water and gas valves, causing the house to smell of gas, and water to gush out into the mechanical room and the hallway, saturating the carpets. Balfour Beatty didn't adequately remove the moisture, and mold started to grow in places they couldn't see, he said.

Over the next months, as they reported issues with water intrusion and mold, their problems were not addressed, he claimed. The issues continued, and work orders were closed before being completed. The classification of type of repair was also changed, he said. Torres has served as a heating, ventilation and air conditioning (HVAC) technician in the Air Force for 13 years. "I work with work orders all the time," he said. "I know if a customer puts in a request for a work order, the title should not be changed, and it should not be closed before completion. ... That's how it's done in the Air Force, not close it and open a new one."

Taylor said the company doesn't tolerate anyone falsifying work-order information. One of the actions Balfour Beatty took in response to the fraud complaint was to change the work-order system so that local employees can't make adjustments to them. "At the time, there was too much opportunity for those that use the system to manipulate the data," he said. He acknowledged that a portion of an employee's compensation was tied to their performance; now it's tied to customer satisfaction. "We worked with the [work-order portal] provider to make sure local sites have no opportunity to change data," he said. "If there's a recognized error in the work order, local sites can't make adjustments. It has to be approved at a [vice president] level. And if we make a change, we let the military partners know."

Ossoff said the subcommittee will continue to seek remedies for these issues. "Our military personnel stateside and abroad sacrifice continually in service to this nation, as do their families. They deserve the very best. It's of utmost importance that they be provided with safe housing,

and that there be accountability by [DoD] and by those companies responsible for providing that housing.” [Source: MilitaryTimes | Karen Jowers |April 27, 2022 ++]

Cybersecurity

Update 04: US Military’s Data Privacy Vulnerabilities Exemplified in Ukraine

Amid the artillery strikes and armored assaults, several quieter aspects of Russia’s invasion of Ukraine require closer attention, including targeted phishing and malicious data mining. Russian operators, or at least their supporters, have flooded the inboxes of Ukrainians, particularly military service members, with malware-laden email. This tactic can be used to distribute disinformation and amass personal data to further their effort of compiling lists of Ukrainians for detention and harm. Similarly, thousands of text messages have reportedly been sent to local police and military members. This risk is not unique to Ukraine, and U.S. leaders must take steps now to harden the United States and protect its service members against similar tactics.

It is the new normal for military service members and veterans to be considered high value targets in the information war. Russian disinformation efforts have already targeted Americans with tactics like creating fake accounts for individual veterans and veteran service organizations such as Vietnam Veterans of America on social media. But the threat is not limited to social media. There are significant risks to military operations due to data collected for targeted advertising. This data can be used to deliver misinformation and disinformation, and can even amplify propaganda if bad actors purchase or access the data and weaponize it.

Name, service identifier and address may be covered as personally identifiable information (PII) under some laws, potentially mitigating this problem. But it is easy to identify people with simple information from their cell phones, whether that comes from ad identifiers or the phone number itself. Ad identifiers can be aggregated with other tracking information by numerous entities, from online advertisers to data brokers, to reveal patterns of daily life such as where someone lives and their political preferences. If this were only about selling sneakers, it would be less of a risk. But when this data becomes a vector to target and harass individuals, it is a national security concern.

The implications are severe when directed at the military. And this is not hypothetical — service members have already been targeted and face digital privacy concerns. For example, one service member was falsely identified as patient zero at the start of the COVID-19 outbreak, which led to a torrent of attacks online against her.

And the threat expands when companies like ID.me, which sell targeted advertising, gathers lists of service members and veterans. Service members usually show their identification card for military discounts, but now some companies require enrollment through ID.me instead of showing a physical ID. Controversies around the accuracy of ID.me data and issues with facial recognition already led one federal agency to withdraw its requirement to use it to access government services.

Linking biometric data and even publicly available information with service data creates a target of opportunity for malign actors looking to identify and target service members and their families. Service members are waking up to this threat, even if the services remain hesitant to address it. Service members increasingly use apps like Signal for texting about work even though this is a violation of Department of Defense (DoD) policy. But using commercially available apps means trusting the app developer, which brings its own risks to operational security as the tracking of Russia's military activities in Ukraine demonstrates.

DoD's response that personnel should be using an approved method misses the fact that most service members do not have access to government-issued devices. To move toward increased security and privacy, three steps must be taken.

- Congress should either act on federal data security and privacy legislation that specifically protects service member data or pass stand-alone legislation. Data privacy legislation has been on hold for years, but the conflict in Ukraine demonstrates that protecting individuals becomes a national security issue when full-scale hostilities begin. Legislation should at least govern how civilian companies collect and sell information on service members and their immediate families. This could be a foundation for uniform data privacy and security measures for all Americans.
- The military also needs to better educate the force on the risks of social media and how companies collect service member data. For example, TikTok is already banned from government devices, yet countless service members use it on their personal devices — sometimes displaying themselves in military uniform. TikTok's privacy policy states voice and other biometric information can be retained, and it uses ad identifiers as well as location information. And while this is from a Chinese company, U.S.-based companies present risks too, because sensitive information can be gleaned from the data. To address this, the military should limit the tracking of users on DoD networks and work with companies that collect and sell service member data to improve security collaboratively.
- Ultimately, the DoD must embrace privacy as a national security priority. New technology should be developed so purely civilian products are not needed to cover DoD gaps. Something simple like an approved secure messaging app that can be used on personally owned devices without significant hassle would help. The DoD needs to ensure that there

are no service members left without access to necessary systems, which could leave them unprotected, and should improve product usability to avoid less secure commercial alternatives from being used. The military overall needs to take a more expansive view of privacy beyond PII, which despite monotonous training requirements, frequently isn't that well protected.

The United States should act now to better protect our service members and their families, veterans and national security overall. As the tragic situation in Ukraine demonstrates, the threats present in the information warfare space will only expand. [Source: C4ISRNet | Jessica Dawson & Brandon Pugh (Opinion) | April 14, 2022 ++]

Military Medical Malpractice

Soldiers' Mother Wants to Know Why He Died Alone

In the afternoon of Jan. 21, 2020, Pvt. Caleb Smither was found dead in his barracks room at Fort Bragg, North Carolina. Smither was assigned to the maintenance platoon of the 37th Brigade Engineer Battalion, part of the 82nd Airborne Division's 2nd Brigade Combat Team. Just 19 years old, Smither had been at Fort Bragg for a little over seven weeks. It was the first day back from a four-day weekend and Smither had not been accounted for that day. Smither had spent the previous week reporting to sick call and Womack Army Medical Center with severe headaches, nausea and sensitivity to light, for which he was prescribed medication and placed on quarters, after hitting his head on the radiator of a vehicle in the motor pool.

Shortly before 3 p.m. Smither's team leader, a specialist, asked the duty desk at the barracks for the keys to Smither's room, according to a redacted Army Criminal Investigation Division (CID) report obtained by Task & Purpose. There, they discovered Smither's body on the floor of the barracks room. According to the CID report, one of the soldiers present checked for a pulse, but it was fruitless: Smither was dead and had been for some time. It was the first time anyone had actually seen or checked on Smither in at least five days — and his family is demanding the Army answer: why?

At some point in early January 2020, Smither was working on a piece of equipment known as a Deployable Universal Combat Earthmover, or "DUCE" with another soldier when he hit his head on the radiator. According to the private who was with Smither, he rested briefly after the injury and then returned to work. There was some confusion as to when Smither was initially injured. Some soldiers told CID investigators that he hit his head on Jan. 9. Others said it may have been later, on Jan. 13. Regardless, the other soldier who had been working with Smither on the "DUCE" told CID investigators that Smither seemed fine immediately after hitting his head,

but soon began to show signs of distress. “The next day his head seemed much worse. He was squinting, rubbing his head where it hurt, rubbing his eyes,” reads the soldier’s statement given to CID.

That soldier, who had known Smither since advanced individual training, told CID investigators that he called her in the early morning hours on Jan. 14, leaving a voicemail in which he was in tears because the pain in his head was unbearable. In the morning, she went to Smither’s barracks room and placed some shirts soaked in cold water on his head as a compress to ease the pain. That morning was also the first time Smither went to sick call. When his team leader arrived to take him to Womack Army Medical Center, Smither was reportedly wearing goggles and saying that his eyes were bothering him and he was unable to sleep.

Smither’s condition was noted as “improved” when he was discharged and he was prescribed ibuprofen and acetaminophen – pain medication – and ordered to rest for 24 hours, to treat his headaches. On the ride back, his team leader told CID investigators that Smither looked “pale and shivering.” Smither asked the specialist to drive slowly. On the way back to the barracks, Smither’s team leader cranked the heat up in his truck and bought him Powerade to help with the dehydration.

The next day, Smither arrived for formation at 6:30 a.m., but he was in such bad shape that he was once again taken to Womack Army Medical Center. After being given water, Smither began throwing up. He was given a CT scan, more medication, and once again told to stay in his room and rest. The drive back to the barracks would be the last time anyone could definitively say that they had seen Smither.

In interviews with CID investigators, the soldiers in Smither’s unit gave conflicting accounts of what happened next. Smither’s platoon leader and first sergeant described him as a motivated and well-disciplined soldier to CID investigators, but there seemed to be little or no plan to account for Smither after he returned from the hospital. A simple question such as who, if anyone, was supposed to check on a soldier who had gone to the hospital for two days in a row, was initially met with different answers or admitted lies. In a military that is built around tight-knit units and teams, the fact that a visibly ill soldier could remain in his room for at least five days with not one person checking on him suggests a breakdown in leadership.

“A soldier shows up to formation wearing goggles, and no one checks on him for the entire weekend?” said Daniel Maharaj, the lawyer representing Smither’s family. “What’s astonishing is that people knew there was something wrong with him, but didn’t do anything to help him. Why is there no process to check on people on quarters?” Maharaj said. “He died surrounded by his fellow soldiers but no one cared to check on him.”

A corporal who was not in Smither's direct chain of command but who told investigators that he knew Smither, said that he heard around the company that Smither's room "smelled like shit." He told investigators that he called Smither on Friday, Jan. 17, but also said that he had been drinking that night and hadn't used his personal phone to make the call. The corporal was also one of the people Smither's team leader told CID he had lied to about seeing him over the weekend. For whatever reason, the CID report seems to cast some suspicion on the corporal, noting that he was "getting irritated when he was asked questions about when he last saw PV2 Smither." He is the only individual on the CID report who is remarked upon as seeming defensive in any way to questioning. "That's one of those questions we want to get answers on," said Maharaj. "This person was clearly prominent enough for CID to look at, so what is his role in the case?"

Phone records from Smither's phone provided by his family's lawyer show that he didn't call or text anyone after 15 JAN. The mention of the smell from Smither's room, however, seems to indicate that there was some knowledge of a problem in the barracks that weekend. Smither's roommate, a specialist, told CID investigators that he didn't know Smither that well. They were on different schedules, and ultimately just two junior enlisted soldiers who had only been roommates for about six weeks. They had their own rooms and shared a common space and that was it — Smither was just another private who might occasionally accompany him to Buffalo Wild Wings to watch a UFC fight and who happened to be sick.

On 16 JAN the roommate cleaned the common area and placed some clothes at Smither's door. After being out of the barracks for a couple of days, the soldier told investigators that he sprayed the common room with Febreze that Sunday, 19 JAN, noting a foul smell. He thought that he may have heard some noises from Smither's room, but wasn't sure. On 20 JAN he sprayed Febreze again, but the smell was only getting worse. Early morning 21 JAN, the day Smither's body would finally be discovered, the roommate left for his morning shift at the dining hall, with the clothes he had left by Smither's door still untouched.

Five months after Smither's death, an Army autopsy concluded that it was meningitis that killed him. According to the Centers for Disease Control, meningitis causes a bacterial or viral infection around the protective membranes of the brain and spinal cord. The symptoms include fever, headache, nausea and sensitivity to light. It can also be brought on by head trauma. Smither received his meningitis vaccine when he joined the Army, in May 2019. While the Womack Army Medical Center first diagnosed Smither with post-concussion syndrome, the final report from the Army concluded that Smither had died from a meningitis infection, although the disease, which is highly contagious, had apparently not infected anyone else in the 37th Combat Engineer Battalion, even those who had driven him to sick call and treated his fever. "Wouldn't such a contagious disease raise a red flag?" said Smither's mother, Heather Baker. 'I just want some accountability for what happened to Caleb'

In 1947, Army Lieutenant Rudolph Feres died when his barracks caught fire due to a defective heating system. Feres' widow filed a lawsuit, alleging negligence on the Army's behalf. The case went all the way to the Supreme Court, ultimately being decided in the 1950 case *Feres v. United States*. The court ruled that the military could not be held liable "for injuries to members of the armed forces arising from activities incident to military service." It established a precedent called the Feres Doctrine, barring service members and their families from suing the military for negligence or wrongdoing that occurred in the course of a service member's duties — though critics of the doctrine argue that it has been interpreted far too broadly.

For decades, here's how it worked: If Army doctors overlooked a soldier's stomach cancer diagnoses for four years, then the government would not be liable. If a Navy corpsman was given a deadly amount of painkillers after a surgery, the government was not liable. If an Army nurse was doused in gasoline and lit on fire by a coworker she had reported as feeling unsafe around, the government would not be liable. And in Smither's case? Until very recently, the Army would have been free from any liability.

In 2019, Congress passed an act allowing servicemembers to bring medical malpractice claims against the military. It was called the Stayskal Act, named after Sgt. 1st Class Richard Stayskal, an Army Green Beret whose lung cancer was misdiagnosed for months while stationed at Fort Bragg. Stayskal's misdiagnosis occurred at Womack Army Medical Center — the same base hospital where Smither was seen. Maharaj and Smither's family filed a claim for medical negligence in January of this year. It is still pending.

The Department of Defense did not respond to inquiries as to how many claims had been filed or paid out since last year when the Pentagon issued new guidance on medical malpractice claims. However, a briefing given by the Department of Defense general counsel and provided to Task & Purpose by the family's attorney showed that, between the Air Force, Army, and Navy, of the roughly 350 claims that have been filed, only two settlement offers had been accepted, one for \$10,000 and one for \$20,000. At the same time, the Department of Defense has reportedly been allotted \$400 million to cover such claims. Smither's mother said, "I just want some accountability for what happened to Caleb". [Source: Task & Purpose | Max Hauptman | April 14, 2022 ++]

Military Medical Malpractice

Soldiers' Mother Wants to Know Why He Died Alone

In the afternoon of Jan. 21, 2020, Pvt. Caleb Smither was found dead in his barracks room at Fort Bragg, North Carolina. Smither was assigned to the maintenance platoon of the 37th Brigade Engineer Battalion, part of the 82nd Airborne Division's 2nd Brigade Combat Team. Just 19 years old, Smither had been at Fort Bragg for a little over seven weeks. It was the first day back from a four-day weekend and Smither had not been accounted for that day. Smither had spent the previous week reporting to sick call and Womack Army Medical Center with severe headaches, nausea and sensitivity to light, for which he was prescribed medication and placed on quarters, after hitting his head on the radiator of a vehicle in the motor pool.

Shortly before 3 p.m. Smither's team leader, a specialist, asked the duty desk at the barracks for the keys to Smither's room, according to a redacted Army Criminal Investigation Division (CID) report obtained by Task & Purpose. There, they discovered Smither's body on the floor of the barracks room. According to the CID report, one of the soldiers present checked for a pulse, but it was fruitless: Smither was dead and had been for some time. It was the first time anyone had actually seen or checked on Smither in at least five days — and his family is demanding the Army answer: why?

At some point in early January 2020, Smither was working on a piece of equipment known as a Deployable Universal Combat Earthmover, or "DUCE" with another soldier when he hit his head on the radiator. According to the private who was with Smither, he rested briefly after the injury and then returned to work. There was some confusion as to when Smither was initially injured. Some soldiers told CID investigators that he hit his head on Jan. 9. Others said it may have been later, on Jan. 13. Regardless, the other soldier who had been working with Smither on the "DUCE" told CID investigators that Smither seemed fine immediately after hitting his head, but soon began to show signs of distress. "The next day his head seemed much worse. He was squinting, rubbing his head where it hurt, rubbing his eyes," reads the soldier's statement given to CID.

That soldier, who had known Smither since advanced individual training, told CID investigators that he called her in the early morning hours on Jan. 14, leaving a voicemail in which he was in tears because the pain in his head was unbearable. In the morning, she went to Smither's barracks room and placed some shirts soaked in cold water on his head as a compress to ease the pain. That morning was also the first time Smither went to sick call. When his team leader arrived to take him to Womack Army Medical Center, Smither was reportedly wearing goggles and saying that his eyes were bothering him and he was unable to sleep.

Smither's condition was noted as "improved" when he was discharged and he was prescribed ibuprofen and acetaminophen – pain medication – and ordered to rest for 24 hours, to treat his headaches. On the ride back, his team leader told CID investigators that Smither looked "pale and shivering." Smither asked the specialist to drive slowly. On the way back to the barracks,

Smither's team leader cranked the heat up in his truck and bought him Powerade to help with the dehydration.

The next day, Smither arrived for formation at 6:30 a.m., but he was in such bad shape that he was once again taken to Womack Army Medical Center. After being given water, Smither began throwing up. He was given a CT scan, more medication, and once again told to stay in his room and rest. The drive back to the barracks would be the last time anyone could definitively say that they had seen Smither.

In interviews with CID investigators, the soldiers in Smither's unit gave conflicting accounts of what happened next. Smither's platoon leader and first sergeant described him as a motivated and well-disciplined soldier to CID investigators, but there seemed to be little or no plan to account for Smither after he returned from the hospital. A simple question such as who, if anyone, was supposed to check on a soldier who had gone to the hospital for two days in a row, was initially met with different answers or admitted lies. In a military that is built around tight-knit units and teams, the fact that a visibly ill soldier could remain in his room for at least five days with not one person checking on him suggests a breakdown in leadership.

"A soldier shows up to formation wearing goggles, and no one checks on him for the entire weekend?" said Daniel Maharaj, the lawyer representing Smither's family. "What's astonishing is that people knew there was something wrong with him, but didn't do anything to help him. Why is there no process to check on people on quarters?" Maharaj said. "He died surrounded by his fellow soldiers but no one cared to check on him."

A corporal who was not in Smither's direct chain of command but who told investigators that he knew Smither, said that he heard around the company that Smither's room "smelled like shit." He told investigators that he called Smither on Friday, Jan. 17, but also said that he had been drinking that night and hadn't used his personal phone to make the call. The corporal was also one of the people Smither's team leader told CID he had lied to about seeing him over the weekend. For whatever reason, the CID report seems to cast some suspicion on the corporal, noting that he was "getting irritated when he was asked questions about when he last saw PV2 Smither." He is the only individual on the CID report who is remarked upon as seeming defensive in any way to questioning. "That's one of those questions we want to get answers on," said Maharaj. "This person was clearly prominent enough for CID to look at, so what is his role in the case?"

Phone records from Smither's phone provided by his family's lawyer show that he didn't call or text anyone after 15 JAN. The mention of the smell from Smither's room, however, seems to indicate that there was some knowledge of a problem in the barracks that weekend. Smither's roommate, a specialist, told CID investigators that he didn't know Smither that well. They were on different schedules, and ultimately just two junior enlisted soldiers who had only been roommates for about six weeks. They had their own rooms and shared a common space and that

was it — Smither was just another private who might occasionally accompany him to Buffalo Wild Wings to watch a UFC fight and who happened to be sick.

On 16 JAN the roommate cleaned the common area and placed some clothes at Smither's door. After being out of the barracks for a couple of days, the soldier told investigators that he sprayed the common room with Febreeze that Sunday, 19 JAN, noting a foul smell. He thought that he may have heard some noises from Smither's room, but wasn't sure. On 20 JAN he sprayed Febreeze again, but the smell was only getting worse. Early morning 21 JAN, the day Smither's body would finally be discovered, the roommate left for his morning shift at the dining hall, with the clothes he had left by Smither's door still untouched.

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Air Force One

Update 06: Boeing Should Have Rejected Trump’s Deal



Boeing should have rejected then-President Donald Trump’s proposed terms to build two new Air Force One aircraft, the company’s CEO said 27 APR. Dave Calhoun spoke on the company’s quarterly earnings call, just hours after Boeing disclosed that it has lost \$660 million transforming two 747 airliners into flying White Houses. “Air Force One I’m just going to call a very unique moment, a very unique negotiation, a very unique set of risks that Boeing probably shouldn’t have taken,” Calhoun said. “But we are where we are, and we’re going to deliver great airplanes.”

Then-President Trump, an aviation enthusiast, took a keen interest in the new presidential jets, involving himself in everything from contract negotiations to the plane’s color scheme. As

part of the deal, Boeing signed a fixed-price contract that required the company, not taxpayers, to pay for any cost overruns during the complicated conversion of the two airliners. Then-Boeing CEO Dennis Muilenburg, who was dismissed in December 2019, personally negotiated the Air Force One terms with Trump at the White House and the former president’s Mar-a-Lago club in Florida.

In February 2018, the Air Force signed a nearly \$4 billion deal with Boeing to convert two 747-8 airliners into a VIP configuration with conference rooms, sleeping quarters, communications gear, and amenities that allow the president to work as if he were at the White House. Along with other costs related to building the planes—for instance, a new hangar complex at Joint Base Andrews just outside of Washington—the Air Force One program is expected to cost taxpayers \$5.3 billion. When the deal was finalized, the White House claimed Trump’s negotiations saved taxpayers \$1.4 billion. Boeing’s struggles to build the new planes might in fact save taxpayers more than that when the planes are finally delivered.

Company officials say their problems include a dispute with a subcontractor and the kind of coronavirus-related supply-chain and workforce issues being experienced across the defense and aerospace sector. Boeing blamed the most recent \$660 million loss on “higher supplier costs, higher costs to finalize technical requirements and schedule delays.” The Air Force’s fiscal 2023 budget proposal said the new planes might not be ready to fly a president until at least 2026. [Source: Government Executive | Marcus Weisgerber | April 28, 2022 ++]

VA Scam Protection Effort

Update 01: Targeting Pensions, Benefits Raise Worry Among VA Officials

Veterans Affairs officials are warning about an uptick in scam attempts targeting veterans’ pensions that could result in serious financial problems for elderly or infirm individuals. “Fraudsters are getting smarter, more deliberate and more engaged. They’re getting better,” said Charles Tapp II, chief financial officer for the Veterans Benefits Administration. “We are seeing a lot more instances where veterans — particularly seniors — are getting fraudulent calls ... So we certainly are making our senior veterans more aware about pension poaching.”

