



THE EAGLE



THE MILITARY OFFICERS ASSOCIATION OF AMERICA PENNSYLVANIA COUNCIL OF CHAPTERS

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STILL SERVING



NEWS AND VIEWS June 2014

PRESIDENT'S CORNER

Amid numerous rain showers around the state this month it looks like summer is finally working its way into Pennsylvania. The golf courses are looking great but I still have to mow the lawn at home as it still springs eternal.

The state legislature is going into Budget Mode but has managed to move a few bills including veteran and reserve component legislation through to passage and is working on others. See the State Veterans Legislation column for more.

Unfortunately it looks like Senator Jake Corman from Allegheny County will be introducing a new Pay Day Loan bill by late June. On May 20th he sent out a co sponsorship letter requesting support for a bill he plans to introduce that would bring pay day lending to Pennsylvania. While

this bill has a minimum 90 day loan period it remains to be seen how many fees will be added to raise the annual percentage rate to triple digits. Once the bill is introduced I will send out an alert with the bill number and ask you to contact your state senator to oppose the bill. The Stop Pay Day Loans in PA Coalition was at the capitol on June 9th and June 10th a MOAA team assisted in delivering materials and met with the staff of five senators, who also oppose pay day lending. Senator Bob Mensch, the new majority chairman of the Senate Veterans Affairs & Emergency Preparedness Committee opposes pay day lending.

Stay active in communicating with your US Congressman and State legislators as they work on the 2015 budgets. They value your input and consider it in their decisions.

Regards,
Bob Gray

COUNCIL MEETING DATES

July 18 Chapter recruiting meeting to establish a State College Chapter

July 19, State College

September 12-13, State Convention Meadowlands, Washington, PA

November 8, State College

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State Veterans Legislation

HB 1460 (protects money paid for semester when reserve soldiers are mobilized and to change W-withdraw on transcript to M-mobilized. Presented to the governor June 10th.

HB 1164 (Priority registration for veterans in state funded colleges and community colleges.) Approved by the governor May 14th now Act No. 46

SB 403 (physician recruiting and retention incentive program for Guard) Passed Senate and House, in Senate Rules Committee before going to House for signature and then to governor.

SB 923 (Military Family Relief Asst. for active PA military families - extension) presented to the governor June 11th.

SB 1115 (VA benefits used before state Educational Assistance Program) passed Senate and House, in Senate Rules committee before being sent to House and governor.

SB 1129 (Amputee and paralyzed Veterans) Amends eligibility to only severely disabled veterans. Reported out as amended