Earlier this year, the Federal Trade Commission reported that about 2.8 million Americans filed fraud complaints in 2021, the most on record. The agency estimated that consumers lost more than \$5.8 billion to scams last year. VA officials said older veterans with military pensions or other regular department payouts can be attractive targets for would-be-thieves. Pension theft can occur when an outside party — a stranger or someone known to a veteran, such as a

caregiver — convinces veterans to shift their payouts to a new bank account or a separate financial product (annuities or trusts, for example), preventing them from accessing the money.

Tapp said when veterans' bank accounts are changed without explanation, it triggers an internal check within VA to ensure that fraud is not occurring. But other theft schemes are more difficult to detect, and may only be corrected after months of malfeasance have already occurred. In a series of recent outreach efforts, department officials are reminding veterans that VA does not charge to process applications for benefits and services, and it is against the law for an outside group or attorney to charge claimants for preparing benefits applications. "No one can guarantee that the VA will award you a benefit or service, not even someone who is VA accredited," a department fact sheet on pension poaching states. "Only the VA can determine eligibility and award benefits and services."

Tapp said if individuals are confused about available services or benefits, they can contact VA's National Call Center at 1-800-827-1000. If someone calls about veterans benefits and asks for personal information, the interaction is likely a scam. "If you are unsure [about an unsolicited call], please hang up and call that number back," he said. "We record and log every call ... so [staff] should be able to confirm that they just called and provide any information veterans need. "We want to make sure that veterans know that they are in control of their information, particularly when they're engaging with us." More information on potential scams is available at VBA's <https://www.benefits.va.gov/BENEFITS/factsheets/limitedincome/pension-poaching.pdf>. [Source: Stars & Stripes | Leo Shane III | April 6, 2022 ++]

VA Presumptive Burn Pit Diseases

Nine Respiratory Cancers Added To List of Exposure Illnesses

Veterans Affairs officials this week will add nine respiratory cancers to the list of illnesses presumed caused by burn pit exposure, easing the path veterans suffering from those conditions have to take to get disability benefits. The move follows promises by administration officials last fall to speed up care and benefits for veterans exposed to burn pit smoke in Iraq, Afghanistan and other overseas locations over the last 32 years. In a statement, VA Secretary Denis McDonough called the move overdue. "Veterans who suffer from rare respiratory cancers associated with their service deserve the very best America has to offer, but they've had to wait for the care and benefits they deserve for far too long," he said. "That ends now."

“With these new presumptives, veterans who suffer from these rare respiratory cancers will finally get the world-class care and benefits they deserve, without having to prove causality between their service and their condition.” The nine new conditions are:

- Squamous cell carcinoma of the larynx;
- Squamous cell carcinoma of the trachea;
- Adenocarcinoma of the trachea;
- Salivary gland-type tumors of the trachea;
- Adenosquamous carcinoma of the lung;
- Large cell carcinoma of the lung;
- Salivary gland-type tumors of the lung;
- Sarcomatoid carcinoma of the lung;
- Typical and atypical carcinoid of the lung;

The policy applies to veterans who served in the Southwest Asia theater of operations beginning Aug. 2, 1990, to the present, or in Afghanistan, Uzbekistan, Syria or Djibouti beginning Sept. 19, 2001, to the present. That includes all veterans who served in the Gulf War, the Iraq War and the War in Afghanistan. VA officials did not say how many individuals would be affected by the new policy, although they did classify the cancers as “rare” in their announcement.

The issue of presumptive benefits for burn pit victims has been a priority for advocates in recent years because of the difficulty in linking many health problems to the toxic smoke present at many overseas bases. Under most cases, veterans must show a direct link between their medical condition and military service in order to receive disability benefits, which can amount to several thousand dollars a month. But when VA grants presumptive status for an illness, that skips the need for proof of connection, making the path to getting disability payouts easier. In the past, VA has approved presumptive status for things such as exposure to Agent Orange in Vietnam, a known carcinogen.

Last August, for the first time, the department approved presumptive status for veterans suffering from three illnesses — asthma, rhinitis and sinusitis — related to burn pit smoke overseas. As of last month, VA officials had processed about 16,500 new claims related to those burn pit injuries, totaling \$36 million in retroactive benefits. The White House also promised additional research into other medical problems believed linked (but never conclusively proven) to the toxic smoke produced when military members disposed of a variety of waste in open-air trash fires.

VA officials said the decision to add the nine new conditions came after researchers found “biological plausibility between airborne hazards and carcinogenesis of the respiratory tract” and that “the unique circumstances of these rare cancers warrant a presumption of service

connection.” Both McDonough and President Joe Biden have said they will look to go even further with the burn pit presumptives, but are limited somewhat by VA benefits regulations. “Supporting our veterans is a critical part of the Unity Agenda I proposed for our nation,” Biden said in a statement. “No matter where we live or who we voted for in the last election, we all agree that we should serve our veterans as well as they have served us.

“My administration will continue to do everything in its power to support our nation’s veterans, and I urge Congress to pass bipartisan legislation to comprehensively address toxic exposures and further deliver the vital benefits our veterans have earned. I will sign it immediately.” Congressional leaders are considering sweeping legislation that would grant presumptive disability status for an even broader list of medical conditions believed linked to burn pits. Department officials are expected to reach out to veterans who have filed burn pit claims in the past to inform them of the changes. Individuals can also get more information on the benefits through the VA web site. [Source: MilitaryTimes | Leo Shane III | April 25, 2022 ++]

Claiming VA Benefits

Protection from Predatory Claims Practices

America’s post-9/11 wounded veterans are facing significant financial challenges. According to the latest Annual Warrior Survey from Wounded Warrior Project®, 42% of warriors registered with the nonprofit reported in summer 2021 not having enough money to make ends meet in the past 12 months. In addition, 13% of WWP warriors reported being unemployed at this time, compared to 5% of the U.S. general population.

Thankfully, many veterans have financial support through their benefits obtained via the Department of Veterans Affairs. America’s wounded veterans have earned their benefits through their sacrifice and service. However, the current process of applying for disability, rating changes, or pensions with VA can be confusing and daunting. Veterans often rely on trained specialists who help them navigate this claims process. That is why organizations like WWP and the Veterans of Foreign Wars provide VA-accredited professionals to ensure that benefits claims are filed properly and efficiently — and veterans never pay a penny for this expert assistance.

Sadly, some non-accredited businesses seek to prey on our most vulnerable veterans and take advantage of this complicated process to make a quick buck. Some firms charge excessively for assistance in filing VA claims, even promising to increase disability ratings or to get veterans disability in the first place. This is especially bad if warriors are tricked into signing a contract.

COVID-19 only exacerbated these challenges through appointment cancellations and isolation. In this uncertainty, some veterans turned to the internet for answers, only to quickly be targeted by aggressive online ads and predatory tactics.

Veterans, their family members, and the public need to be aware of these methods and tricks so we can combat this issue together. Veterans should look out for some of the following tactics:

- Promises or guarantees to increase disability ratings and secure “X” amount percentage increases.
- Companies advertising services that are done faster or better than a veterans service organization or accredited agents.
- Requesting sensitive login credentials to access the veteran’s info through secure VA websites like eBenefits or VA.gov.
- Using confusing tactics or ambiguous language in contracts designed to mislead the veteran.
- Offering health consultation within their own network of doctors and telling veterans to forego VA exams for a faster decision.

If a veteran sees any of these red flags, they should immediately ask, “are these organizations accredited with VA?” If the answer is no or somehow ambiguous, or if an organization offers to help warriors with their claim but refuses to go on record with VA as their representative, veterans should work with someone else. Legally, only VA-accredited individuals and organizations should assist veterans and their families with benefits claims. When accredited organizations like VFW and WWP work with veterans, benefits specialists will never ask warriors to sign confusing contracts.

The only “contract” organizations will ask for is VA Form 21-22 (<https://www.va.gov/find-forms/about-form-21-22>) which not only puts us on record with VA as the advocate for a veteran, but also binds that organization to laws and regulations that protect warriors from predatory fees and contracts. At <https://www.va.gov/ogc/apps/accreditation/index.asp> VA provides a searchable database of free, accredited VSO representatives, attorneys, and agents to help veterans navigate the benefits process and avoid unscrupulous tactics. That list updates constantly and is one of the best ways that veterans and families can ensure they’re not getting scammed or preyed upon.

Outside of the veterans service organization and military service organization community, the American people can also be there for these warriors by helping spread the word about predatory practices and the numerous resources for reputable benefits claims assistance. We all want to ensure warriors get the benefits they’ve earned in a manner that honors their service. If you need assistance with your benefits claims, reach out to VFW, WWP, or another VA-accredited

organization. You're not alone, and it takes strength to ask for help. [Source: MilitaryTimes | Mike Stoddard & Ryan Gallucci | April 19, 2022 ++]

VA Long Term Care

Update 03: Plans to Keep Up With an Aging Veteran Population

One of MOAA's top health care priorities this year is prioritizing and accelerating access to caregiving support, as well as long-term and extended care programs and services. It's why MOAA supports the **Elizabeth Dole Home and Community Based Services for Veterans and Caregivers Act (H.R. 6823 | S. 3854)**, a comprehensive piece of legislation that will improve home and community-based services for veterans.

This legislation comes in response to growing demand for VA's long-term care (LTC), which increased 14% from FY 2014 to FY 2018, according to a 2020 Government Accountability Office (GAO) report. Spending also went up 33% in VA's 14 LTC programs over that timeframe; per the report, the VA projects demand will continue to grow, with spending set to double by 2037. Earlier this year, MOAA reported on VA's plans to establish more than 200 new facilities or programs targeting geriatric or extended care by the end of 2026 at every medical center. Veterans, like many Americans, prefer to age in place at home — they want their care to be in familiar, comfortable, less invasive surroundings.

The VA recognizes aging veterans need a health care system that values who they are, meets their unique needs, and provides the necessary care and quality services in a variety of settings. VA's Geriatrics and Gerontology Advisory Committee met the week of April 11 to get updates on the department's progress in its efforts to become an age-friendly health system and other initiatives to improve care and services to veterans, their caregivers, and families. Some updates from the meeting follow.

Geriatric Research, Education and Clinical Centers

About 8% of veterans were 65 and older in 1970, according to the VA, compared with 9.6% of the U.S. population. The department recognized the "age wave" of World War II veterans that would soon hit the VA health system. In 1975, the VA established six Geriatric Research, Education and Clinical Centers (GRECCs) to meet the rapidly growing older veteran population. GRECCs were designed to attract scientists, clinicians, and health science students to the field of geriatrics; increase knowledge and develop, test, and implement new models of care; and transmit acquired knowledge to health professionals in the Veterans Health Administration (VHA) who provide direct care to aging veterans.

Today, over half of VHA-enrolled veterans are 65 or older. As the number of clinicians with advanced training necessary to care for the elderly has declined since the mid-1990s, GRECCs are more important than ever. The VA is pushing education debt reduction and scholarships and clinical education programs to attract and retain geriatric professionals. The department is also redesigning its human resource practices to improve recruitment and onboarding of providers.

What's New?

Recognition as an Age-Friendly Health System: Three years ago, the VA set out to make the VHA, the largest health care system in the U.S., an age-friendly system, joining a movement led by the Institute for Healthcare Improvement. This movement is about health systems establishing evidence-based practices to meet individual needs rather than a one-size-fits-all approach. For veterans, this approach focuses on four key practices:

- Determining the personal goals and care preferences of each veteran.
- Using medication to better manage mobility and cognitive abilities.
- Preventing, treating, and managing dementia, depression, or other cognitive conditions.
- Ensuring veterans can move safely in their lives and do what matters most to them.

To date, the VHA has 51 medical centers officially recognized as age-friendly facilities. By FY 2025, it plans to have all 171 medical centers deemed age-friendly. Once facilities earn that designation, the VHA plans to continuously improve its programs and processes so it can provide the care veterans want, need, and deserve.

Expansion of Home and Community Based Services: This year, the VA started a large five-year expansion of several home and community-based care programs. The expansion will total \$165.8 million and is scheduled to end by FY 2026. These programs include:

- 70 Veterans Directed Care Programs
- 75 Home-Based Primary Care Programs
- 58 Medical Foster Home Programs

Redefining Elder Care in America Project: The VA is in the process of implementing a Redefining Elder Care in America Project (RECAP). The pilot project has two parts. First, the VHA will create a list of veterans at the highest risk for nursing home placement in the next two years using advanced analytics. Second, a geriatric coordinator will use the list to contact the veteran and caregiver proactively and assess needs or additional home or community care services required. The goal is to see whether such interventions will improve aging in place for veterans. The VA hopes to apply a similar construct to preventing or delaying nursing home care, lessening the caregiver burden, decreasing hospitalization rates and emergency room visits, or addressing other high-risk situations.

Expansion of Geriatrics and Palliative Care Expertise: Among the programs in place to strengthen this part of the VA workforce:

- **Workforce Initiatives**. The department has held several VA-trainee recruitment events at 28 VA medical centers to identify potential candidates to expand the workforce in geriatric and extended care services. There is a proposal in the works to raise the pay table for geriatrics and palliative care physicians, and the VA has initiated a workforce recruitment and retention task force to address all disciplines within the VHA.
- **Emergency Department Accreditation**. The VHA's geriatric emergency department transformation project aimed at providing interdisciplinary geriatric-oriented care for at-risk veterans has expanded to 62% of the 111 emergency departments. These facilities have achieved or are actively working toward Geriatric Emergency Department Accreditation by the American College of Emergency Physicians (ACEP). The VA is among the first health systems recognized by ACEP.
- **VA Community Living Centers (CLCs)**. VA is implementing a CLC resident satisfaction survey and developing a journey map to outline the veteran's path for care. Additionally, a pandemic plan has been distributed to the field that outlines the quality oversight process needed through the remainder of the COVID-19 pandemic. The Office of Geriatrics and Extended Care has partnered with the Office of Mental Health to provide suicide prevention training and is developing a toolkit for CLC field personnel.
- **State Veteran Home (SVH) Modernization**. Though not operated by the VA, SVHs receive significant funding resources for construction costs, ongoing maintenance, and grants and per diems to help reimburse costs for a veteran's care. Veteran costs vary based on service connection and the type of care needed. The VA has specific areas of oversight it must perform and it may establish sharing agreements with SVHs for resources and specialty care.

A Longer-Term Focus

The VA also has made veterans' long-term and extended care program a focus in its FY 2022-2028 Strategic Plan — for aging, frail, and end-of-life veterans of all ages. According to the plan, VA will implement six strategies to prepare for an expected increased number of veterans needing services by:

- Expanding home and community-based services (aging in place)
- Modernizing systems for health aging
- Modernizing and improving facility-based care
- Improving access with technology
- Increasing geriatric expertise

- Developing data definition and processes

Caregiving

Equally important to the VA are the 1.1 million caregivers supporting veterans and servicemembers. The department is expanding education, resources, supportive services, and other caregiver programs to support veterans and caregivers. The VA addresses this issue in its strategic plan, noting efforts to “partner with DoD and the veteran caregiver community and other organizations with interests in research on caregivers or caregiving to understand the challenges and develop practical solutions that improve the financial security, experience, outcomes and quality of life for veterans, servicemembers and their caregivers.”

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MOAA is committed to working with the VA and stakeholder groups to ensure the department achieves these outcomes. In a March 8 hearing before the Senate and House Committees on Veterans’ Affairs, MOAA urged Congress and the VA to “fast-track more support for long-term care facilities.” MOAA also urged funding and passage of the Elizabeth Dole Home and Community Based Services for Veterans and Caregivers Act as part of this goal. Contact your lawmakers today and request their support. You can learn more about H.R. 6823 | S. 3854, and send a letter to your legislators seeking their support, via MOAA’s Legislative Action Center at <https://moaa.quorum.us/campaign/39976>. [Source: MOAA Newsletter | René Campos | April 21, 2022 ++]

VA Yellow Ribbon Program

Update 01: Helps Some Post-9/11 Veterans Pay For More Expensive Schooling

If you served in the military after 9/11 and have an eye on continuing your education at a college or university where tuition costs exceed your Post-9/11 GI Bill benefit, the Yellow Ribbon Program might be able to help. The Department of Veterans Affairs program is specifically geared to veterans, or their dependents, interested in attending higher-priced private schools, graduate schools and international universities whose tuition and fees are higher than the maximum Post-9/11 GI Bill benefit. The program can also cover the higher fees charged to nonresidents at out-of-state universities.

The Yellow Ribbon GI Educational Enhancement Program, a provision of the Post-9/11 Veterans Educational Assistance Act of 2008, assists veterans in paying for educational expenses that exceed the maximum Post-9/11 GI Bill payments. Those limits change from year

to year because they are based on the annual average cost of U.S. undergraduate tuition. As of Aug. 1, the 2022-2023 maximum annual benefit will be capped at \$26,381. The Yellow Ribbon Program can, in certain circumstances, help veterans exceed this benefit cap to afford a more expensive undergraduate or graduate school. It can be complicated, but it's worth investigating. The program does not require that you attend full-time.

There are two key elements: The first is that you or your dependent must be Post-9/11 GI Bill eligible; second, the school you wish to attend must participate in the program. There may also be limitations on how many veterans can participate in the program at each school each year. Some universities, such as Cornell, have no limit to the number of undergraduates who can benefit from the program, but do have limits in their graduate schools. The early bird gets the worm. If you qualify and you're interested, don't procrastinate.

How it works

The universities who chose to participate with the VA in Yellow Ribbon agree to contribute up to 50% of their tuition costs that exceed the maximum Post-9/11 GI Bill benefit in a given year. How much depends on the individual school. The VA then matches that amount. Schools calculate your benefit by adding up all of your tuition and mandatory fees. They then subtract any aid received from other sources — such as scholarships, grants, and your Post-9/11 GI Bill tuition payment. Finally, your school applies its Yellow Ribbon benefit to the total amount calculated.

For example, if you wish to attend a participating university and the tuition is \$40,000 a year, the Post-9/11 GI Bill would pay for all but \$13,619 of that. If the university agreed to waive \$6,000 for Yellow Ribbon participants, and the VA matched that contribution, it would bring your yearly out-of-pocket tuition expenses to \$1,619. Each school has its own policies, and they may differ for undergraduate, graduate and doctoral programs at the same school. Differences may also apply to the type of school within a university that you wish to attend. So, the benefit for nursing school may differ from that offered to students at the engineering school. Each school is different, and you'll need to investigate thoroughly.

Who qualifies?

First, you must qualify for the Post-9/11 GI Bill at the 100% benefit level. The educational benefit covers your full tuition and fees at school, a monthly housing allowance and up to \$1,000 for books and supplies. To qualify for the maximum amount of this assistance, and to be eligible for the yellow Ribbon Program, recipients must have:

- Served at least 36 months on active duty and, if separated, received an honorable discharge;

- Served for at least 30 continuous days (without a break) on or after Sept. 11, 2001, and been discharged or released from active duty for a service-connected disability;
- Received a Purple Heart at any time after 9/11 and been honorably discharged after any amount of service.

Recipients may also qualify for the program if they are dependents taking advantage of the unused benefits transferred by an eligible veteran or if they are a Fry Scholar (eligible for the Yellow Ribbon Program on or after Aug. 1, 2018). Note that Active-duty service members, and the spouses of active-duty members who are using transferred benefits, do not currently qualify for the Yellow Ribbon Program, but changes to this stipulation are expected to occur in August.

Is your university a Yellow Ribbon school?

If you believe you qualify for the program, the next step is investigating whether or not your intended university is a Yellow Ribbon school. Refer to <https://www.va.gov/education/yellow-ribbon-participating-schools>. Only institutions of higher learning are eligible and they must choose to participate. Not all schools decide to sign up. If your intended university participates, it's imperative to contact the school to investigate whether it has exceeded its yearly maximum number of students, per its agreement with the department. The VA has a contract with each school limiting how many students it will cover at each school for each year. Enrollment is on a first come, first serve basis, and funds are limited. If all that works out, your school must certify your enrollment with the VA and provide the department with your Yellow Ribbon Program information.

How to apply for the program

Take these steps to apply for the Yellow Ribbon Program:

- First, apply for Post-9/11 GI Bill benefits. If you qualify, you'll receive a Certificate of Eligibility (COE);
- Submit your COE to your school's certifying official or to the financial aid, military liaison, or other appropriate offices;
- Ask to apply for your school's Yellow Ribbon Program;
- Wait for an eligibility determination and a decision on whether your school has already reached its maximum number of students for the program period;
- Maintain contact with your school regarding acceptance into the program and how much money you'll receive toward your tuition and fees.

Refer to https://www.benefits.va.gov/gibill/yellow_ribbon/yellow_ribbon_info_schools.asp for additional info. [Source: MilitaryTimes | Kristine Froeba| April 21, 2022 ++]

VA Covid Research

Expanding Into Long-Term COVID Illnesses Detrimental Effects

Veterans Affairs officials will expand their research into the long-term detrimental effects of COVID-19 even as they brace for the possibility of more short-term flare ups caused by the virus in the near future. On 25 APR, VA Secretary Denis McDonough said 17 VA sites have already established long-COVID care clinics, with 20 more on the way in coming months. Along with treating the small percentage of VA patients with lingering or recurring virus illnesses, the sites will also conduct research on the persistence and impact of the virus. “We’re at the forefront of long COVID research, making groundbreaking discoveries that will enhance understanding of this disease in veterans and non-veterans,” he told reporters during a press conference.

Dr. Elizabeth Brill, VA’s assistant under secretary for clinical health, said research so far has shown that COVID infections increase individuals’ risk of developing diabetes, heart disease and mental health disorders, even in mild cases. “VA offers a unique opportunity to study COVID because we have detailed longitudinal medical information on 6 million veterans,” she said. “We can compare health outcomes after COVID infection to those of similar patients who have not been infected, something many studies are unable to do.”

Officials said they have not seen any indication yet whether veterans are more likely to develop long-COVID or other COVID-related side effects. However, they did note that individuals who are older or who have pre-existing health conditions, which makes up much of the VA patient population, are more vulnerable to the virus than younger, healthier individuals. More than 624,000 VA patients and staff have contracted coronavirus over the last two years. At least 21,800 (3.5%) have died from virus-related illnesses, roughly twice the rate of the American public.

VA officials have seen a steady increase in active coronavirus cases in recent weeks, up above 4,000 over the weekend. That’s also up almost 40% in the last month, although still a small fraction of the record-high posted during the omicron wave earlier in January (nearly 78,000 daily cases). McDonough said the number of VA staff unable to work because of COVID infections or exposure passed 1,260 on 25 APR, up about 68% from two weeks ago. But that number, too, is far below the roughly 16,000 employees kept out of work at the height of the omicron surge. “But I am increasingly concerned about what we are seeing now,” he said.

Brill said officials are planning for “what we expect will be continued surges and dips over time” with coronavirus. That includes local contingency planning as numbers rise, and working

in advance to ensure that transmission rates remain low. The department also continues to require all employees to get vaccinated or be shifted to roles that limit exposure to patients and visitors. Despite threats of firings late last year, McDonough said so far only six employees have been dismissed for COVID-related reasons: one for refusing to disclose vaccination status, one for refusing COVID testing, and four for refusing to wear masks in facilities where they are mandated. VA officials did not disclose where those individuals were working or what roles they occupied.

While 98% of the VA workforce was already in compliance with Biden's order prior to the broader injunction, only 89% had been vaccinated—one of the lowest rates of any large federal agency. Nearly 1 million individuals have died from COVID-related illnesses since the virus first appeared in America in early 2020. [Source: MilitaryTimes | Leo Shane III | April 25, 2022 ++]

VA Fraud, Waste & Abuse

Reported 16 thru 30 APR 2022

Texas -- Johnathon Yates Boyd III of Katy, was sentenced to 12 months of probation and more than \$391,000 in restitution, and **Bryan Fred Woodson** of Beach City, was sentenced to 12 months of probation and more than \$553,000 in restitution for helping orchestrate a kickback scheme. The scheme involved physicians who were recruited to receive kickback payments in exchange for writing and referring expensive compounded drug prescriptions to OK Compounding, a company controlled and operated by two other defendants. Boyd and Woodson, who both pleaded guilty to conspiracy to pay kickbacks, were responsible for forming R&A Marketing Group LLC, a company that recruited the physicians and introduced them to OK Compounding. [Source: DVA OIG | Michael J. Missal IG | April 21, 2022 ++]

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Massachusetts -- Patrick Quinn of Arlington, was convicted of two counts of theft of public funds and two counts of making false statements. Since January 2012, Quinn stole more than \$420,000 in veteran and social security benefits by falsely telling VA and the Social Security Administration (SSA) that he was unable to work due to a disability, when he owned and operated Quinn Insurance Group, Inc. The investigation was conducted by the VA OIG and the SSA OIG.

Prolific Fraudster Sentenced to 18 Months in Prison. [Source: DVA OIG | Michael J. Missal IG | April 21, 2022 ++]

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Puerto Rico -- Ramón Julbe-Rosa of San Juan was sentenced to 18 months in prison and close to \$271,000 in restitution after pleading guilty to theft of government property and introducing unapproved new drugs into the United States. He defrauded the Social Security Administration and Medicare by receiving Social Security Disability Insurance Benefit payments while working. He also committed fraud against VA for fraudulently receiving unemployability benefits and against the Small Business Administration in connection with Major Disaster or Emergency Benefits related to Hurricane María. The VA OIG participated in this multiagency investigation. [Source: DVA OIG | Michael J. Missal IG | April 21, 2022 ++]

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Florida – A man was sentenced 26 Apr to two years in federal prison for using his twin brother’s stolen identity to obtain tens of thousands of dollars in military veterans benefits. **Wayne Bowen**, 64, was sentenced in Jacksonville federal court, according to court records. He pleaded guilty in January to aggravated identity theft. He must also pay \$63,773 in restitution. According to a plea agreement, Bowen used the name, Social Security card and military discharge papers of his estranged twin brother in 2014 to apply for federally subsidized housing benefits intended for indigent military veterans. The program was administered by the U.S. Department of Veterans Affairs and the U.S. Department of Housing and Urban Development.

Bowen admitted to federal agents that he had been using his brother’s identity for years, prosecutors said. Bowen had obtained a Florida identification card using his twin’s identity. He initially told the agents that he and his twin had served in and been honorably discharged from the U.S. Army but later admitted that those were lies. Based on Bowen’s fraudulent use of his brother’s identity, the VA provided him with \$32,434 in medical services, HUD provided him with \$18,905 in housing subsidies, and the U.S. Department of Agriculture funded \$12,434 in nutritional benefits for him, officials said. Bowen’s twin, who lives in another state, confirmed that he didn’t apply for any of the benefits and that he never gave Bowen permission to use his name. [Source: The Associated Press | April 27, 2022 ++]

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Louisiana -- Joseph Campo of New Orleans and Mario **Deluca of Metairie** were sentenced for their roles in a healthcare fraud conspiracy. From about March 2014 to October 2016, the two defendants knowingly and willfully executed a scheme and artifice to defraud TRICARE and other healthcare benefit programs. Campo was sentenced to 28 months of imprisonment and \$3 million in restitution; Deluca was sentenced to 36 months of probation and \$777,000 in restitution. The VA OIG helped in this multiagency investigation.

USA — The Department of Justice (DOJ) today announced criminal charges against 21 defendants in nine federal districts across the United States for their alleged participation in various health care–related fraud schemes that exploited the COVID-19 pandemic. These cases allegedly resulted in over \$149 million in COVID-19-related false billings to federal programs and theft from federally funded pandemic assistance programs. In connection with the enforcement action, DOJ seized over \$8 million in cash and other fraud proceeds. Several cases announced 27 APR involve defendants who allegedly offered COVID-19 testing to induce patients to provide their personal identifiable information and a saliva or blood sample. The defendants then allegedly used the information and samples to submit false and fraudulent claims to Medicare for unrelated, medically unnecessary, and far more expensive tests or services. Today’s announcement also included charges against manufacturers and distributors of fake COVID-19 vaccination record cards who, according to the allegations, intentionally sought to obstruct the Department of Health and Human Services and Centers for Disease Control and Prevention in their efforts to administer the nationwide vaccination program and provide Americans with accurate proof of vaccination. The VA OIG was one of several agencies that participated in this law enforcement action. [Source: DVA OIG | Michael J. Missal IG | April 27, 2022 ++]

VA EHR VA Burial Sites

4 New Ones Planned for 300,000+ Vets

After several years of planning and delays, the Department of Veterans Affairs is pushing for funding to open four new, unique burial sites within the next two years -- two columbaria in major cities and two rural cemeteries in the West that eventually will entomb 310,000 veterans or family members. The four sites are in New York City; Indianapolis; Elko, Nevada; and Cedar City, Utah, and will cost the VA \$3 million next year to ensure that they will open and be staffed within the next two years. According to budget documents released last month, the funding would continue these facilities’ "activations," defined as readying them a year before opening and supporting operations afterward.

The New York site in Queens and the Indiana site, first proposed in 2015, are part of the VA's Urban Initiative effort, which looks to provide columbarium-only locations for cremated bodies in city centers with few in-ground burial options. Under the Urban Initiative, the VA has plans to build facilities in five cities across the country. To date, Los Angeles has been the only one to open, first taking cremated remains in 2019. The remainder have been delayed by months

and even years, including a new columbarium planned for San Francisco that was set to open in 2015 but whose date has been pushed to 2027.

Under revised plans, the VA had hoped to open the New York and Indianapolis columbaria by mid-2021 and one in Chicago in 2022. The department is now planning for a dedication of the New York and Indianapolis facilities this summer. Among the eight new national cemeteries in rural areas, the VA has dedicated and opened six, with the Elko, Nevada, and Cedar City, Utah, sites remaining. The National Cemetery Administration, or NCA, embarked on these projects to ensure that veterans have "reasonable access" for burial, with either a state or national cemetery within 75 miles of their homes. The VA found that 8% of veterans don't have that proximity, and it set a goal for reducing the number to 4% by 2017.

A 2019 Government Accountability Office report found that the VA's goals were overly ambitious and the National Cemetery Administration overstated its expectations to complete the new projects by 2017. The GAO also found that the VA underestimated the cost of the projects, especially the rural cemeteries, with cost estimates rising from \$7 million to \$24 million. VA officials also have requested \$9.4 million for 2023 for existing cemeteries that are facing "workload increases and project expansions." The VA estimates that 570,000 veterans will die in 2022, and roughly 136,500 of those will be buried in VA cemeteries.

In 2018, the VA had 3.7 million gravesites; the number is expected to reach 4.2 million in 2023. "This budget request is essential for NCA to maintain its position as the "most highly regarded organization, in both the public and private sectors, in terms of customer satisfaction," officials wrote in the budget documents. Also as part of its budget proposal, the VA has asked Congress for legislation that would allow it to designate parts of cemeteries as "green burial sections," where veterans could choose to have their gravesites marked by means other than upright headstones or choose to be buried without a vault.

The VA also has asked to receive two acres of land at Fort Bliss, Texas, to expand the national cemetery and again has requested legislation that would allow it to keep veterans out of national cemeteries who allegedly committed serious sex crimes but died before being convicted or fled to avoid prosecution. [Source: Military.com | Patricia Kime | April 20, 2022 ++]

Update 34: Lawmakers Urge Pause in New Rollout amid More Problems

Amid ongoing problems with the new Veterans Affairs electronic medical records system, lawmakers on Tuesday warned department officials against further expanding the program into larger sites until permanent solutions can be put in place. "Given the issues that we're seeing in

Spokane and Walla Walla, I think the risks exceed the benefits,” said Rep. Frank Mrvan (D-IN) chairman of the House Veterans’ Affairs Committee’s technology panel. “We have seen no indication that the system is ready for the challenges at [bigger] facilities. “These issues have to be fixed first.”

Those issues for the 10-year, \$16 billion health records modernization effort include multiple outages over the last six months, reports of a near-death at a Spokane VA medical center last month connected to the records turnover, and the potential of billions in cost overruns if the project is delayed even by a single year. But VA officials insisted that the new records system — based on the Cerner Millennium software platform — is still fundamentally sound, and that new training put in place this spring has set up a more successful implementation of the software in years to come.

“This is one of the most complex clinical and business transformation endeavors in the department’s history,” said Dr. Terry Adirim, head of VA’s Electronic Health Record Modernization Integration Office. “We are transitioning from the current nearly 40-year-old [records system] to a new single state-of-the-art system that requires a different way for personnel to do their work. I am sensitive to how hard this can be.” Last year, VA leaders paused the system rollout for six months amid a host of problems at the first deployment site, Mann-Grandstaff VA Medical Center in Spokane.

Last month, that work resumed, with new training for staff, new management for the program and a new deployment at nearby department sites in Walla Walla. However, lawmakers on 26 APR said those changes have not erased their lingering concerns. A report by the Spokesman Review this weekend detailed how one veteran’s medication history was halted because of the records turnover, eventually resulting in heart failure. VA officials classified the incident as a mistake by staff, rather than an error prompted by the new records system. “I don’t believe that there’s any evidence that this system has harmed any patients, or that it will going forward,” Adirim said. “I think it’s important that we have the processes in place to mitigate any problems that could come up due to human error.”

VA leaders also insist that the program is scheduled to be finished in six years, in keeping with the original 10-year schedule. If not, it could mean a big financial expense for the government. An inspector general report released 25 APR said every additional year it takes to finish the project could cost \$1.9 billion more above the project’s \$16 billion price tag. On 26 APR, representatives from the VA Inspector General’s office said serious concerns remain in how the project is being managed and rolled out. “Staff have repeatedly found VA’s estimates unreliable and incomplete,” said David Case, deputy inspector general. “There is a lack of transparency due to inadequate reporting to Congress, stove-piped governance with decision-making ... and deficient processes for transparently and promptly responding to concerns.”

But Adirim insisted that the system has already been “successfully implemented at more than 50% of the De **VA Burial Sites**

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partment of Defense sites across the United States," suggesting those lingering problems can be overcome. When the project was first announced by President Donald Trump in 2017, the idea was to put the Defense Department and VA on the same health records system for the first time. That would provide a single medical file that followed individuals from military enlistment into post-service life. Patrick Sargent, senior vice president of Cerner Government Services, called the project "a once-in-a-lifetime opportunity to fundamentally change healthcare for generations to come" during Tuesday's hearing.

But lawmakers have voiced concerns about the cost and turmoil of reaching that goal. "I realize that VA needs a modernized records system," said veterans committee Chairman Mark Takano, D-Calif." Continuing with [the old VA system] is not sustainable long term. "However, we must make sure that we are not putting undue burden on our front-line workers or endangering veterans in the process." In advance of the hearing, the Cerner system went offline for several hours on both 25 and 26 APR, disrupting some care at the sites already using the new software.

VA officials plan to deploy the new system at sites in Columbus, Ohio, in coming days. VA has plans for further rollouts later in the year, but whether the objections by Congress on Tuesday will change that remains unclear. [Source: MilitaryTimes | Leo Shane III | April 26, 2022 ++]

Vet Employment

Update 16: Industries Where Veterans Are Finding Jobs

Veterans saw increased employment opportunities in the education and health services sector in 2021 but less hiring for professional and business services, according to new data released by the Bureau of Labor Services on Thursday. The research also showed a significant improvement in the overall veterans employment rate last year from 2020, when the coronavirus forced widespread business shutdowns across America, but still not a full recovery from the pandemic. The jobless rate for all veterans in 2021 was 4.4%, down sharply from the 6.5% posted in 2020 but still above the pre-pandemic rate in 2019 of 3.1%.

Since the start of 2022 that figure has dropped even further, with veterans unemployment reaching 2.4% last month. In a statement in response to the report, President Joe Biden touted the improvements over the last year as proof that the military community and national economy are headed in the right direction. “Veterans of all backgrounds are finally being cut in on the deal,” he said. “Unemployment rates for white, Black, Asian, and Hispanic veterans — male and female — fell and were the same or lower than their nonveteran counterparts in 2021. And the unemployment rate for veterans with a service-connected disability declined to 3.4 percent.”

Veterans unemployment has been a particular focus of the White House and Congress in recent years, with research showing that making a successful transition to civilian life can ease a host of potential stressors for military families. The BLS report found that nearly one in four veterans (23%) are employed in local, state or federal government jobs, about the same rate as 2020. For comparison, only about 13% of non-veterans hold salaried government posts. About 9% of veterans held jobs in the education and health services sector in 2021, an increase of almost 1% from 2019 levels. Manufacturing (12%) and business services jobs (10%) are the only private-sector industries with higher veteran participation.

On the other side, veterans as a group saw a significant decrease in those professional services posts (down 1.5%) and hospitality service jobs (down 1%, to about 3% of all veteran jobs) over the last two years. As a percentage of the population, veterans were more likely to find jobs than their civilian peers in sectors like manufacturing (12% for veterans vs. 9% for non-veterans) and transportation (8% vs. 5%) but less likely to work in education and health (9% vs. 16%) and retail trade (8% vs. 10%). Unemployment for veterans significantly outperformed civilian job rates in 2021 (4.4% vs. 5.3%) and researchers saw improvement across all generations of veterans looking for work.

Biden called that “historic progress” and said the data shows government efforts are “providing veterans with the tools and resources for economic opportunity, security, and dignity.” About 9 million veterans are in the U.S. workforce today, roughly half of all living veterans in America. [Source: MilitaryTimes | Leo Shane III | April 21, 2022 ++]

VA LA Homeless Plan

Newly Unveiled Plan Falls Flat with Advocacy Groups

Last Nov. 1, the Department of Veterans Affairs and the Los Angeles Sheriff's Department teamed up to move roughly 40 homeless veterans living along a sidewalk to the property of the West Los Angeles Veterans Affairs campus, right next to their former encampment known as Veterans Row.

At the time, VA Secretary Denis McDonough vowed to house another 500 homeless vets in the city by Dec. 31. The department succeeded, finding shelter for 667 veterans in a city with more than 3,600 homeless vets -- roughly 10% of the country's entire population of homeless former service members. "Every once in a while, you run across these phrases in the English language that shouldn't really exist. I think one of those phrases is 'homeless veteran,'" McDonough said in a November news conference. "As long as I'm here, I'm going to do everything I possibly can to get them into houses."

But after years of delays, advocates are questioning whether the VA is committed to finding a solution to the homelessness problem, and raised concerns about the use of the department's large plot of land in Los Angeles. Sections of that property are currently being leased by a local private school and university, and some of the land would be earmarked for development as part of the VA's new framework to combat homelessness in the area. On 22 APR, the VA unveiled what it has called the Master Plan for the West LA VA campus, a road map for ensuring that all homeless veterans in the area have permanent shelter and access to services such as VA health care, benefits and support programs.

Building on a draft unveiled in 2016, the Master Plan 2022 calls for constructing roughly 1,000 housing units in the next six years, with the intention eventually to have 1,200. It also calls for constructing a town square; buildings that will provide amenities for veterans, such as a wellness center with career and support services; and parking lots, walking trails and bike lanes. In this new village, formerly homeless veterans will have access to mental and physical health care and numerous services, according to VA officials, who added that the initiative could be a model for other cities.

"LA is the epicenter of homelessness, and as LA goes, the whole nation goes," said Keith Harris, VA's senior executive homelessness agent for greater Los Angeles, during a press call Friday. "Los Angeles has ... alarmingly nearly one-fifth of all unsheltered homeless veterans [in the country]. So we're committed to dramatically reducing these numbers and providing these veterans with a place to call home."

Yet veterans and advocacy groups are not happy with the overall plan, which they say ignored input from veterans and amounts to improper use of what originally was 700 acres, donated in 1887 to be "permanently maintained as a National Home for disabled veterans, particularly unemployed veterans." In a three-page letter issued Friday, Dick Southern, director of the Vietnam Veterans of America chapter in the region, called the master plan a community plan that would convert the land to public parks, thoroughfares, mixed-use affordable housing, commercial retail and four subway stations, in addition to providing space for pharmacological research centers and entertainment venues -- "all while indefinitely delaying the housing of disabled Veterans dying throughout Los Angeles' finest neighborhoods."

"Vietnam Veterans of America has never officially supported any master or community plan to privately redevelop the [West LA] VA Soldiers Home," Southern wrote, referring to the acreage's original name. Currently, on those acres left to house veterans, a few hundred elderly vets live in the veterans home run by the state of California, while the federal government leases 10 acres of the property to UCLA for a baseball field; a company drills for oil on the land; and 22 acres are leased to a private school that has built a sports complex, according to a report earlier this month from CNN.

"It's really kind of disgusting to see," Rob Reynolds, an Iraq War veteran who now advocates for homeless veterans in LA, told CNN. "When you see people who raise their right hand to serve our country sleeping and dying on the street, and you have one of the most elite private schools in the country charging \$40,000 per year per student, and they have immaculate amenities and the veterans are living in squalor, it just doesn't make any sense." The VA maintains that the master plan will provide homeless veterans with the services and shelter they need through partnerships with developers as well as lease agreements, which help cover the cost.

Dr. Steven Braverman, director of the VA Greater Los Angeles Healthcare System, said on Friday's call with reporters that, by law, the VA is not authorized to build housing "unless it is specifically tied to a treatment program" and must "rely on principal developers and community assets." A reporter on the call asked VA officials to cite the law, but they were unable to do so, adding only that in the 1950s, a Veterans Home program was "canceled by Congress and the only authorizations for use of funding was housing in support of direct care activities." As officials moved to end the call after the question, advocate Ryan Thompson, with the National Home for Disabled Volunteer Soldiers Coalition, jumped in to accuse the VA of lying. "I'm absolutely disgusted, as are so many veterans and members of the public that you continuously lie about laws that do not exist," Thompson said.

Earlier in the press conference, Braverman agreed that the optics of beautiful facilities like the private Brentwood school and the UCLA field on a property where veterans were promised housing has a "real and visceral impact on veterans and advocates," but, he added, "the lease

holders are not the reason we haven't produced housing." "If we could solve obstacles to housing," Braverman said, referring to delays the VA has faced with the project, including protracted environmental impact studies, historical preservation reviews, abatement requirements and developer funding challenges, "we could build all the units we've promised without the leases coming into play."

VA officials said that, by the end of 2022, the area will have 235 "permanent housing beds" for veterans and another 315 by the end of 2024. [Source: Military.com | Patricia Kime | April 23, 2022 ++]

Arizona GI Bill

UAGC Loss of Eligibility from Licensing Issues Resolved

Students attending the University of Arizona Global Campus using GI Bill benefits won't see any disruption in their tuition or housing payments after school officials this week fixed what they called a "bureaucratic snafu," which halted their ability to accept the federal funds. Last month, more than 3,000 student veterans at the school (formerly known as Ashford University) were told they could no longer use GI Bill benefits to pay for classes after a California approving agency revoked the institution's license.

UAGC officials at the time characterized the issue as minor, saying they were completing steps needed to be reauthorized in Arizona, allowing them to continue to accept the federal education benefits. But following the California move, both school and VA officials were forced to issue statements promising that student veterans in the middle of studies at UAGC would have their tuition costs covered through the end of the spring semester. This week, the Arizona State Approving Agency finalized its work on the school's application, once again allowing them to receive GI Bill payouts.

"The approval means that current and prospective students will again be eligible to utilize VA education benefits at UAGC, including course tuition and fees and monthly housing allowance," school officials said in a statement. "Affected students who started classes in April ... will be back certified by UAGC for course tuition and fees. The monthly housing allowance also will be covered for these students. Therefore, UAGC expects no interruption to student benefits, classes, or costs." VA officials confirmed that in a note to students on 25 APR, stating "there will be no gap in your GI Bill benefits coverage" thanks to the changes.

Despite the resolution, outside advocates said they remain concerned about what led up to the approval problem and past operations by UAGC officials. Officials from Veterans Education Success — a frequent critic of for-profit colleges — said numerous students reached out to them in recent weeks with complaints about how the situation was handled and the stress that resulted from the temporary GI Bill lapse. The group is calling for a full review by Arizona officials into UAGC, pointing to past legal judgements against Ashford University for fraud and misrepresentation.

UAGC officials said they have been in compliance with all relevant state rules throughout the recent problems, and blamed the funding lapse on bureaucratic confusion regarding “the move of the UAGC main campus from California to Arizona.” Students with questions about the GI Bill payments or other financial support from the department can contact VA’s Education Call Center at 888-442-4551. [Source: MilitaryTimes | Leo Shane III | April 27, 2022 ++]

Congressional Resources

Member’s Contact Info & Vet Bill Status

If in doubt as to your legislator’s online contact info or who they are, the below websites provide ALL legislator’s names with contact info to facilitate the copying and forwarding of suggested letters to them, asking them questions, or seeking their assistance:

- <https://www.congress.gov/search?q=%7B%22source%22%3A%5B%22members%22%5D%2C%22congress%22%3A%5B%22117%22%5D%7D> – **House**
- <https://www.congress.gov/search?q=%7B%22source%22%3A%5B%22members%22%5D%2C%22congress%22%3A%5B%22117%22%5D%2C%22chamber%22%3A%22Senate%22%7D> – **Senate**

To check status on any veteran related legislation go to <https://www.congress.gov/bill/117th-congress> for any House or Senate bill introduced in the 117th Congress. Bills are listed in reverse numerical order for House and then Senate. Bills are normally initially assigned to a congressional committee to consider and amend before sending them on to the House or Senate as a whole. To read the text of bills that are to be considered on the House floor in the upcoming week refer to <https://docs.house.gov/floor>. Note that anyone can sign up and use MOAA’s Legislative Action Center at <https://moaa.quorum.us/issueareas>. You do not have to be a member.

Military Sexual Harassment/Assault

Update 14: GAO Report on Dozens of Measures to Help Stop It

The military failed to keep up with the mushrooming number of measures that Congress has required the armed services to implement to address sexual assault, a government watchdog revealed. As of October 2021, the Defense Department had not fully implemented 18% of the nearly 200 unique requirements imposed in legislation since 2004, the Government Accountability Office found in a report published this week. The Homeland Security Department had not fully implemented six of 36, or about 16% of those affecting the Coast Guard, the report said. The departments' lack of full implementation of dozens of requirements could have stymied efforts to combat what Defense Secretary Lloyd Austin has called "persistent and corrosive problems" of sexual assault and harassment.

Both DOD and Homeland Security concurred with the report's 23 recommendations, which largely call on the agencies to fully implement the unmet parts of the requirements that are still active. In separate responses, the departments said they are addressing several of the requirements. Many of the unmet requirements involve oversight, evaluation and reporting on military efforts to prevent sexual assault, investigate crimes and protect or advocate for victims. DOD has long faced criticism for its handling of sexual assault and harassment issues, including from the public, service members and lawmakers.

Late last year, Austin approved a series of actions recommended by an independent review commission, ordering the military departments to implement the plan swiftly and deliberately. Months later, Congress removed prosecution of sexual assault and related crimes from the military chain. But the latest GAO audit, ordered by Congress two years ago, looked at earlier measures intended to combat the problem. Those measures were enacted in annual defense authorization bills from 2004 to 2019. In all, some 249 measures were passed into law, of which 181 remained in effect at the end of the 15-year period.

The greatest share of these affected the Pentagon or the military branches. While DOD satisfied most of them, "several issues limit oversight" of prevention and response programs, the GAO found. Noncompliance with all the requirements could have left DOD, Congress and the public without the data needed to ensure adherence to efforts to support victims and prevent sexual assault, or to direct resources where they were most needed, the report suggested. For example, investigators found that from 2005 to 2021, DOD often omitted information about retaliation complaints and investigations of those complaints.

The Army and the Air Force failed to implement measures related to annual organizational climate surveys imposed in 2014. And the Army did not ensure that commanders complied with the requirement to conduct them, auditors reported. The following year, Congress required that the appraisals of commanding officers' performance consider elements of command climates

concerning sexual assault issues. But the GAO found that the Marine Corps and the Air Force both failed to implement those measures. Some of the issues the GAO found date back nearly 20 years to requirements that have since expired without being fulfilled. Others involve repeated failures to satisfy Congress' specifications.

The independent review commission that Austin established found that training was "outdated and out-of-touch," a deficiency that might have come to light sooner had assessments been reported annually, as Congress required several years earlier, the GAO said. [Source: Stars & Stripes | Chad Garland | March 30, 2022 ++]

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Military Sexual Harassment/Assault

Update 15: Investigative Authority Pulled From USN/USMC Unit Commanders

Unit commanders in the Navy and Marine Corps will no longer have investigative authority over sexual harassment allegations, according to a department-wide message sent 22 APR by Navy Secretary Carlos Del Toro. Effective immediately, the message says, commanding officers must escalate complaints to the next higher-level commander, who will then appoint an investigating officer. That investigator should be from outside the command and "shall not be familiar with the subject or the complainant," the message says.

The interim policy includes a carve-out to allow an investigator from within the same command to investigate, however, if that next-level commander determines an outside

investigation would “unreasonably interfere with the command’s ability to complete its mission.” Such a carve-out requires sign-off from at least a one-star admiral or general, the message says. The change comes on the two-year anniversary of the murder of 20-year-old Army Spc. Vanessa Guillén, who complained about sexual harassment at Ft. Hood, Texas, before her killing. Del Toro’s policy will stand until the service funds and staffs independent investigators to handle sexual harassment complaints. However, those complaints are still to be handled within the military chain of command. Last year the military stripped sexual assault investigations from commanders but left harassment up to commanders. A bill submitted in both chambers of Congress 22 APR seeks to address that discrepancy.

In a statement, California Rep. Jackie Speier (D-Hillsborough), who introduced the bipartisan Sexual Harassment Independent Investigations and Prosecutions Act in Congress, said it fixes the “massive oversight” of the 2022 budget. “SPC Guillén was sexually harassed by a superior prior to her disappearance and dismemberment,” Speier said in a statement. “No action was taken on her complaint. Many other victims of sexual assault and violent crimes in the military have shared with me how they also suffered from sexual harassment. As long as sexual harassment courts-martial continue to be handled through the military chain of command, victim’s voices will be stifled and overwhelmed by a system stacked against them at every turn.”

The Navy did not issue a statement or news release announcing the policy shift. On 22 APR, Lt. Cmdr. Devin Arneson, a Navy spokesperson, confirmed the change is in effect across the Navy department, including the Marine Corps. [Source: San Diego Union Tribune | Andrew Dyer | April 22, 2022 ++]

Army Pilots Pooper

Those at Joint Base Lewis-McChord Have a Luxury One

A group of warrant officers at Joint Base Lewis-McChord, Washington, gained notoriety last week after their hangar bathroom was shared by U.S. Army WTF Moments. The 2-158 Assault Helicopter Battalion latrine lacks many of the amenities soldiers have come to know and love about most Army bathrooms — the familiar washed-out glow of flickering fluorescent lights; rusty, broken hand soap dispensers; suspicious puddles; and stained ceiling tiles that inspire questions that you don’t want answers to.

Instead, it's exactly what a wet, spiteful, freezing-cold infantryman stuck in the field at Yakima Training Area imagines those damn pilots have: a mood-lit "Alaskan lodge" lounge, with paintings on the wall, assorted hand soaps and air fresheners. There's a putt-putt green, a taupe backsplash and classic rock emanating from a CD clock radio. A wooden Canada goose gazes upon what could be the Army's most-bougie general-use latrine at Joint Base Lewis-McChord, Washington, April 19, 2022. (Capt. Kyle Abraham/Army)

Army Times tracked down and caught up with the 16th Combat Aviation Brigade chief warrant officer 2 who masterminded the operation. The soldier is a former infantry NCO who once worked for an international luxury hotel chain — "if it's not the Four Seasons, it's this other company." "I used to regularly use a granite countertop bathroom with an individual stall that had linen towels and running water, you know, all those types of things that you take for granted working in a place like that," he said. "And then I joined the [infantry]." The now-warrant officer, a Black Hawk pilot, asked during his phone interview that Army Times withhold his name so that a news article about his unit's bougie bathrooms wouldn't be the top Google result for his name. We reluctantly agreed.

"I don't want to be known as the bathroom guy for the rest of my career," he confessed. "But this whole idea of trying to make this place a little bit nicer each day — and maybe the next guys get to enjoy it after my group phases out of here — it's actually been a really cool thing." He also noted that this wouldn't have been possible at his old infantry unit. "If you were to do this in an infantry company, somebody would find a way to break everything in there," he explained. The brigade public affairs officer, Capt. Kyle Abraham, gets no such anonymity, though, and will have to deal with this coming up in his Google history forever. He described the latrine as what can happen "when soldiers have pride in the unit and pride in where they work."

Seriously, how did this even happen? The project began last fall when the battalion's pilot mafia realized they'd been spoiled by occasional visits to high-class facilities at other airports in the region. "They've got people flying in and out of there with private jets," explained the warrant officer. "And then you got all these grubby Army guys coming in and out, drinking all their coffee and eating their snack stuff."

A realization and two rules set the project in motion, he said: "We should have nice things, too...[but] everything that goes in the bathroom — it has to be free." The second rule? "It has to be classy," said the pilot. He said he vetoed a few items that didn't "fit that ambiance that we were trying to create." "Somebody wanted to put a wicker chair in there, and that was absolutely a no-go," he explained. "It looked like cheap patio furniture, and we weren't going to have that in there." Over time, giveaways on Facebook Marketplace and other sites coalesced into a coherent theme — "Alaskan hunting lodge," as the warrant officer described it.

The only enemy of the project? The brigade's former command sergeant major, according to the warrant officer. "He did exactly what you think a brigade sergeant major would do," explained the pilot. "He turned the [fluorescent] lights back on, and immediately within minutes, the next guy that walks in would automatically turn the lights off." That battle continued for about a month, he said. But every time he's entered "in the last three or four months...everything is just the way it's supposed to be — music on, lights off, lamps glowing and everything peaceful," he added. Meanwhile, the battalion formally appointed one of its standardization pilots as the facility's "janitorial executive," responsible for establishing the cleaning duty roster — which is dominated by the unit's warrant officers.

Both the warrant officer and Abraham swore that soldiers actually use this bathroom on a regular basis. The hangar where the latrine is located is one of the brigade's newest facilities, Abraham explained, so it often plays host to standing meetings, special events and distinguished visitors. The warrant officer stressed that "anybody from the newest private on post up to the [I Corps] commander can use the bathroom — it's not a warrant officer-only lounge or anything like that." He added that some of the general officers on post have visited, and his brigade commander gives the facility "a rave review."

Asked what the next target upgrade is, the pilot said that the unit is trying to build a collection of CDs for the clock radio and a small shelf to organize them. "So anybody who's willing to donate a CD — maybe like an old Kenny G CD or something like that — that would be appropriate," he said. Army Times has not yet located a representative for Kenny G in order to facilitate the connection. Asked if he had any moral confliction over sparking a possible bathroom arms race, the pilot noted he hasn't "lost sleep over this." "There would be worse arms races out there," he said. "If anything, it's only going to have a positive effect on the...aviation community." [Source: ArmyTimes Observation Post | Davis Winkie | April 21, 2022 ++]

Global Military Spending

Passed \$2 Trillion in 2021

The global military expenditure has reached an all-time high, passing \$2 trillion in 2021, according to a report by a leading defense think-tank based in Sweden, as spending increased for the seventh consecutive year. The United States, China, India, the United Kingdom and Russia were the top five defense spenders, together accounting for 62 percent of the global expenditure, according to new data published on Monday by the Stockholm International Peace Research Institute (SIPRI).

“In 2021 military spending rose for the seventh consecutive time. That is the highest figure we have ever had,” Diego Lopes da Silva, senior researcher at SIPRI, told AFP news agency. Despite the economic fallout of the global COVID pandemic, countries around the world increased their arsenals, with global military spending rising by 0.7 percent last year, according to SIPRI.

Russia, which invaded Ukraine on 24 FEB, saw its spending grow by 2.9 percent – the third year of consecutive growth – to \$65.9B Defense spending accounted for 4.1 percent of Russia’s gross domestic product (GDP), “much higher than the world average”, and made Moscow the fifth largest spender in the world, Lopes da Silva said. In 2014, when Russia annexed Crimea, the country was also targeted with sanctions at the same time as energy prices fell, making it difficult to gauge how effective sanctions were on their own.

On the other side, Ukraine’s military spending has risen by 72 percent since the annexation of Crimea. While spending declined by more than eight percent in 2021 to \$5.9B, it still accounted for 3.2 percent of Ukraine’s GDP. As tensions have increased in Europe, more NATO countries have stepped up spending. Eight member countries last year reached the targeted two percent of GDP for spending, one fewer than the year before but up from only two in 2014, SIPRI said. Lopes da Silva said he expected spending in Europe to continue to grow. The US, which far outspent any other nation with \$801bn, actually went against the global trend and decreased its spending by 1.4 percent in 2021. [Source: Al Jazeera News | April 25, 2022 ++]

M2A4 Bradley Fighting Vehicle

First Army Unit Gets Modernized Bradley Fighting Vehicle

The U.S. Army has awarded BAE Systems a contract modification worth up to \$269 million for continued production of the M2 Bradley Fighting Vehicle (BFV). The award for an additional 168 upgraded Bradley M2A4 Infantry Fighting Vehicles is part of the Army’s combat vehicle modernization strategy and helps ensure force readiness of the Armored Brigade Combat Teams (ABCT).

The Bradley A4 is equipped with an enhanced powertrain that maximizes mobility and increases engine horsepower, providing rapid movement in reaction to combat or other adverse situations. Wide-angle Driver’s Vision Enhancer, improved Force XXI Battle Command Bridge and Below (FBCB2) software integration improve friendly and enemy vehicle identification, enhancing situational awareness. The addition of a High-Speed Slip Ring, greater network connectivity and Smart Displays that simultaneously display classified and unclassified information also improve situational awareness.

“The Bradley is one of the most critical vehicles in the Army’s ABCT today because it allows the Army to transport troops to the fight, and provide covering fire to suppress enemy vehicles and troops,” said Scott Davis, vice president of combat vehicle programs for BAE Systems. “Upgrading to the A4 configuration provides soldiers with more power to increase their speed and ability to integrate enhanced technology to ensure they maintain the advantage on the battlefield.” Previously awarded funding for initial production of 164 Bradley A4 vehicles allowed BAE Systems to begin production. The award of this option brings the total production funding to \$578 million. It includes upgrades and associated spares of two Bradley variants: the M2A4 Infantry Fighting Vehicle and the M7A4 Fire Support Team Vehicle.

A 3rd Infantry Division unit at Fort Stewart, Georgia, is officially the first to be equipped with and trained on the modernized M2A4 Bradley Fighting Vehicle, marking the end of a decade long effort by the Army to upgrade their Bradley Fighting Vehicles. The soldiers completed training on the new equipment during a series of events this March, the Army release stated. The Army plans to acquire more than 700 of the new M2A4 Bradleys through 2029. Each vehicle costs roughly \$4.35 million. The Army plans to continue providing field units with the M2A4 variant until the new Optionally Manned Fighting Vehicle is produced, which will eventually replace the Bradley.

“This Bradley variant will ensure that the platform maintains combat relevance now and for decades to come as we wait for the Optionally Manned Fighting Vehicle platform to eventually replace it,” said Brig. Gen. Glenn Dean, who leads Program Executive Office-Ground Combat Systems. “We fielded the most capable Bradley Fighting Vehicle to date, with the Bradley in service for three decades. Because the A4 variant has enhanced mobility and power generation, we’ll be able to integrate new technologies.” The last upgrade made to U.S. armored troop carriers came in 2002.

The prototyping phase for the Optionally Manned Fighting Vehicle will begin in fiscal 2025, and the Army is expected to select in the fourth quarter of fiscal 2027 one company to build low-rate production vehicles. Full-rate production isn’t expected to begin until fiscal 2030, meaning most soldiers will be using the M2A4 Bradley for years to come. [Source: ArmyTimes | Rachel Nostrant | April 25, 2022 ++]

U.S. Space Force

Update 30: Offering Bonuses for New Guardians with Tech Backgrounds

The Space Force has unveiled a wave of bonuses to lure recruits with highly specialized tech backgrounds to become Guardians. Bonuses range from \$12,000 to \$20,000 for certain technology certifications that could be used for the Space Force's cyber career fields, according to a press release from the Department of the Air Force's Recruiting Service. Earlier this month, the Department of the Air Force unveiled more than a dozen bonuses as a way to entice new recruits amid a national labor shortage and a pandemic economy.

But while the Air Force said it's facing headwinds to fill its ranks, the Space Force is having no problem getting recruits into the small number of spots it has, as interest continues to grow in the newest military service branch. Maj. Gen. Ed Thomas, the Air Force Recruiting Service commander, told Military.com that last year they had more than 42,000 leads on people interested in joining to fill just 500 spots. "Space Force recruiting is on very solid ground right now," Thomas said.

The Space Force is the smallest of the military service branches. It has grown to 8,400 Guardians since being created at the behest of former President Donald Trump in 2019 and is expected to grow by 200 new recruits in 2023. For Space Force Guardians who have already joined the ranks, the Department of the Air Force is also offering reenlistment bonuses for a dozen careers, such as cyber intelligence analysts and communications specialists, to retain their specialized knowledge and skills. Unlike other services, the Space Force does not have a reserve or National Guard component; Air Force Secretary Frank Kendall is floating a proposal to have Guardians either be part-time or full-time instead.

Gen. John Raymond, the chief of space operations, has spoken publicly about the full-time and part-time concept as a possible way to recruit talent from the private sector to fill the highly specialized roles in the Space Force's ranks. "We would be giving opportunities for people to go to the commercial industry, to go to NASA, and then come back," Raymond told Space News earlier this month. "Maybe at certain times in their life, if they want to have children, they can go part-time for a while and then come back without having to get out of active duty and then go into the reserves." The Space Force will make history next month when 72 men and women start the first Guardians-only boot camp at Joint Base San Antonio, Texas. [Source: Military.com | Thomas Novelty | April 25, 2022 ++]

Military Fraud & Abuse

Update 15: Guard Soldier Who Stole \$200K Caught After Filing Pay Inquiry

A member of the Michigan National Guard made his first appearance in federal court late last month after authorities say he quietly collected his full pay and allowances for more than two years after resigning from full-time Guard status and reverting to part-time service. Staff Sgt. **Clayton H. Mitsui** Jr. remains a member of the Michigan Guard while he awaits trial for theft of public funds, confirmed state spokesperson Penny Carroll. A federal public defender representing the soldier declined comment when reached by Army Times.

The alleged theft was discovered when Mitsui submitted a pay inquiry about a missing part-time drill paycheck, according to publicly-available court records. The \$205,435.48 that Mitsui reportedly stole went towards “child support, bills, and credit card debt,” according to an arrest warrant request from Army Criminal Investigation Division agent Joseph Kajer. The NCO resigned from the Hawaii National Guard’s Active Guard Reserve program in June 2017, the warrant application said. But even after Mitsui became a weekend warrior, he continued to receive his previous active duty pay and allowances on top of his monthly drill pay, Kajer said.

The CID agent attributed the error to Mitsui failing to complete administrative requirements when leaving the AGR program, and the Hawaii Guard failing to tell the Defense Finance and Accounting Service to stop his pay. Mitsui then moved to Michigan and transferred into the National Guard there in February 2019. Four months later, in June, the NCO reported that he hadn’t been receiving his monthly drill paychecks since transferring, according to Kajer. “Coordination with the [Michigan Army National Guard] revealed that Mitsui was not receiving drill pay because he was receiving active duty pay and entitlements,” said the CID agent in the warrant application.

Michigan officials quickly realized that Mitsui was receiving active duty pay and submitted paperwork to DFAS halting it in November 2019, explained Kajer. They reported the discovery to CID. Kajer interviewed Mitsui over the phone in April 2020, and the NCO allegedly admitted to taking the money and spending it. “I knew I was doing something wrong,” Mitsui reportedly told the investigator, adding that he’d hidden the fact that he received active duty pay from superiors. “I got caught when I came to Michigan...If I could turn back time and change it, I would.” A federal judge ordered Mitsui released from custody pending trial on an unsecured \$10,000 bond. According to federal law, theft of public funds in excess of \$1,000 is punishable by up to ten years in federal prison. If convicted, offenders often have to repay the funds they stole.

In a similar case that concluded earlier this month, a disgraced Air Force officer who received more than \$800,000 in pay after being dismissed from the service for misconduct was sentenced to five years in prison. That airman, former Maj. Brandon Bailey, also defrauded the Social Security Administration. Prosecutors initially did not seek jail time for Bailey, who also has to pay \$1.5 million in restitution and forfeit most of his assets, but he violated the conditions of his

bond while awaiting sentencing. Mitsui's next court appearance is on April 19. [Source: ArmyTimes | Davis Winkie | April 14, 2022 ++]

Navy Days

Comms



The "Every Sailor a Deck Hand" campaign got off to a slow start.

TRICARE Prescription Drugs

Pre-Authorization and Medical Necessity

Prescription drugs are tools meant to support your overall health. TRICARE has procedures to make sure you get the right prescription drug to treat your condition. You must sometimes work with your doctor to get approval for coverage of certain drugs. Two examples of this are pre-authorization (also known as prior authorization) and medical necessity.

“TRICARE uses pre-authorization and medical necessity to make sure your prescription drug is safe, effective, medically necessary, and cost effective,” said U.S. Public Health Service Cmdr. Teisha Robertson, a pharmacist with the Defense Health Agency’s Pharmacy Operations Division “If you don’t get pre-authorization approval when it’s required, TRICARE may not cover your prescription. Without a medical necessity form, you’ll pay a higher cost for your

prescription drug.” Thus there are a few things you should know to help you through the process of obtaining these prescription.

Pre-authorization

As outlined in the TRICARE Pharmacy Program Handbook, you may need pre-authorization for your prescription if it:

- Is specified by the Department of Defense Pharmacy & Therapeutics Committee
- Is a brand-name prescription drug with a generic substitute
- Has age limits
- Is prescribed for an amount more than the normal limit

Express Scripts, the TRICARE pharmacy contractor, sometimes needs more information from your doctor about your prescription before it can be covered by your plan. Express Scripts uses this information to help control costs. They also must make sure the medication is an effective treatment. Express Scripts works with your doctor on these reviews. To find out if your prescription needs pre-authorization, you can go to the *TRICARE Formulary Search Tool* at <https://www.express-scripts.com/frontend/open-enrollment/tricare/fst/#>. Enter the name of your prescription drug in the search tool. If the drug requires pre-authorization, a form will be available for you to download by clicking “Coverage rules apply.” Otherwise, the form won’t appear.

Keep in mind, only your doctor can submit the form. They can do this online by following the instructions on the form. Express Scripts will update you on the status of your form. You can also log in to your Express Scripts account (<https://www.express-scripts.com/login/tricare>) or Express Scripts mobile app (<https://militaryrx.express-scripts.com/news/why-use-express-scriptsr-mobile-app>) at any time to check the status. Your approval will apply to network pharmacies, TRICARE Pharmacy Home Delivery, and military pharmacies.

Medical Necessity

Some drugs require proof from your doctor of medical necessity. Your TRICARE plan has a list of generic and brand-name drugs that TRICARE covers. It’s called the formulary list located at, <https://www.tricare.mil/CoveredServices/Pharmacy/Drugs> TRICARE also covers non-formulary drugs (<https://www.tricare.mil/CoveredServices/Pharmacy/Drugs/NonFormulary>) but at a higher copayment. If evidence of medical necessity is approved for these drugs, you can get your non-formulary drug at the formulary cost, which will be a lower copayment. Medical necessity is also required for active duty service members to get the non-formulary drug at no cost.

How can you find out if your prescription drug needs medical necessity? You can find this by looking it up on the *TRICARE Formulary Search Tool*. As with pre-authorization, only your doctor can submit the form. Your medical necessity approval will apply to network pharmacies,

TRICARE Pharmacy Home Delivery, and military pharmacies. Keep in mind, coverage for some non-formulary drugs requires you to use home delivery. You can check the online search tool to confirm.

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Find more information about pre-authorization and medical necessity on the TRICARE website <https://www.tricare.mil/CoveredServices/Pharmacy/ManageScripts/Refills/PreAuth>. If you can't find a form you need or have questions, reach out to Express Scripts at <https://militaryrx.express-scripts.com/contact-us>. Remember, you can always check the TRICARE Formulary Search Tool to see how much you'll pay out of pocket for your prescriptions. You can also check out the *TRICARE Pharmacy Program Handbook* at <https://www.tricare.mil/publications> for everything you need to know about your pharmacy benefit. [Source: TRICARE News | April 19, 2022 ++]

TRICARE Dental Program

Update 21: Here Are Your New 2022 Premiums

The monthly premium rates for TRICARE Dental Program (TDP) participants will increase slightly across the board beginning 1 MAY. TDP is an optional program available to active duty family members, as well as some National Guard or Reserve members and their families. More information on eligibility, enrollment, and seeking care under the program is available at TRICARE.mil. (For more about dental benefits available to military retirees, their family members, and survivors, visit <https://www.benefeds.com/education-support/eligibility-military>.)

United Concordia administers the TDP program and recently published the new monthly premiums, which vary by sponsor status. Rates taking effect May 1 are listed below, with current rates (in effect from May 1, 2021, to April 30, 2022) in parentheses:

Active Duty

- Single: \$11.94 (up from \$11.65)
- Family: \$31.04 (up from \$30.28)

Selected Reserve/Individual Ready Reserve (mobilization only)

- Sponsor: \$11.94 (up from \$11.65)
- Single: \$29.84 (up from \$29.12)
- Family: \$77.59 (up from \$75.71)

- Sponsor and Family: \$89.53 (up from \$87.36)

Individual Ready Reserve (non-mobilization)

- Sponsor or Single: \$29.84 (up from \$29.12)
- Family: \$77.71 (up from \$75.71)
- Sponsor and Family: \$107.43 (up from \$104.83)

The plan has an annual benefit maximum of \$1,500 per enrollee, a lifetime orthodontic maximum of \$1,750 per enrollee, and an annual dental accident coverage maximum of \$1,200 per enrollee. At <https://www.uccitdp.com/dtwdws/member/article.xhtml?content=member-whats-covered> more information on TDP, including cost shares and a breakdown of covered services, is available. [Source: MOAA Newsletter | Kevin Lilley | April 18, 2022 ++]

TRICARE Mental Health Care

Military Family Members/Retirees Being Priced Out Of Care

As the military and veteran community continues important work to break the stigma surrounding mental health treatment, a major barrier for many who seek such treatment has gone largely ignored. Military retirees and their family members — along with family members of those still in uniform — may require mental health care for a wide range of reasons. Some may be service connected issues. Some may be brought about by the stress of a loved one’s deployment or from the long-term caregiving requirements shouldered by the family members of our nation’s wounded warriors. Even more may stem from a pandemic-related spike in mental health issues reaching far beyond the military.

Whatever the root cause, regular visits to a mental health care provider may provide a road to recovery. But for many in this community, those visits don’t come cheap. Copayments for mental health care visits more than doubled for TRICARE users from 2017 to 2018. Some retirees on the TRICARE Select plan must pay \$50 out of pocket for each visit — more than double the standard rate of many private sector plans and an increase from a \$20 copay on the TRICARE plan just five years ago. On average, federal employee health plans still charge just \$20 for such visits.

Before blaming this increase on inflation or other, wider economic factors, consider the Military Health System reforms passed by Congress as part of the FY 2017 National Defense Authorization Act. While the law does not address mental health care specifically, TRICARE

officials implementing proposed reforms classified such treatment as “specialty care” — that means a military family now pays the same amount out of pocket for a 45-minute counseling session as they would for neurosurgical consult.

This practice is out of step with commercial health care plans, and it serves to discourage members of military families from seeking the care they might need as they weigh multiple, costly sessions against other pressing financial needs. As families suffer through short-notice deployments and frequent moves, and as military retirees begin finding their way forward after service, they should not be forced to make such a choice. Fortunately, there is a solution: The Stop Copay Overpay Act would cap out-of-pocket costs for TRICARE beneficiaries seeking mental health care at the level of a primary care copay charge. It would do so without reducing the overall reimbursement to the provider, meaning these providers would be less likely to drop TRICARE patients as they face increased demand for their services.

The Military Officers Association of America, or MOAA, has highlighted this issue as part of its annual advocacy campaign. They are asking readers to join their 350,000 members in asking our lawmakers to pass the Stop Copay Overpay Act H.R. 4823 which would reduce TRICARE mental health copays by capping them at the amount TRICARE beneficiaries pay for primary care visits. and ease the path to much needed mental health support for military family members and retirees. [Source: MOAA | Karen Ruedisueli | April 14, 2022 ++]

Acupressure

Update 04: Low Back Pain Relief

If you're ready to get back into the garden and get your hands dirty, but your back is saying “NO!” then this acupressure for low back pain relief might be for you. The extra lifting, bending and pulling of gardening may increase low back pain after a winter of less activity. Don't let back pain stop you from doing the things you enjoy. A simple acupressure routine can help!

Self-care for low back pain is at your fingertips

Having self-care strategies for back pain gives you a sense of control and can get you back in the garden. Acupressure is a self-care approach that can help relieve back pain or other concerns. Acupressure routines are portable and easy to learn. Once you learn this low back pain acupressure routine you can use it anytime, even in the garden. Acupressure is thousands of years old and is considered safe to be done with your usual medical care for low back pain.

These acupressure points are useful when your pain is worse and during times when back pain is less bothersome, but still there. Using acupressure more regularly may lead to better results. Press these points several times a day when your back is hurting and see if you find relief.

Practice often for relief of pain

The video at <https://youtu.be/ijclWX702mU> reviews seven acupressure point locations that are meant to help you manage your low back pain. Your hands will become more sensitive as you practice acupressure, which allows you to notice as the tightness in your back muscles relax. After you view the video, the Acupressure Low Back Pain Self-Care Handout at https://www.va.gov/files/2021-12/4309_Acupressure_For_Back_Pain.pdf can be a good reminder of the point locations so that you can easily repeat this acupressure routine when you need some relief. This acupressure routine is not intended to replace your usual medical care. However, this self-care skill can be taken with you anywhere and may be useful to reduce your symptoms. [Source: Vantage Point | Juli Olson | April 25, 2022 ++]

Parkinson's Disease

Update 05: Awareness

April was Parkinson's Disease Awareness Month, and VA wants to raise Veteran's awareness on this serious neurological disorder. According to VA, it provides health care for approximately 400,000 veterans with Parkinson's disease. It is a progressive disorder of the nervous system usually categorized as a movement disorder. It develops gradually when certain nerve cells in the brain die and it's thought to be caused by a loss of dopamine-producing cells in the brain. The cause of Parkinson's disease is unknown, but genes and environmental factors may play a role. Approximately 40,000 veterans with Parkinson's disease receive care at the VA each year. Risk factors that may contribute to Parkinson's disease are:

- Being 60 or older.
- Having close family members with Parkinson's disease.
- Being a male.
- Ongoing exposure to herbicides and pesticides.

Symptoms may include:

- Tremor. One sign of Parkinson's disease is a tremor of your hand when it is at rest.
- Slowed movement. Over time, Parkinson's disease may reduce your ability to move and slow down your movement. You may also drag your feet as you walk, making it difficult to move.

- Rigid or stiff muscles. Muscle stiffness may occur in parts of your body. Stiff muscles can reduce your range of motion and cause you pain.
- Impaired posture and balance. Your posture may be affected, or you may have balance problems.
- Loss of automatic movements. You may have a reduced ability to perform movements such as blinking, smiling or swinging your arms when you walk.
- Speech changes. You may have speech problems such as - speaking too softly or too quickly, slurring your words or pausing before speaking.
- Writing changes. Your writing may appear small and become difficult.

Medication and exercise can help those suffering from Parkinson's. Medication can replace the dopamine no longer made in the brain, or help the brain use the existing dopamine more effectively. Some surgical procedures can be done to relieve symptoms, as well. Your neurologist can work with you to find the best therapies for you. VA has established six Parkinson's Disease Research, Education and Clinical Centers that provide clinical care, education, and research. For more information go to Parkinson's Disease Research, Education and Clinical Centers – Va at <https://www.parkinsons.va.gov>. [Source: VFW Action Weekly | April 18, 2022 ++]

Ingrown Toenail

Causes/Risks and Treatment

Ingrown toenails are a common problem, especially on the big toes. They arise if the toenail grows into the skin next to it. That area becomes inflamed or infected and painful. The medical term for ingrown toenails is onychocryptosis or unguis incarnates. They are more likely to occur if you wear tight shoes, have very sweaty feet, or cut your toenails the wrong way.

Symptoms

Ingrown toenails cause the affected skin to become inflamed or infected. The blood supply to that part of the toe increases, and it becomes red, swollen and painful. Sometimes new tissue starts growing over the toenail. Doctors call this a granuloma, because the surface of the new tissue looks a bit like tiny granules. The inflamed area may weep, bleed or release pus and smell bad – especially if bacteria get into the wound.

Causes and risk factors

The symptoms are caused when the edge of the toenail presses into the skin and continues to grow. If this edge injures the skin and the soft tissue underneath it, the toe can become infected.

A toenail is more likely to become ingrown if

- It's cut too short or rounded at the edges,
- You wear shoes that are too tight,
- Your feet are very sweaty,
- You have inherited a certain toenail growth shape, such as “pincer” toenails, which are so curved that they look like part of a tube when seen from the tips of your toes,
- You are very overweight (obese),
- You have diabetes or a condition that can cause water retention in your feet, such as heart or kidney failure, or chronic venous insufficiency in your legs, or
- You are taking medication to treat cancer.

Prevalence and outlook

Ingrown toenails are common. 20 out of 100 people who see their family doctor because of foot problems have an ingrown toenail. Teenagers and young adults often develop them. This is because they tend to sweat more, for instance due to hormonal changes during puberty or when doing sports. But ingrown toenails are common in older people, too. They may have a higher risk because of medical conditions such as diabetes. Also, many older people are less flexible, making it difficult for them to take care of their feet and toenails. Because toenails get thicker with age, it's harder to cut them, too.

Doctors distinguish between three stages of severity:

- **Stage 1:** The nail has grown into the skin on the side. The skin hurts and has become inflamed.
- **Stage 2:** New, inflamed tissue (granuloma) has grown at the edges of the ingrown toenail. The tissue is weeping and producing pus.
- **Stage 3:** The skin around the toenail is chronically inflamed and keeps oozing pus. The granuloma has already started growing over the nail.

Effects

Ingrown toenails usually become noticeable early on because they hurt. If treated in time, it's often possible to manage the inflammation on your own. It will then go away without any consequences. But the inflammation can spread in people who have a weakened immune system and if bacteria infect the wound: That can cause an infection with pus around or under the entire nail. It is then advisable to see a doctor, especially if you also feel tired and have a fever, and the infection has spread along the toe and developed into cellulitis (an infection of deeper layers of skin).

Diagnosis & Prevention

An ingrown toenail can be diagnosed without any complex examinations. Doctors take a close look at the affected toe, and ask about the symptoms and any possible causes. Additional tests – like a blood test, for instance – may be needed if they think that the ingrown toenail has already led to complications, such as cellulitis.

There are several ways to prevent ingrown toenails. Good foot care is important – especially cutting your toenails. It is best not to round the toenails on the edges, and to leave them long enough so that the corners of the nails can freely rest against the skin to the side of them. Make sure that your shoes aren't too tight and leave enough room for your toes. Open or "breathable" shoes help to prevent sweaty feet. Go to <https://www.informedhealth.org/how-to-cut-toenails-properly.html> to learn how to cut toenails properly.

Treatment

The most suitable treatment for an ingrown toenail will depend on how severe it is. If the inflammation is mild and doesn't hurt much, the toe can be soaked in a soapy footbath and then the sore part of the toe can be treated with antiseptic or anti-inflammatory tinctures, gels or creams. It is important to dry the foot thoroughly after the footbath, wait a while before putting on shoes, and avoid putting pressure on the ingrown toenail.

The use of special gutter splints or braces can also help the nails to grow freely again. A podiatrist (foot specialist) can help to apply these devices. If you have a higher risk of foot problems due to diabetes, you should talk with your doctor first. It is generally a good idea to see a doctor if these measures don't help or if the skin around the ingrown toenail is producing pus and is severely infected. Surgery is usually recommended in that case. Various surgical procedures and techniques may be considered. For more on treatment and devices refer to <https://www.informedhealth.org/ingrown-toenail-treatment.html>.

Everyday life

An ingrown toenail can hurt a lot when you walk or stand. Open shoes and loose-fitting socks can reduce the pressure on the affected toe. At night, too, it's best to give the toe enough room to move and make sure that the sheets aren't right on top of it. If your bed has a footboard, you can hang the bottom of the sheets over it to leave space between your toe and the sheets.

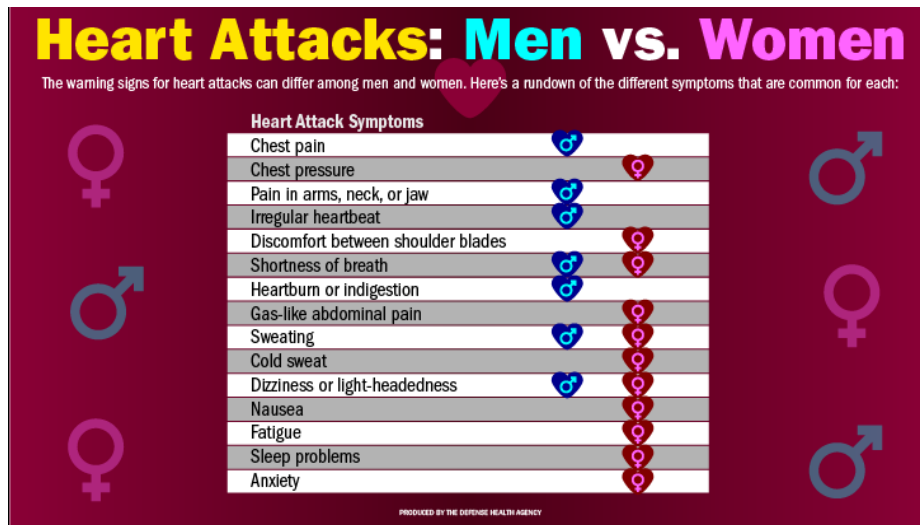
Some people find it hard to take care of their own feet and toenails – for example, because they have difficulties reaching their feet due to problems with their joints. If you can't – or would prefer not to – have someone you know help you out, you can seek professional care:

- As long as your feet and toenails are healthy, and you don't have any risk factors like diabetes, you can have a professional pedicure to trim your nails and remove calluses. You have to pay for this kind of treatment yourself.
- If you already have health problems related to your feet, then medical care by a podiatrist is an option. Some treatments may then be covered by your health insurer – for example, if the ingrown toenail problems were caused by diabetes.

[Source: <https://www.informedhealth.org/ingrown-toenail.html> | February 5, 2022 ++]

Heart Health for Women

Update 02: Heart Attacks Symptoms Can Differ from Men' | Know the Signs



Heart disease and heart attacks are the number one global killer of both men and women. But women often experience symptoms other than the classic crushing chest pain and left arm pain that typically afflict men having heart attacks. For example, women are more likely to experience pain between the shoulder blades, abdominal pain, and nausea. In some situations, a failure to identify the unique symptoms women experience can lead to delays in seeking treatment. When you are having a heart attack, minutes matter. Fast action can save lives. If you're a woman, here are the most common heart attack symptoms:

- **Chest pain or discomfort.** This is the most common symptom for both men and women, but some women may experience a sense of squeezing or fullness, and the pain can be anywhere in the chest, not just on the left side.

- **Pain in the arm(s), back, neck, or jaw.** This type of pain is more common in women than in men. The pain can be gradual or sudden, and it may increase or decrease before becoming intense.
- **Stomach pain.** This is a signal of a heart attack that is often mistaken for heartburn, indigestion or a stomach ulcer. Other times, women experience severe abdominal pressure. This is where it's best to be on the safe side and call 911.
- **Shortness of breath, nausea, or lightheadedness.** If you're having trouble breathing for no apparent reason, you could be having a heart attack, especially if you're also having one or more symptoms. More women than men experience this aspect of a heart attack.
- **Cold sweat.** This is another heart attack symptom more common in women having a heart attack. It may feel like stress-related sweating.
- **Fatigue.** Some women who have heart attacks feel extremely tired, even if they haven't moved much. You may feel the tiredness in your chest.

How Long Can a Woman Have Symptoms Before a Heart Attack?

Many people expect a heart attack to come on suddenly. But research suggests that women experience symptoms for several weeks before a heart attack. Doctors say it's important to encourage women to seek medical care when they have symptoms. "Despite women have more symptomatic chest pain than men, they are less likely to have timely and appropriate care," said Air Force Lt. Col. (Dr.) Travis Batts, medical director of cardiology at Wilford Hall, Lackland Air Force Base, San Antonio, Texas. He pointed to the 2021 guidelines on chest pain at <https://www.ahajournals.org/doi/10.1161/CIR.0000000000001029>.

Also, keep in mind you can have heart problems -- even a heart attack -- without chest pain. That's particularly common among women. If you experience heart attack warning signs call 911 immediately. This is almost always the fastest way to get life-saving treatment and preserve your heart muscle and tissues. An emergency medical services team can begin treatment when they arrive – up to an hour sooner than if you get to the hospital by car. EMS staff are also trained to revive someone whose heart has stopped. Patients with chest pain who arrive by ambulance usually receive faster treatment at the hospital, too.

Should I Take Aspirin During a Heart Attack?

Medical advice on taking aspirin has changed over the years when it comes to treating an initial heart attack or preventing a subsequent heart attack.

- Don't do anything before calling 911. Specifically, don't take an aspirin then wait for it to relieve your pain. Aspirin alone won't treat your heart attack.
- The emergency operator can advise you whether to take aspirin and how much to take.

- If the operator does not suggest aspirin, you may receive the drug in the ambulance or emergency department.

Younger women are having more heart attacks, according to a National Heart, Lung, and Blood Institute study in 2019. Researchers were surprised to find that while the heart attack rate has decreased among older adults, it's risen among those ages 35-54, especially women. The study National Heart, Lung, and Blood Institute study on Twenty Year Trends and Sex Differences in Young Adults Hospitalized With Acute Myocardial Infarction reviewed more than 28,000 hospitalizations for heart attacks in four cities.

One condition, spontaneous coronary artery dissection, or SCAD, causes a small percentage of heart attacks overall, but is responsible for 40% of heart attacks in women younger than age 50, according to 2020 research Review on Spontaneous Coronary Artery Dissection on the American College of Cardiology website from the American College of Cardiology. The average SCAD patient is just 42 years old and is likely healthy and active.

The Bottom Line

"As our approach to the diagnosis and management of chest pain syndromes continues to evolve, we must highlight the impact of racial and ethnic disparities on the evaluation of patients with chest pain," Batts said. "There are disparities in chest pain management in diverse populations that lead to worse outcomes, increased heart attacks, and higher death rates." His bottom line recommendations? "For both women and men alike, the keys to improving your heart health are simple: Take all symptoms seriously, ask questions about your heart health, and get screened yearly for heart disease risk factors."

[SourceHealth.mil | February 11, 2022 ++]

Sleep

Update 16: Why You Shouldn't With the TV On

Getting a good night's sleep is the best thing you can do to stay healthy. For many of us, a few things help to put us to sleep faster. For example, some people read before sleeping, some listen to music, while some watch TV. But is it really what you should be doing to yourself? Furthermore, why shouldn't you sleep with the TV on?

Many people find that sleeping with the TV on helps them sleep. However, experts agree that this isn't a good idea. Sleeping with the TV increases your exposure to blue light, which can disturb your circadian rhythm and increase your risk for diabetes, obesity, and other health problems. Sleeping with the TV on could be doing more than just weight gain. So, if you're someone who loves to binge-watch Netflix shows before diving into a deep sleep, read the article to know whether it's good for you?

Is It A Good Idea To Sleep With A TV On?

There has been a lot of research about how the technology we use affects our sleep, mood, mental state, and overall health. In addition, many studies also examined how the devices we use to view them, like laptops, cell phones, and TVs, impact our health. While detailed research is still ongoing but as per the consensus, if you can avoid any of the mentioned devices before sleeping, you should. According to a National Sleep Foundation poll, 60% of Americans watch TV right before falling asleep. For some, it's just a nightly ritual, while some claim that the background noises help them fall asleep faster.

Sleep is not just losing consciousness. Many changes occur within the body to allow sleep and to optimize regeneration during sleep. Have you wondered why staying up late at night, even if you sleep late into the day, often leaves you feeling tired and groggy? It happens because sleep at night is so much more restful than sleep during the day. Even if you manage to operate out of sync with the sun, doing so may harm you in many ways and age you prematurely. For sleep to be effective, you must time the processes that go along with sleep properly.

Melatonin is a hormone that puts you to sleep, and the brain starts releasing it after three or four hours of darkness. To be more precise, melatonin is released after the blue light and green light have disappeared from the environment. So naturally, green and blue light disappears from the environment after the sunset, but when you look at your phone, turn on your bathroom light, or look at your television, you unknowingly stop the melatonin release by exposing yourself to the blue or green light.

Watching TV Before Bed Disrupts Hormones

Sitting in front of the television before going to bed can trick our bodies into thinking that it's still daytime. There has been up to a 22% decrease in melatonin in people who watched television before going to bed. As a result, when your brain thinks it's still day, it makes falling asleep and staying asleep very difficult for you.

Watching TV Increases Sleep Debt

As you know, getting 8 hours of sleep a day is crucial for every adult. If you sleep less than 8 hours a day, the situation is known as sleep debt. In simple words, if you sleep 6 hours a day, 2 hours will be a sleep debt. Like any other debt, sleep debt is something you will want to avoid. It can highly impact your ability to think properly and stay focused throughout the day. In addition, if you ignore it, over time, it can cause many physical and mental health problems. When you watch TV before sleeping, you get less sleep than you think. The natural reason is due to less

secretion of melatonin. Another reason you are adding to the sleep debt when you stay awake for another episode.

Watching TV Can Stimulate Your Brain

While trying to sleep, the last thing you want for your brain is stimulation. Your brain stays active when it receives stimulation. And an active brain makes it incredibly hard to fall asleep. According to experts, watching TV or listening to TV provides stimulation to the brain, leading to strange dreams or nightmares. It overall affects the quantity and quality of your sleep.

Watching TV May Affect Your Health

When you leave the TV on, you get less sleep. Without enough sleep, you are at risk of experiencing the following ill effects:

- Memory loss
- Weakened immunity
- High blood pressure

According to a study published in 2019, sleeping with artificial light is associated with the risk of obesity. So even if you sleep for 8 hours in front of the TV, it could affect your health in the long run.

Is It Okay To Occasionally Watch TV Before Sleeping?

If you insist on watching TV before going to bed, use a program on your laptop, TV, or even phone, limiting the blue light coming from the screen. You can either install blue light filtering software on the laptop or phone or wear blue light blocking glasses while watching TV.

Tips to get better night sleep:

- Try nighttime showers or baths.
- Avoid alcohol at least 2 hours before your bedtime.
- Don't eat a heavy dinner.
- Use a comfortable pillow and mattress.
- Do not consume coffee close to your bedtime.

The Bottom Line

Many people claim that keeping the TV on during the night helps them sleep faster. But according to the experts, this isn't the case. Sleeping with the TV can reduce the sleep you get, reduce the melatonin production in your body, and lead to many long-term ill effects. So, you should avoid watching TV before sleeping for an overall healthy sleeping pattern. [Source: Ziggy Social | June 15, 2021 ++]

Gout

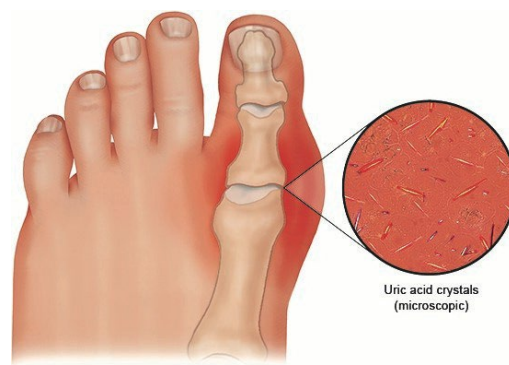
Symptoms, Causes, & Effects

Gout is a metabolic disorder which causes inflammation of the joints. During acute episodes, certain joints swell up within just a few hours and become very sensitive to pain. The inflammation is triggered by tiny needle-shaped crystals of uric acid that mainly build up in the joints. These crystals may form if there's too much uric acid in the body. The inflammation normally goes away on its own within one to two weeks. The pain can be relieved with medication.

Most people with gout experience acute attacks every now and then. Months or even years can pass between attacks, but they may be more frequent too. There are a number of options to prevent them. Some people already notice an improvement if they avoid certain foods and other possible triggers. Others may take medication to lower their uric acid levels over the long term. The medication is mostly considered for people who have frequent gout attacks or complications such as kidney stones or lumps of urate crystals called tophi. Many people have high levels of uric acid without it causing any noticeable problems. It is not clear whether this affects their health. It doesn't need to be treated.

Symptoms

Gout attacks often begin at night or in the early morning with sudden, very painful joint swelling. The inflamed joint is sensitive to pressure, and becomes overheated and red. The swelling and other symptoms are usually at their worst after six to twelve hours. The joint often becomes so sensitive that even the weight of a duvet or comforter is unbearable. When the swelling goes down after a few days, the skin around the joint may begin to peel.



An initial gout attack often only affects one joint, usually the base of the big toe. The midfoot and ankle joints, knees, elbows, wrists and knuckles may also become inflamed. Attacks of gout are very rare in the shoulders or hips. If the gout is chronic, the joints will remain slightly inflamed all the time. They may become disfigured over the long term, making it harder to move them. In gout, tiny uric acid crystals build up in the body, mainly in the joints

Causes

Gout may arise from too much uric acid in the bloodstream. It is estimated that only about one in three people with high uric acid levels develop gout, though. Uric acid is a waste product of substances called purines, which are components of nucleic acid, an important building block in our body. Our kidneys normally get rid of a certain amount of uric acid by releasing it into our urine. But in some people, the kidneys don't get rid of enough uric acid. That causes uric acid levels in the body to increase. If they are too high, the uric acid may start to form crystals that build up in body tissue. The crystals usually build up in the joints, where they can trigger attacks of gout.

Certain medical conditions may also contribute to the build-up of too much uric acid, including some blood disorders or specific cancers such as leukemia. In rare cases, gout occurs because the body is producing too much uric acid. This could happen due to a hereditary disease that affects the functioning of particular proteins (enzymes) involved in uric acid metabolism. Besides increased uric acid levels, other factors may also be involved, such as the balance of fluid in the joints. Too little joint fluid can increase the risk of uric acid crystals forming there. The acidity (pH) level of the joint fluid and the temperature of the joint also have an influence.

Risk factors

Anything that increases uric acid levels can also increase the risk of gout. People who have already had a gout attack are at greater risk of having more attacks. The following things have been scientifically proven to be risk factors for gout:

- Medicines that increase uric acid levels: These include diuretics and acetylsalicylic acid (the drug in medicines like Aspirin), as well as special drugs that are taken after an organ transplant. Levodopa, a Parkinson's treatment, and cancer medications can also increase the risk of gout.
- Meat, fish and seafood: These foods contain a lot of purines. If they are eaten in large quantities, they slightly increase the risk of gout. Some plant-based foods are also rich in purines, but studies haven't found any proof that they influence the development of gout.
- Alcohol: Alcoholic drinks promote the production of uric acid and have a diuretic effect. Alcohol also causes the kidneys to release less uric acid. Beer in particular contains a relatively high amount of purines too. Studies have shown that beer and high-proof alcohol can increase the risk of gout. Wine (in moderation) appears to have no influence.
- Sugary drinks: Drinks that have too much sugar may play a role as well. This is true of both sugary drinks like cola, and possibly of fruit juices as well. Soft drinks that contain sweeteners instead of sugar and fruit have not been associated with gout.
- Being overweight: Being overweight – and having a higher body mass index – increases the risk of gout.

Even if certain foods and other factors may slightly increase the risk of gout or gout attacks, it is more critical that the kidneys are working well and are consistently able to reduce high levels of uric acid.

Prevalence

Gout is the most common inflammatory joint disease (arthritis) in industrialized countries like Germany. It is estimated that 1 to 2 % of the population are affected. Men are a lot more likely to get it than women. It is five times more common in men, and they develop it at a younger age than women do. While gout mostly occurs in men aged 40 and up, it usually only affects women after menopause. That's due to the influence of hormones on the kidneys.

Outlook

Following an attack of gout, the affected joint usually recovers on its own within one to two weeks. Most people who have had a gout attack will have another one anywhere between six months to two years later. Repeated attacks may last longer and affect several joints. After an average of about twelve years, gout can become chronic and damage the joints. Acute gout doesn't always become chronic, though. The risk of that happening depends on various factors, including how high the uric acid levels are.

Another possible consequence of gout is the development of chalky nodules called tophi, which form from uric acid deposits in soft tissue. They usually build up over several years, and are especially common in the elbows, the Achilles tendons, the toe and finger joints, and the ear. Most tophi are not painful. If untreated, about 30 out of 100 people with acute gout develop tophi within five years. The tophi may disappear again over time if uric acid levels are lowered by treatment.

Effects

If the gout becomes chronic and damages the joints, it restricts mobility and can also weaken the muscles. In rare cases, uric acid crystals will form in places that are not typical for gout, for example around the spinal cord or the carpal tunnel in the wrist. If tophi form there, they can put pressure on nerves and trigger complications such as carpal tunnel syndrome or symptoms of paralysis due to pressure on the spinal cord. People with gout are also at greater risk of kidney stones. Kidney stones can be painful and increase the risk of urinary tract infections. On average, nearly 1 out of 100 men with gout will develop kidney stones within one year.

[Source: <https://www.informedhealth.org/gout.html#Further-information> | March 2022 ++]

Gout

Update 01: Diagnosis, Treatment, & Living with It

Doctors are often able to recognize gout based on its typical symptoms and risk factors. Painful, reddened swelling at the base or the final joint of the big toe is a fairly sure sign of gout.

"Arthrocentesis" is needed for a definitive diagnosis. This procedure involves using a fine hollow needle to take a sample of the joint fluid, which is then analyzed in a laboratory. If uric acid crystals are found in the fluid, the diagnosis is confirmed. Arthrocentesis is done if the symptoms aren't clear or if other possible causes need to be ruled out. In particular, these include a bacterial infection of the joint, for instance caused by an injury. This needs to be treated quickly. Simply measuring uric acid levels in the blood is not enough for a clear diagnosis because they often drop to a normal range during a gout attack.

The treatment of gout has two aims: In the short term, it should provide pain relief during gout attacks. In the long term, it should prevent further attacks and lower the risk of chronic inflammations and joint damage. Gout attacks are treated with anti-inflammatory medications. These include

- Anti-inflammatory painkillers, such as ibuprofen, indometacine or naproxen,
- Steroid medicines (usually tablets with prednisolone), as well as
- The gout medicine colchicine. Because colchicine is slow to start working and has certain possible side effects, it is no longer used very often.

If a single drug can't provide enough pain relief, the treatments can be combined. Cooling the affected joint probably also helps, and most people find it very soothing. The goal of long-term gout treatment is to prevent gout attacks and complications by lowering the level of uric acid. This can be done in two ways:

- Changing your diet: Especially eating less meat, fish and seafood, and drinking less alcohol.
- Taking medication to lower your uric acid levels, typically allopurinol.

Not everyone who has gout needs to take medicine to lower their uric acid levels. In particular, people who have already had a gout attack usually don't need to take it. This is because some people don't have any problems after that for years, and others only have them rarely. Medications for lowering the levels of uric acid are mostly considered if changing your diet doesn't have the desired effect or if the gout attacks become more frequent or are especially bad. It also makes sense to take it if complications such as tophi or kidney stones have already developed, or if the functioning of the kidney is affected.

The pain during a gout attack can be very severe, making many daily activities completely impossible. It can become challenging to walk, cycle, put on shoes or grasp objects. But over time some people develop a feel for when a gout attack is coming on. The joint may begin to twitch, tingle, feel numb or go stiff right beforehand. They can then prepare for an attack. For instance, they can make sure that certain activities are completed before the pain gets worse so that they can rest the joints during the attack.

But a gout attack isn't just a physical problem. It can make it impossible to get a good night's sleep, and also take a psychological toll. Going to work or doing household chores is usually out of the question. It can be helpful if family and friends are aware of how painful a gout attack is. Then they will understand why it's so important to rest and take it easy. There's no reason to feel guilty because you can't work and can't do as much with your partner or family and friends. Gout used to be considered a disease of the wealthy that mostly affected portly older men who drink a lot of alcohol. Because of this, some people with gout still have the feeling that they are seen as living lives of excess. But this is a stereotype – the disease may have different causes altogether. What's more, a lot of people have high uric acid levels but no symptoms. So you shouldn't feel that you are to blame for having the disease, and you also shouldn't worry too much about your diet.

Gout attacks can change the way you feel about your own body. Younger people in particular may find it very hard to have a disease that is usually associated with older people. Women with gout sometimes feel unattractive, for instance because they are limited as to what shoes they can wear. Any kind of pressure on the affected area can be very painful during an attack of gout, including physical activities and even gentle touch.

[Source: <https://www.informedhealth.org/gout.html#Further-information> | March 2022 ++]

Pinworms

Common In Kindergarten And Elementary School Children

Many people find the thought of having living worms in their body unpleasant. That's not only true for adults. Children who have worms may also feel ashamed and disgusted. But there is no reason to feel ashamed about having worms. And even though worms might be unpleasant, they're usually not harmful or dangerous. But they do often cause itching around the bottom at night, which can make children feel very uncomfortable. Worm infections aren't at all unusual in children. Pinworms (threadworms) are the most common type of worms in children. These

worms are whitish in color and very small, but can be seen with the naked eye. Other types of worms, like roundworms and tapeworms, are less common in Europe.

One typical sign of pinworms is itching around the anus ("butthole") and bottom – especially at night. But a lot of children have no symptoms at all, or hardly any. If a child often scratches their bottom, they may have pinworms. In younger children, the itching might cause them to slide along the floor on their bottom or wriggle their legs about. Because the itching is often worst at night, it can affect their sleep. The worms can sometimes be found around the anus, in underwear, or in the child's bed. Worms that leave the body in stool (poo) can't always be seen.

Causes

Children get worms when they swallow pinworm eggs. The eggs are so tiny that you can't see them with the naked eye or feel them. So children don't notice it when they swallow them. Worm eggs can get onto their fingers and are also found on things like toys and food, or in dust. But how do the worm eggs get there?

If a child swallows worm eggs, that can start a cycle: The eggs get into their bowels, where they grow into worms. Then the worms lay new eggs around the anus. Worm eggs are quite sticky and cling on well. They can then easily get onto your fingers if you scratch your bottom, and then spread to objects or food when you touch them with your fingers. Worm eggs also often get stuck under the fingernails when scratching, and can easily stay there even after washing hands. The eggs may be swallowed by other children or by the same child again. Worm eggs are usually infectious for up to 5 days.

It takes around 2 to 6 weeks for swallowed eggs to turn into worms that lay more eggs. To do so, they crawl through the bowels towards the anus and lay thousands of new eggs in the skin folds there. That mainly happens at night when the child is asleep. The laying of the eggs can cause itching and make the child want to scratch. The worm eggs sometimes pass from the anus to underwear or bedding. Because they're so small, they may be thrown up into the air and swallowed when shaking out bedding. That rarely happens, though. Humans are the only hosts for pinworms. That means they can't be passed on by other animals or in the stool (poo) of other animals.

Prevalence & Outlook

Pinworms are most common in kindergarten and elementary school children. It is thought that about 1 in 5 of these children are affected. The worms are most common in children between the ages of four and eleven. They are quite rare in children under two and in teenagers. Adults who have close contact with children in this age group can also become infected, but it's not known how often that happens.

If pinworm infections aren't treated, children often "infect themselves" time and again. Because of this, worms don't usually go away on their own. They are also easily spread within the family. You can only get rid of worms properly if all the affected family members and close contacts are treated. If there are a lot of worms in the bowels, they can cause belly ache, nausea and vomiting. Inflammations may occur, for instance in the bowels or vagina, but this very rarely happens.

If the skin around the anus is irritated by scratching, bacterial infections are more likely to develop there. The possible symptoms of a bacterial infection include very red skin and a rash.

Diagnosis & Treatment

If children have an itchy anus and regularly scratch their bottom, they're quite likely to have pinworms. A doctor can find out whether the itching really is being caused by worms. Doctors will usually suggest doing a sticky tape test. This involves firmly pressing a piece of see-through sticky tape onto the child's anus in the morning. The tape is then removed and stuck onto a thin piece of glass (a glass slide). This is examined under a microscope in the doctor's practice, to look for worm eggs.

Parents do the sticky tape test with their child at home, on three days in a row – in the morning, before the child goes to the toilet or while changing the first diaper of the day. The glass slides with the test strips are collected and examined later in the doctor's practice. Doctors usually suggest that other family members also do the test because it's common for more than one person in a family to have worms. You can sometimes see the worms without doing a test, such as on the child's bottom, in their underwear, bedding, or poo.

Pinworms can usually be treated effectively with medication known as anthelmintics (anti-worm drugs). If the doctor confirms that the child has worms, they will give you a prescription. Sometimes all of the child's family members have the treatment as well. The medication is available as a tablet to be swallowed, a chewable tablet, or a syrup that younger children can swallow too. The medication only has to be taken once at first. It is taken again after two to four weeks, to get rid of all the worms and prevent a new infection. Anti-worm drugs are usually well tolerated. If side effects occur, the most common ones are belly ache, diarrhea, gas, nausea, and vomiting.

Apart from anti-worm drugs, good hygiene is also an important part of treatment. Otherwise, the child will almost certainly keep getting worms again and again. Here are some tips for good hygiene:

- Wash hands regularly and thoroughly, especially before eating and after using the toilet. Parents should do this too, for instance after changing their child's diaper.

- Clean the child's bottom every day, as soon as they wake up. Do not take a bath together, just in case.
- Avoid scratching. Make sure the child doesn't scratch their bottom. If they do scratch their bottom, make sure they wash their hands properly afterwards. Wearing cotton gloves can stop worm eggs from collecting under the fingernails if children do scratch themselves without meaning to – for instance, at night. Sometimes, creams are also used to soothe the itching.
- Keep fingernails short and clean, and scrub the underside regularly using a nail brush. Make sure that the child doesn't bite their nails or put their hands in their mouth.
- Change underwear daily.
- Regularly change bedding. It is especially important to change the child's bedding on the days after taking the medication.
- Do not share towels. Each family member should use their own towel and flannel.
- Wash laundry in hot water. Children's underwear, pajamas, bedding and towels should be washed at temperatures of at least 40 degrees Celsius (104 degrees Fahrenheit), or hotter if possible.

Doctors sometimes recommend not shaking out bedding, to avoid throwing eggs up into the air where they can spread around the room with the dust. If you think that objects like toys might have worm eggs on them, you can clean them with soap under hot running water, or put them in the dishwasher or washing machine. Even after successful treatment, it's still a good idea to stick to simple hygiene rules like regularly washing hands and making sure your child doesn't put their fingers in their mouth. That reduces the likelihood of getting worms again (and other illnesses). [Source: <https://www.informedhealth.org/worms-in-children-pinworms.html> | April 2022 ++]

Filing Your Taxes

Actions to Take After Doing So

If you were required to file 2021 taxes, hopefully you did so by April 18 ... or at least filed for an extension. This was the first time in two years federal taxes were due in April, and millions of taxpayers rushed to file at the last minute. While most folks would rather forget about their taxes for another whole year, there are a few actions that you should take before filing away all those forms and documents.

1. Check the Status of Your Return

The IRS says that it issues 9 out of 10 refunds within 21 days. However, some returns require additional review, and the IRS has issued a statement explaining why some might take more time, with reasons ranging from errors to suspected identity theft. One thing is clear: Don't count on receiving the money by any particular date. If you're curious about the status of your refund,

you can use the IRS' Where's My Refund tool at <https://www.irs.gov/refunds> 24 hours after e-filing and four weeks after mailing in your return. The status is updated daily.

2. Have a Plan for Your Refund

You may not know when your refund will arrive, but you should have some idea what to do with it when it does. Whether it's boosting your emergency fund, paying off debt, or saving for your kids' education, have a concrete plan in place. Otherwise, that money may get treated (and spent!) as an unexpected windfall.

3. Revisit Your Withholding Amounts

If you had an unexpectedly large refund or, conversely, an unexpected tax bill, then you might want to adjust the amount withheld from your paycheck or your retired pay. Remember, a huge refund generally means that you gave the government an interest-free loan. On the other hand, if you withhold too little, you may be subject to penalties and be forced to make estimated payments in the future.

The IRS has a withholding estimator at <https://www.irs.gov/individuals/tax-withholding-estimator> which you can use to figure out your federal tax withholding. If you have no earned income, only a pension, then you can use Form W-4P at <https://www.irs.gov/pub/irs-pdf/fw4p.pdf> to determine the correct amount of tax to withhold. You can also visit MOAA's Military State Report Card and Tax Guide at <https://www.moaa.org/content/state-report-card/statereportcard/> for up-to-date details on your state taxes.

[Source: MOAA Newsletter | Lila Quintiliani | April 21, 2022 ++]

Medical Debt

Update 01: White House Plans to Blunt It for Vets & Home Borrowers

Vice President Kamala Harris announced new steps designed to reduce the cost of federal home loans for Americans saddled with medical debt and make it easier for veterans to have health care bills forgiven during an event 11 APR at the White House. "I have met so many people in so many communities in our nation who are struggling with this burden, many of whom are managing an illness or an injury at the same time, and who stay up at night staring at the ceiling,

wondering if they will ever be able to pay off their medical debt,” Harris said. “No one in our nation should have to endure that.”.

The efforts include a push within the federal government to stop considering medical debt when determining eligibility for loans -- including in programs like the Department of Agriculture’s \$20 billion rural housing program. Because the government won’t consider how much applicants owe in medical expenses, those in debt should receive more favorable terms on loans to buy or build new homes.

The Department of Veterans Affairs will also cease reporting of debt that veterans owe the VA for their health coverage to credit reporting agencies, and will modernize programs designed to help former service members have some of their medical debts forgiven. The department will launch an online portal to process forgiveness requests, and simplify eligibility criteria in a bid to expand the number of veterans who take advantage of existing programs to discharge their debts. One-third of American adults currently have medical debt, with Black and Hispanic households more likely to incur it than White households, according to the White House.

Harris made the announcement Monday during an event with White House economic adviser Brian Deese, Secretary of Health and Human Services Xavier Becerra, and budget director Shalanda Young. The moves come as the White House has sought ways to reduce costs for Americans facing inflation that has soared during the coronavirus pandemic, leading to some of the highest price increases in four decades. The inflation spike prompted the Federal Reserve to begin raising interest rates, resulting in higher costs for mortgages and consumer credit. “The president and I know that one of the biggest challenges facing working families today is the rising cost of living,” Harris said.

The Biden administration estimates that about one in three American adults has medical debt, which accounts for more debt collections than credit cards, utilities and auto loans combined. The administration’s actions follow previous efforts by the consumer credit agencies Equifax, Experian, and TransUnion to remove medical debt that was either less than \$500 or that had been repaid from credit reports. But more than 11 million Americans are estimated to have medical debts above \$2000. The Consumer Financial Protection Bureau said in a 1 MAR report that around \$88 billion in uncollected medical debt was reported to credit bureaus, making up some 58% of all uncollected debt on U.S. consumers’ credit reports.

The CFPB is expected to release a report on consumer complaints related to medical billing later this month, and announced that it is making preventing unlawful medical debt collection a new enforcement initiative. The agency has previously said it is reviewing whether medical debt should be removed from consumer credit reports altogether. The Department of Health and

Human Services announced that it is requesting data from more than 2,000 medical providers on bill collection practices, financial product offerings, and debt-buying practices. The government says it will begin using that information as it determines federal grants, in a bid to dissuade hospitals and health care facilities from abusive billing practices. [Source: Bloomberg | Justin Sink and Nancy Cook | April 11, 2022 ++]

SNAP and WIC Programs

How These Nutritional Programs Differ

The Supplemental Nutrition Assistance Program ([SNAP](#)) and the Special Supplemental Nutrition Program for Women, Infants and Children ([WIC](#)) are federally funded health and nutrition programs. SNAP and WIC help low-income families and their children. SNAP and WIC are not the same program. SNAP gives a monthly dollar amount on a preloaded Electronic Benefits Transfer (EBT) card to buy food for you or your family. A pre-determined amount will be loaded onto your EBT card based on your household income. Learn more about EBT cards on the U.S. Department of Agriculture's (USDA) website <https://www.fns.usda.gov/snap/ebt>.

WIC does not provide a dollar amount to buy food items. Through WIC, you can get nutrition education, breastfeeding support and referrals, and nutritious foods based on your situation (pregnant, breastfeeding, postpartum woman, infant or child). WIC foods are chosen based on nutritional value and USDA standards. WIC recipients will be given a WIC card. To use your benefit, swipe your WIC card the same way you would with a debit or credit card. You can learn more about WIC cards on USDA's website <https://www.fns.usda.gov/wic/wic-electronic-benefits-transfer-ebt>.

For SNAP, you need to apply in the state you currently live in and meet certain bank balance limits. A household with an elderly or disabled household member may have a higher bank balance limit. Visit SNAP's eligibility page at <https://www.fns.usda.gov/snap/recipient/eligibility> to read more about eligibility requirements. For WIC, you need to apply in the state you currently live and be one of the following:

- Pregnant
- Breastfeeding
- Postpartum, or
- Have a child under five

If you or your family members receive other benefits, such as Medicaid or TANF, you may automatically meet the income eligibility requirement. Visit the WIC Income Eligibility

Requirements page at <https://www.fns.usda.gov/wic/wic-eligibility-requirements> for more information. If your household is eligible for SNAP and WIC, you should be able to receive benefits from both programs at the same time.

How to Apply

Applications for SNAP and WIC are managed by states. Each state has a different application. Some states offer online applications and others require you to apply in person or by mail.

- To apply for SNAP, find your state on the Food and Nutrition Service's state locator map at <https://www.fns.usda.gov/snap/state-directory> and contact your state agency.
- To apply for WIC, find your state's program contact or website from the WIC Directory at <https://www.fns.usda.gov/contacts/contact-map>

To find related benefits Visit USDA's Food and Nutrition page at <https://www.benefits.gov/categories/Food%20and%20Nutrition> and filter by state or category. The USDA News page at <https://www.benefits.gov/news/categories/Food-and-Nutrition> is also available for articles about nutrition and food benefits. To find more government benefits you may be eligible for take the Benefit Finder questionnaire at <https://www.benefits.gov/benefit-finder>. [Source: Benefits.gov Compass Newsletter | April 15, 2022 ++]

Tax Refund

Update 03: Expect Average 6 Month Delay for 2021 IRS Filings

The Internal Revenue Service is halfway to meeting its ambitious hiring goals for the current fiscal year, the agency's commissioner told lawmakers on 21 APR, but still cannot assuage concerns that tax return backlogs and customer service wait times will continue to balloon.

The 9 million Americans who have so far used paper forms to file their 2022 taxes will wait an average of six months for their returns, National Taxpayer Advocate Erin Collins told members of the House Oversight and Government Reform Committee. While mandatory overtime for 6,000 employees, surge team deployments and a hiring influx have reduced the existing backlog, IRS still has 6 million returns from 2021. The number of paper filings in 2022 and the manual procedure through which IRS processes them will make it difficult for the agency to dig out from that hole, Collins said.

IRS Commissioner Charles Rettig recently announced a plan to bring on 10,000 new employees over the next two years to address the crisis. Congress “rescued” the agency from “death” when it provided direct hiring authority in March, Rettig said, allowing it to already bring on 2,500 tax examiners and clerks on the way toward its goal of 5,000 new employees by the end of September. IRS has held job fairs and has hired 90% of those who show up since receiving access to the special hiring mechanism, the commissioner added. Congress also provided IRS with a funding increase of \$675 million as part of the fiscal 2022 omnibus spending bill, the largest bump since 2001.

President Biden requested an additional 18% bump for fiscal 2023, and has sought an \$80 billion surge over 10 years as part of his larger social and climate spending package. Republicans pushed back on the need for more spending at IRS, saying the agency must learn to be more efficient. “More funding alone is far, far too simplistic of an answer,” said Rep. Jody Hice, R-Ga., the top Republican on the Government Operations Subcommittee that held Thursday’s hearing. He accused Democrats of suggesting that “just throwing more money at IRS will somehow solve all the IRS’ problems” and asked, “How could anyone possibly come to that conclusion?”

Collins stressed that more funding must be part of the solution, saying IRS is still dealing with a "toxic combination" of office closures during the pandemic, inadequate staffing and the diversion of resources away from core work to process COVID-19 relief efforts such as stimulus payments and child tax credits. That has led to an “unprecedented imbalance between the IRS’ workload and the resources it has available to do the work.” Rettig projected IRS is still facing a \$100 million shortfall for operations support in the current fiscal year, warning the agency will have to make cuts elsewhere in its budget if the situation is not addressed. [Source: Government Executive | Eric Katz | April 21, 2022 ++]

Free Gift Scam

This New Phishing Scam Is Everywhere

Every few months, a new scam pops up that seems to be everywhere. A new version is here! In the past few weeks, BBB Scam Tracker has received numerous reports of a text message scam that attempts to trick people with the promise of a “free gift.”

How this scam works

- You receive a text message that says something like this: “Your bill is paid for March. Thanks, here’s a little gift for you.” This message followed by a link to an unfamiliar

website. The text doesn't specify what bill you paid, what company the message is coming from, or what the total amount was. Even more disturbing, the message may be a group text sent to a dozen or more other people, none of whom are in your contacts list.

- The text isn't from a real company. The goal is to get your personal information, which puts you at risk for identity theft. In some versions of the scam, you may be directed to a website asking you to "confirm your identity," so you can receive the gift. Scammers may also ask for your credit card information, claiming you need to pay a few dollars to ship the "free" gift.

How to avoid text scams:

- **Don't click on links from strangers.** In fact, be wary of suspicious links forwarded to you by friends too. Even well-meaning friends may forward suspicious links without realizing they've been scammed. Scammers often use links along with either an exciting offer or a threat as part of a phishing scam. They want to elicit an emotional response from you, so you'll click on the link without thinking.
- **Call the company directly to confirm messages sent by text.** If you think the message came from a company you do business with, call them directly before you click on any links. Keep in mind that businesses need your permission to send you text messages. If you never opted in to receive text messages from a company, the text is probably a scam.
- **Use good judgement.** Scammers love to trick people with offers that are too good to be true. If you get a message promising you'll receive an amazing gift for free, it's probably a scam.

For more information

Avoid getting scammed by reading the [BBB Tip: Spot the red flags of fake text messages](#). You can also find helpful tips at [BBB.org/AvoidScams](#). If you've spotted a scam (whether or not you've lost money), report it to [BBB Scam Tracker](#). Your report can help others avoid falling victim to scams. Learn how to spot a scam at [BBB.org/SpotAScam](#). [Source: Better Business Bureau | April 15, 2022 ++]

Energy Auditor Scam

Be Careful of Con Artists Promising To Save You Money?

Summer is coming, and rising temperatures mean high air conditioning bills. Scammers have devised a new con that claims to “save you money.” Con artists, posing as local government and utility company representatives, are offering phony home energy audits and services. Here’s what you need to know to spot the scam.

How this scam works

- ‘You are contacted over the phone or in person at your front door. The “representative” introduces themselves as working for your utility company or with the energy division of your local government. They may even show you identification, but it isn’t real.
- Scammers inform you that you could be saving big on your energy bill. Some con artists will even insist on a tour of your home. These individuals may offer to install filters, thermostats, or other energy equipment to lower your bill, or they may say simply you are eligible to pay less. In either case, they’ll ask you to sign a contract and possibly even run a credit check. They will also ask for billing information, including your debit or credit card number.
- In the end, you won receive any discount on your energy bill and any services. The equipment you were promised won’t be delivered. That’s because this “home energy audit” is a scam. You may, however, be charged the fees mentioned in the contract, and your personal information will be in the hands of a scammer.

How to spot these scams:

- Don’t agree to anything on the spot. No matter how good the deal seems or how urgent the individual makes their offer seem, take time to do your research. Tell the person you need time to think about their offer and hang up or close the door. Scammers may tell you you’ll miss out on the deal, but taking immediate action isn’t worth getting scammed.
- Go to the source. Contact your local government agency or your utility company directly to confirm whether they really are offering energy audit services. This is the quickest way to find out if you are dealing with an impostor.
- Get help. If you aren’t sure about what you’re being offered, talk to someone. Call a trusted friend or family member or contact your local BBB to find out if it you are dealing with a scam.

For more information

Learn more ways to protect yourself from scams by reading the [BBB's tip on avoiding impostor scams](#). You can find additional information at BBB.org/AvoidScams. If you’ve spotted a scam (whether or not you’ve lost money), report it to [BBB Scam Tracker](#). Your report can help others

avoid falling victim to scams. Learn how to spot a scam at [BBB.org/SpotAScam](https://www.bbb.org/SpotAScam). [Source: BBB Scam Alerts | April 22, 2022 ++]

Employment Scams

Update 02: New Job Asked You To Interview Via App? Be Careful

Whenever the economy threatens to take a dip, scammers love to bring back the good old employment scams. BBB Scam Tracker has gotten multiple reports of a new job scam twist that involves downloading a messaging app.

How this scam works

- You receive a message from someone interested in hiring you. It might come through email, text, or even a social media platform. At first, this “recruiter” seems professional. They claim to have seen your resume on a job search site and want to interview you for a position. But first, you need to download a messaging app, such as Telegram.
- Once you download the app, the “recruiter” will ask you to complete a few interview questions. After giving you enthusiastic feedback, they will offer you a position with their company. That is followed by an official-looking contract to fill out and sign. After you sign, the scammer will ask for your name, address, date of birth, and banking information, claiming they need to add you to direct deposit payroll and other company systems.
- Some versions of this scam don’t end there. As a new hire, you are referred to a “training manager” who will help you set up your home office. This person sends you a check to buy a laptop and other supplies. After depositing the check, your contact will say that you were overpaid and need to return a portion of what you deposited. However, the check is a fake, and any funds you “return” to your new employer will be long gone.
- See the [full BBB Scam Alert for more information](#) and victim reports.

How to spot these scams:

- Research job offers first. Visit a company’s website and look up their contact information. Verify the company exists and the job posting is real before you interact with a stranger. Do an internet search with the company’s name and the word “scam” to see if anyone has reported a fake job offer. Look on BBB.org to see any unresolved complaints or negative reviews.

- Beware of jobs that involve receiving and returning money. Legitimate companies don't generally send money to new employees before work is done. They certainly don't ask you to return funds that you've already been paid.
- Be careful with your personal information. Never provide anyone with your personal information until you are sure you can trust them with it. Do all the necessary research before divulging anything personal? Never let someone pressure you into giving up your personal information because it's a "now or never" offer.
- Watch out for easy hires. If a company claims they want to hire you without meeting you either virtually or in-person, and if they don't conduct a job interview, you're probably dealing with a scammer.

For more information

Read [BBB's job scams study](#) to learn more about employment scams and how to avoid them. You can also find good general information at BBB.org/AvoidScams. If you've spotted a scam (whether or not you've lost money), report it to [BBB Scam Tracker](#). Your report can help others avoid falling victim to scams. Learn how to spot a scam at BBB.org/SpotAScam. [Source: BBB Scam Alerts | April 29, 2022 ++]

Student Loan Debt

Update 12: PSLF Temporary Waiver Could Help You Save Big

A temporary waiver will allow borrowers to earn credit for payments that normally do not qualify toward the Public Student Loan Forgiveness (PSLF) program, but the window is closing. PSLF, created in 2007, allows borrowers working in an eligible public service job (to include uniformed service) to qualify for Direct Loan cancellation after making 120 payments. But the program has been fraught with issues – 94% of DoD borrowers who applied for loan forgiveness were rejected, according to a 2021 Government Accountability Office study.

Late last year, the Department of Education announced a new PSLF waiver extending benefits to borrowers who had previously been shut out of the program, often because of poor practices by loan servicing companies. There are an estimated 1.3 million borrowers who qualify for PSLF — many of them active duty servicemembers — but borrowers must file a

PSLF application before Oct. 31 to take advantage of the waiver. Changes under the waiver include:

- Along with Direct Loans already covered by the program, you can receive credit for periods of repayment on Federal Family Education (FFEL) loans, Federal Perkins loans, or other types of federal loans. You must consolidate those loans into the Direct Loan program by Oct. 31.
- Any prior period of repayment will count as a qualifying payment, regardless of loan program, repayment plan, or whether the payment was made in full or on time. Periods of payment on loans before consolidation count, too.
- If you made more than 120 qualifying payments to an existing Direct Loan, you will automatically receive a refund for the excess payments, as long as you have your employment certified.

Amounts forgiven under the PSLF program are not considered income by the IRS, and you will not have to pay federal income tax on the amount of the Direct Loans that are forgiven. What remains unchanged under the temporary waiver is that you must still make 120 qualifying payments and must have been employed full-time by government, a 501(c)(3) nonprofit organization, or other nonprofit organization that provides a qualifying service when you made the payments.

It's important to note that generally you can receive credit for only those periods of time when a loan is in an "In Repayment" status, which means you cannot receive payment credits for a loan that is in forbearance, deferment, or default. However, Federal Student Aid has indicated it will provide automatic credit to borrowers who were in a military or military-related forbearance. The department has not provided any details on the change, which it says will come at a later date. Borrowers also may receive credit for time in COVID-19 related deferments and forbearances.

What to Do

Whether borrowers are working toward PSLF or think they have already made 120 qualifying payments, they should fill out and submit the PSLF and Temporary Expanded Public Service Loan Forgiveness (TEPSLF) Certification and Application form at <https://studentaid.gov/sites/default/files/public-service-application-for-forgiveness.pdf> before the October deadline. The PSLF Help Tool at <https://studentaid.gov/pslf> guides borrowers through the process.

Once borrowers file the PSLF form, they should be able to see updated qualifying payment counts in their FedLoan Servicing borrower account. The Department of Education has said it may take several months for all accounts to be updated. [Source: MOAA Newsletter | Lila Quintiliani | April 18, 2022 ++]

Widowhood

Update 01: More Major Mistakes People Make After Losing a Spouse

The days and weeks after the loss of a spouse can be overwhelming, filled with grief, confusion, and uncertainty. It's also a time when it's easy to make mistakes that have long-lasting impacts, including falling prey to scams, particularly if much of a couple's financial planning was handled by the deceased spouse. To help navigate such a stressful and challenging life chapter, we asked some financial planners and money management experts were asked to identify some of the biggest mistakes widows and widowers make in the aftermath of a spouse's passing. Following are the remaining 9 of the 17 they did:

Failing to Notify Credit Bureaus

A surviving partner may not be aware of all debts, which can lead to defaults or late payment fees. "By notifying all three credit bureaus of the death you will become aware of remaining debts in his or her name," Davis says. "To notify the bureaus, send a letter with a copy of the death notice to each."

Underestimating Debt

One of the easiest mistakes to make is underestimating how much debt a spouse has. "Unless you were very, very open about finances in your marriage, you may be unprepared for the burden you're taking on," says Jake Hill, CEO of DebtHammer. "In some cases, spouses won't be legally obligated to account for the debt. But if the estate transfers the debt to the spouse, or if you cosigned any of their loans, you will unfortunately be held responsible." It's a good idea to talk to a debt counselor once you've had a chance to grieve..

Neglecting to Review Benefits

If your spouse was employed, reach out to their workplace to discuss benefits and outstanding payments you may be owed. "Ask his or her employer about any payments that may be due for unused vacation or sick leave," says Aviva Pinto, managing director of Wealthspire Advisors. "If the employer provided life, health, or accident insurance, you may be entitled to receive payments under these policies. If your spouse belonged to a union or professional organization, ask about death benefits for members. If the death was work-related, you may be entitled to workers' compensation benefits."

Forgetting to Contact Past Employers

It's not just your spouse's most recent employer you'll want to get in touch with. "Contact all past employers to determine whether you're entitled to any payments from a pension plan," Pinto says. "If your spouse was already retired and receiving a pension, check with the employer about whether you will continue to receive a pension payment, and the amount."

Moving Immediately

The first year following a divorce is an extremely emotional time and can prompt drastic financial decisions. "In the months following the death, many widows will sell their home and move to a different part of the country, only to be filled with regret," says Brian Carney, CFP and the co-founder of RiversEdge Advisors. It's best to wait six to 12 months. "Most often emotions will subside after this time period and a more strategic process can be established to help make the correct decision."

Falling Prey to Con-Artists

There are tons of con artists who target widows and widowers. Check the credentials of anyone reaching out after a death. "Blind faith in strangers can cause a lot of destruction. In most situations, you're better off erring on the side of caution and consulting with someone who you reached out to independently after thoroughly researching, rather than working with a professional who has reached out to you," says Nishank Khanna, CFO of Clarify Capital.

Failing to Claim Your Share

It may seem like a will is set in stone, but it's not always true. "In some states, a spouse can file with the court a petition to claim an elective share, meaning that whatever the will states, the spouse can override that and claim an amount specified by state statute," says Dan Stickel, CEO of EstateExec. "These rules vary ... it may not be to your advantage to make such a claim, but if you feel that the will is treating you unfairly, you should at least look into this." Taking this action is not the same as filing a lawsuit, but is merely part of a normal estate settlement process. "In Florida, for example, a spouse is entitled to 30% of the estate. In New York, it's \$50,000 or one-third of the net estate, whichever is greater."

Paying Bills Unnecessarily

Criminals sometimes send "overdue notices" for fake bills that a surviving spouse may pay without investigation. "You should check into any bills, and ask for some kind of proof or records that show your spouse actually incurred the listed debt," Stickel says. "Even if it turns out to be a legitimate debt, that statute of limitations may have expired and the debt may no longer be collectible, so be careful not to make any payments or even agree in writing that the debt is valid, because doing so can restart the clock from the beginning." Investigate local statute-of-limitations rules for debts of deceased spouses.

Listening to Family and Friends

Talk to an accredited financial adviser first about buying and selling investments. "Receiving advice from family and friends might be well-intentioned, but nothing beats the expertise and know-how of a planner," says Paul Sundin, CPA and tax strategist for Emparion. "Find a professional one who is not only empathetic and respectful but specializes and has experience dealing with widows' and widowers' situations."

[Source: Cheapism | Mia Taylor | March 08, 2022 ++]

Notes of Interest

APR 16 thru 30, 2022

- **Sticker Price.** Just a few years ago, paying sticker price for a new car was almost thinkable. Unfortunately, times have changed, and the budget-busting combo of short supply and high demand have given car dealers the upper hand. New cars are selling for an average of 9.9% above sticker, according to an analysis by [iSeeCars](#).
- **Navy Recruiter PI Visit.** U.S Navy recruiters are scheduled to visit the RAO Angeles City Office at 1925 Mc Arthur Highway, Balibago on May 12, 2022 (Thursday) between 0930-1330hrs. If interested in joining the U.S. Navy, suggest you google ASVAB practice test online and review before their arrival.... They require an original copy of your birth certificate/consulate birth abroad, social security card, high school/ collage transcript and diploma (original), passport/green card and Covid vaccination card. If qualified, the recruiters will make arrangement for you to visit Guam for further testing.

[Source: Various | April 30, 2022 ++]

China/Solomon Islands

U.S. Concerns over Potential Security Pact Agreement

White House Indo-Pacific coordinator Kurt Campbell and the State Department's top official for Asia will travel this week to the Solomon Islands, the White House said on 18 APR, amid concerns that the Pacific Island country is making a security pact with China. Campbell and Assistant Secretary of State for East Asian and Pacific Affairs Daniel Kritenbrink will lead a delegation that includes Department of Defense and U.S. Agency for International Development officials to three countries: the Solomon Islands, Fiji and Papua New Guinea, the White House National Security Council said in a statement.

The team will also stop in Hawaii to "consult with senior military officials and regional partners at United States Indo-Pacific Command," it said, without giving dates for the trip. State Department spokesperson Ned Price said concerns over China would be among the subjects discussed with Solomon Islands officials. U.S. policy toward the region was about ensuring countries understand the benefits of engagement with Washington and "not about China or any other country," Price said at a regular press briefing. "We'll leave it to them to contrast what we offer from what other countries, including rather large countries in the region, might offer," he said.

In February, the United States announced it would open an embassy in the Solomon Islands, part of an effort by the Biden administration to commit more diplomatic and security resources to the Indo-Pacific to counter China's drive for greater influence. The Solomon Islands said in March that it was creating a partnership with China to tackle security threats and ensure a safe environment for investment in what would be a major inroad for Beijing in a region that U.S. allies Australia and New Zealand have for decades seen as their "backyard." read more After a regional backlash, the Solomon Islands said it would not allow a Chinese military base there.

But U.S. officials remain concerned that the broad nature of the proposed agreement with China leaves the door open for the deployment of Chinese forces on the Solomon Islands, Price said. "We believe that signing such an agreement could increase destabilization within the Solomon Islands and will set a concerning precedent for the wider Pacific island region," he added. Australia's Defense Minister Peter Dutton has said that China hopes to gain a military foothold in the Pacific Islands, including a "military port" in Papua New Guinea. China offered to redevelop a naval base in Papua New Guinea in 2018 but Australia's closest northern neighbor decided to have Australia to develop the base instead. [Source: Reuters | Michael Martina & Simon Lewis | April 18, 2022 ++]

Car Dealership Rip-offs

Signs to Look Out For

Plenty of car dealers are honest and operate with integrity. Others see a big fat bullseye on your back the second you enter. Dealers negotiate vehicle deals every single day, but you've done it once or twice — or maybe never. Face it, they're probably better at negotiating than you (though there's good reason to do it all the time). But if you know what to watch out for, you can avoid the most common pitfalls when buying a car. Following are 12 of them:

Avoid the Disappearing Financing Act

After driving home in your new vehicle, you get a call or letter from the dealer informing you that your on-the-spot financing application has been rejected, and you now have to apply for another loan at a higher rate. This is considered the "disappearing financing" act, and you can avoid this trap by securing outside financing before shopping.

Don't Let Dealers Rush You

When dealers sense hesitation, they'll sometimes try to force buyers off the fence by telling them that the deal they offered is good only for that day, or that another buyer is interested in the same car. This is their attempt to force you into an emotion-based decision. If you're not absolutely sure, be prepared to walk away and sleep on it. Even with shortages brought on by pandemic supply-chain issues, there are always more cars and other dealers.

The Low Credit Score Scam

It's no secret that borrowers with excellent credit get the lowest rates on the best loans. What many people don't know is that unscrupulous dealers sometimes tell car buyers that their all-important credit score came back lower than it actually is. This means paying a higher interest rate and missing out on lucrative dealer incentives. The solution is to check your credit score with all three bureaus before shopping so you know your bargaining power.

Making You Pay for Dealer Prep

"Dealer prep" is a fee commonly tagged onto itemized bills that unsuspecting buyers are prone to giving just a glance. Often \$500 or \$600, the fee supposedly compensates dealers for extra labor they put into securing your vehicle. In reality, it's a hidden add-on. Beat this scam by examining the purchase receipt and inquiring about every single charge before signing. Negotiate to have the fee reduced or removed entirely.

Promising to Pay Off Your Trade-in Loan — And Failing To

If you can, pay off an existing loan before you trade in a car. If you must trade in a car that you owe money on, the balance of the first loan will be added to the loan on the car you're buying, because the dealer is supposed to pay off whatever is owed on the trade-in. Sometimes, however, they simply keep the extra money. In the end, the bank loaned you the money for the vehicle and it's you — not the shady dealer — who is responsible for paying it.

Never Discuss Monthly Payments

When dealers ask about a buyer's budget, they often do so in terms of monthly payments. Don't take the bait. When you quote a number, the dealer will find a way to work within your budget

— often by extending the term of the loan. You would pay nearly \$10,000 more over the term of a seven-year loan than you would for a five-year loan, even though the monthly payment was \$400 for the same car in both cases.

Doing a Bait-and-Switch with Advertised Deals

Television is packed with car commercials promising juicy deals with zero-percent financing for a certain number of months. Those commercials come with blocks of tiny, fast-moving print explaining that the deal applies only to buyers with excellent credit who have huge down payments. When most customers get to the dealership, they often find that the same car comes with a far less attractive deal for them.

Don't Get Blinded by Rebates

Rebates are often used as incentives to buy — but they come from the manufacturer and are applied no matter what price you pay. When negotiating, do so as if the rebates don't exist. When it's time to convert the rebates into cash, ask to have them applied to the price of the car. If the dealer mails you a check, you'll have to pay interest and taxes.

Skip the Add-Ons

Dealers make big bucks by convincing unsuspecting buyers that extras are actually necessities. Called "add-ons," these upcharges are often completely unnecessary — and almost always expensive. Say no to rustproofing, extended warranties, fabric protection, and VIN etching.

Don't Leave a Hold Deposit

Sometimes dealers will tell buyers who are on the fence that they can hold the car for them as long as the prospective buyer leaves a deposit, which can be hundreds or thousands of dollars. In many cases, this happens before loan terms are agreed upon. If the buyer decides not to buy or doesn't like the terms, shady dealers will sometimes refuse to refund the deposit. The moral of the story? Never leave a hold deposit.

Roping Buyers into a Lease

In some cases, when a buyer balks at the terms of the loan, the dealer will offer to lower the monthly payments with no money down if the purchase happens right away. The trick is that the dealer switched to a lease agreement from an outright purchase — sometimes without the buyer's knowledge.

Don't Negotiate from MSRP

When you use the Manufacturer's Suggested Retail Price as a starting point for negotiations, you're vulnerable to dealers who will try to wow you by knocking off, say, \$1,000. The problem is, the MSRP is artificially high. Ask about the dealer invoice — the price the dealer paid for the car. Then try to stay as close to that number as possible.

[Source: Cheapism | Andrew Lisa | March 14, 2022 ++]

New Fruits

10 You're Suddenly Seeing at the Grocery Store

Grocery stores are always evolving, and these days grocers attract customers to the produce section with unusual offerings beyond apples and oranges. Specialty stores, such as Asian grocers, are even better sources for exotic fruits, which can benefit your diet. “Generally speaking, eating foods that are not a regular part of your diet can increase consumption of nutrients that you may not be getting elsewhere,” says New York-based dietitian Jessica Levinson. “It’s also good for your gut health to have a diverse diet.” Here are the most unusual fruits you might spot in the grocery store — and how to prepare them once you get them home.



Pineberries, Prickly Pear, Carambola, Kiwano, & Dragon Fruit

Pineberries

Pineberries are the size and shape of strawberries, but instead of the typical red, they have a white or blush tone. They taste a bit like strawberries with hints of pineapple. “Pineberries are very similar to red strawberries when it comes to nutrition. A filling, low-calorie food, they are also a good source of folic acid, phosphorus, and vitamin C,” says Harris-Pincus. “Enjoy them the same way you would strawberries. They are especially gorgeous on cakes, charcuterie boards and avocado toast, as well as in parfaits, salads, cereal, smoothie bowls, and cocktails.”

Prickly Pear

This fruit's name nods to its shape rather than its relationship to the more familiar pear. The "prickly" part is accurate enough, though. It grows on a cactus and can often have bumps or spines just like the cacti that produces it. With that in mind, the fruit's red or green peel should be removed before eating. However, the flesh inside is quite sweet. When used in jams, juices, and candies the prickly pear's bright red peel is often lends products an appealing pink color. It's [high in vitamin C](#) and fiber, and the fruit may be useful in reducing inflammation.

Carambola

With its five-pointed shape, the carambola earns the nickname "star fruit." Both the flesh and skin of the yellow/green fruit are edible, and the pulp has a slightly sour flavor. As with most fruits, it's a good [source of vitamin C](#) and antioxidants. The carambola can be eaten on its own when ripe, as well as used in pies, puddings, stews, curries, jams, and chutneys. It can also be juiced, but it makes an especially attractive topping to salads and granola bowls given its attractive shape.

Kiwano

With its orange, spiky rind, it's no wonder this African fruit is also known as a horned melon or horned cucumber. The latter nickname hints at its mild, refreshing flavor. The kiwano's flesh is lime green and filled with a network of seeds. Perhaps surprisingly, horned melon has a [high amount of protein](#) compared to other fruits. The rind is edible, but its appearance makes it formidable. If you find the skin appealing, cut off the spikes before consuming it. Most people stick to the pulp inside and eat it fresh or by spooning it onto yogurt.

Dragon Fruit

Dragon fruit lives up to its name with a fiery magenta pink exterior with green scales. Inside, the pulp is white and dotted with black seeds. Native to Mexico and South America, the fruit comes from a cactus. Despite its fierce appearance, it has a subtle flavor that's slightly sweet. It's a great [source of nutrients](#), including fiber, cancer fighting carotenoids, magnesium, and heart-healthy lycopene. It can be peeled and eaten fresh on its own, or on top of desserts, fish, or salads.



Jackfruit, Longan, Sapodilla, Rambutan/Chom Chom, & Husk Cherry

Jackfruit

Hailing from Asia, Africa, and South America, jackfruit is the largest fruit that grows on a tree. The largest jackfruit weighed in at a whopping 94 pounds. The fruit's bumpy green rind opens to reveal yellow flesh that's shaped in bulbs. It's a good source of potassium, fiber, and antioxidants, which benefit heart health. Jackfruit can be eaten raw, but its fibrous pulp, which approximates the texture of fall-off-the-bone tender pork, has also made it a popular meat substitute in dishes such as tacos and barbecue sandwiches, and canned jackfruit is available in many markets, including Trader Joe's.

Longan

This tropical fruit is a relative of the lychee and tastes a lot like it, too. There's not much pulp to this grape-sized fruit, especially when accounting for the tough, tan shell outside and the large, dark seed inside. One serving of longan provides [a full day's dose](#) of vitamin C. It can be served fresh, dried, or canned. These preparations lend it a great deal of versatility; it can be blended in a smoothie, cooked in a curry, or used in tea, to name a few of its uses.

Sapodilla

Native to Mexico but also cultivated in Central America, the West Indies, Bermuda, the Philippines, and even the Florida Keys, this fruit is a rare find at conventional grocery stores. Head to a specialty store instead. Its fuzzy brown skin and smooth, flat seeds are both indigestible, but its flesh is delicious — thanks in part to being high in fructose and sucrose. According to Levinson, sapodilla is an excellent source of fiber and vitamin C. “Sapodillas can be eaten simply scooped out of the skin with a spoon, but in Asia they are also commonly found in smoothies, ice cream, pies, pancakes, and muffins, or turned into jam,” she says.

Rambutan/Chom Chom

Rambutans may look like a fantasy world creation, but they're native to Southeast Asia. The tropical tree fruit has a fuzzy, red-orange-green exterior. The exterior cracks under the pressure of a fingernail and can easily be pulled back to reveal the sweet, smooth, white fruit inside. According to Levinson, the almond-shaped seed of rambutans are toxic. Rambutans are [usually eaten plain](#), but they can also top salads, ice cream, yogurt, and other desserts. This cousin of the lychee can also sub in for any recipe that mentions that fruit.

Husk Cherry

They may be called “cherries,” but husk cherries aren't much like cherries in taste or appearance. The small, round, cherry tomato-esque fruits are related to tomatoes and taste more like them, too. However, they also have some citrusy, pineapple tang. “They are an excellent source of fiber and a good source of vitamins C and A, with antioxidants that are associated with reduced risk of

some diseases such as cancer and heart disease,” says [dietician and nutritionist Lauren Harris-Pincus](#). “Husk cherries are delicious on their own or added to salsa, salads, cereal, or a fruit cup. Bake them into a pie or fruit cobbler or even grill them on chicken or fish kebabs.”

[Source: Cheapism | Ashley M. Biggers | March 29, 2022 ++]

Rats

Update 01: How to Get Rid Of Them At Home

Rats are an annoying pest that can make your home feel like a living hell. They are the most common rodents found in homes, and they carry some nasty diseases with them. If you want to get rid of this problem for good, then there are some steps you need to take before it becomes out of control. This blog post will give you some tips on how to get rid of rats in your home!

Traps

There are a few different types of traps that you can use, but the best type is the traditional [snap trap](#). These traps are easy to set up, and they are effective at catching rats. When setting up your traps, make sure to place them in areas where you have seen the most rat activity. Also, keep in mind that rats are shy creatures, and they will avoid traps if they see or smell them. For this reason, it’s important to use bait with your traps. The best baits for rats include cheese, peanut butter, and bacon bits.

Poison

There are a few different types of rat poison available on the market, but the most effective one is called bait blocks. These blocks are made to look like food, and they contain a deadly toxin that will kill rats instantly. When using bait blocks, make sure to place them in areas where you have seen the most rat activity. Also, keep in mind that bait blocks should only be used as a last resort because they can be harmful to pets and children if ingested. Make sure to keep bait blocks out of reach from children and pets.

Peppermint Oil

If you are looking for an all-natural way to get rid of rats, you should try peppermint oil. Rats hate peppermint’s smell and will avoid it at all costs. To use this method, simply mix a few drops of peppermint oil with water and spray it in areas where you have seen rat activity. You can also put peppermint oil on cotton balls and place them in areas where you don’t want the rats to go. Peppermint also works as a great deterrent for other pests, such as spiders and ants.

Adopt a Cat

Cats are natural predators of rats, and they will kill them without any hesitation. Not only will they take care of your rats, but they'll be your new best friend and snuggle buddy! Cats are known to reduce stress levels, and they are a great addition to any home. You'll also be providing a home for a homeless animal, which is always a good thing. If you don't have a cat, then you can always contact your local animal shelter or rescue group and ask if they have any adoptable cats.

Dry Ice

Dry ice is a solid form of carbon dioxide, and it's extremely effective at killing rats. When using this method, place the dry ice in a sealed container and put it in areas where you have seen rat activity. The carbon dioxide gas will slowly seep out of the container, and it will suffocate any rats inside. Keep in mind that this is a dangerous method to use, and you should only do it if you are comfortable with handling dry ice. Dry ice can cause skin burns and respiratory problems, so make sure to use extreme caution.

Seal up Your Home

Rats are expert climbers, and they can easily get into your house through small cracks and holes. Sealing up your home will prevent them from getting in, and it will also stop them from breeding inside your walls. There are a few different ways to seal up your home, but the best way is by using caulk. Caulk is cheap, easy to use, and it's effective at stopping rats from entering your home. There might be holes in your walls that you don't even know about, so it's important to do a thorough inspection of your home and seal up any cracks or holes that you find.

Crushed Pepper

Crushing up some pepper and spreading it in areas where you have seen rat activity will keep them away. Just sprinkle it on the ground or put it in a pepper shaker and sprinkle it around your home. You can also mix some pepper with water and spray it in areas where you don't want the rats to go. Rats will stay away from anything that smells spicy, so this is a great way to keep them out of your home without using any harsh chemicals.

Contact a Professional

If you have tried all of the methods listed above and you are still having a problem with rats, don't worry! You can always contact a professional to take care of the problem for you. Rat exterminators are experts at getting rid of rats, and they will have your home free of them in no

time. Keep in mind that professional services can be expensive, but it's worth it to get rid of those pesky rodents for good.

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Conclusion

There are a few different ways to [get rid of rats in your home](#), but the best way is by using a combination of methods. Try using traps, poison, cats, peppermint oil, and caulk to get rid of those pesky rodents for good. If you are having a tough time getting rid of rats on your own, then you can always contact a professional rat exterminator.

[Source: The Outdoor Wear Team | January 22, 2022 ++]

News of the Weird

APR 16 thru 30, 2022

Least Competent Criminals -- First rule of being a criminal? Keep up with car maintenance. On Jan. 27, police in New Kensington, Pennsylvania, pulled over a Chevy Trax because its license plate light was burned out, TribLive reported. The driver, Ise Lamont Woods, 31, had an outstanding warrant from Jan. 5 for criminal mischief and disorderly conduct, among other charges. One of the passengers, Raphael Angel Geiger, 30, was wanted for a parole violation. And Don Lamont Carter, 26, allegedly tossed a bag with 29 grams of crack cocaine in it to a female passenger, asking her to "tuck it"; he was already wanted on a previous warrant. When police searched the vehicle, the bag of cocaine fell out of the woman's sweatshirt; she also had a crack pipe hidden in her bra. Geiger and Woods were taken into custody; Carter was released on his own recognizance. [The Smoking Gun, 2/11/2022]]

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Anti-Social Media - The Federal Aviation Administration has revoked Trevor Jacob's pilot's license, The New York Times reported on April 20, after concluding that Jacob purposely abandoned a plane he was flying and filmed it crashing into the Los Padres National Forest in California while he parachuted to the ground. Jacob then posted the 13-minute video on YouTube, calling it "I Crashed My Plane." The FAA said Jacob acted in a "careless or reckless manner so as to endanger the life or property of another." In the video, the propeller can be seen

as it stops spinning, and Jacob opens the door and jumps out with a parachute and a selfie stick. The FAA noted, "During this flight, you opened the left side pilot door before you claimed the engine had failed." The agency also noted that Jacob did not contact air traffic control, try to restart the engine or look for a safe place to make an emergency landing. But he got 1.7 million views! [New York Times, 4/20/2022]

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Bright Idea -- Guests at a February wedding reception in Florida reported feeling "ill and high," "having crazy thoughts" and having "no control over [their] mind and body" after consuming pasta, salad and an olive oil and herb dip, The Smoking Gun reported. And it's no wonder: The bride, Danya Svoboda, 42, and caterer Joycelyn Bryant, 31, were charged on April 18 with allegedly adding marijuana to the food served to wedding guests, several of whom ended up at the hospital. One victim told the best man that he "felt like he'd been drugged," but the best man was "incoherent" himself. The groom's aunt, 69, reported that she became paranoid and "loud and unruly" in the ER. One catering staffer thought the guests were aware that THC was in the food; Miranda Cady, 38, a (former?) friend of the bride, said Svoboda behaved as if guests should be happy about the addition to the food. Cady was terrified and sent herself a text so if she died, "someone would know what happened." Svoboda and Bryant are scheduled for arraignment in June. [The Smoking Gun, 4/20/2022]

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Remember to Backup Your Phone -- A woman in her 40s on a visit to Olympic National Forest probably won't want to go back anytime soon after a harrowing experience at the top of Mount Walker on April 19, The Olympian reported. The anonymous woman dropped her cellphone into a vault toilet (a waterless, nonflush toilet typically found at campgrounds and near hiking trails) and attempted to fish it out using her dog leash. Instead, she fell headfirst into the abyss; she tried to escape on her own but ended up calling 911 with her recovered phone. Fire crews from Brinnon, Washington, fashioned a platform she could stand on, and they pulled her out and washed her off. First responders, who said she was lucky not to have been overcome by toxic gases, encouraged her to seek medical attention because of her exposure to human waste. [The Olympian, 4/21/2022]

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Government in Action -- Citizens in Cornwall, England, are fuming after the St. Blaise Town Council ordered that 1,000 daffodils in the Old Roselyon Play Area be cut down because they can be poisonous if eaten and could give children diarrhea, Metro News reported. But a spokesman for the Roselyon Play Park Committee called the move "preposterous" and "totally bonkers." He went on to explain that the land was once an orchard and was home to so many of

the flowers that a part of it was called Daffodil Walk. Residents took to social media to protest the directive: "When I was in primary school, every year we were given a daffodil bulb to grow ... Funny, I don't remember trying to eat them or anyone being poisoned." Another said, "Daffodils are also poisonous to dogs, (but) even my mutt has the common sense not to eat them." [Metro News, 4/5/2022]

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Take a Deep Breath -- Tom Jozsi, a 60-year-old maintenance worker in Kenosha, Wisconsin, was in the dentist's chair when his visit turned anything but routine, WISN-TV reported on April 18. Jozsi was getting a cavity filled when he inhaled an inch-long dental drill bit. "I didn't really even feel it going down," he said, but the bit was deep in his right lung, a CT scan showed. Pulmonary expert Dr. Abdul Alraiyes and his team at the Aurora Medical Center-Kenosha decided to try a catheter that's used for the early detection of cancer, allowing them to reach the small bit and pull it out without any harm to Jozsi's lung. Today, the bit is displayed on a shelf in Jozsi's home. [WISN, 4/18/2022]

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Focus -- One unidentified person in Dublin, Ireland, was responsible for making 90% of all noise complaints received at Dublin Airport in 2021, United Press International reported on April 19. The person averaged 34 complaints per day, totaling 12,272 for the year. They nearly doubled their number from 2020, 6,227, and are already on track for a new record in 2022, with a daily average of 59. The company that runs the airport says it responds to each complaint and works with communities on issues such as aircraft noise. [UPI, 4/19/2022]

[Source: <https://www.uexpress.com/oddities/news-of-the-weird/2022/04/22> | April 30, 2022 ++]

Have You Heard or Seen?

Gorilla Enticer | Toons | Marriage #2

Gorilla Enticer

It's a beautiful warm day and a man and his wife are at the Zoo. She's wearing a cute loose-fitting, pink spring dress, Sleeveless with straps. As they walk through the ape exhibit and pass in front of a very large gorilla, the beast goes crazy. He jumps up on the bars, holding on with one hand and his feet, grunting and pounding his chest with his free hand.

The gorilla is obviously excited at the pretty lady in the wavy dress. The husband, noticing the excitement, proposes that his wife tease the poor fellow. The husband suggests she pucker her lips, wiggle her bottom, and play along. She does, and the gorilla gets even more excited, making noises that would wake the dead.

Then the husband suggests that she let one of her straps fall. She does, and the gorilla is just about to tear the bars down. "Now try lifting your dress up your thighs." This drives the gorilla absolutely crazy. Suddenly, the husband grabs his wife by the hair, rips open the cage door, slings her in with the gorilla and slams the door shut.

"Now, tell HIM you have a fekin headache!"

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Marriage #2

He named the street he built after his wife. It was very apt, as she was cold, hard, cracked and only got ploughed around Christmas.

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At St. Peter's Catholic Church in Toronto , they have weekly husband's marriage seminars.

At the session last week, the priest asked Giuseppe, who said he was approaching his 50th wedding anniversary, to take a few minutes and share some insight into how he had managed to stay married to the same woman all these years.

Giuseppe replied to the assembled husbands, "Wella, I'va tried to treat her nicea, spenda da money on her, but besta of all is, I tooka her to Italy for the 25th anniversary!"

The priest responded, "Giuseppe, you are an amazing inspiration to all the husbands here! Please tell us what you are planning for your wife for your 50th anniversary?"

Giuseppe proudly replied, " I gonna go pick her up."

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A wife got so mad at her husband she packed his bags and told him to get out.

As he walked to the door she yelled, "I hope you die a long, slow, painful death."

He turned around and said, "So, you want me to stay?"

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A couple drove down a country road for several miles, not saying a word. An earlier discussion had led to an argument and neither of them wanted to concede their position.

As they passed a barnyard of mules, goats and pigs, the husband asked sarcastically, "Relatives of yours?"

"Yep," the wife replied, "in-laws."

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One morning when I was going out of the house I met my neighbor's daughter who was pregnant.

When I returned home I saw her father closing the door. I told him: "Your daughter hasn't married yet I wonder how it is possible a girl without any husband be pregnant?"

For a moment her father with a bitter smile said: "She isn't pregnant; it is all wind in her belly. When she farts and she will recovery."

A year later perchance I saw the same girl with a baby in her arms.

The next day when I was going out I saw her father so I told him: "I saw your daughter with her fart in her arms."

Thought of the Day

A pessimist is a man who thinks everybody is as nasty as himself, and hates them for it.

-- **George Bernard Shaw**

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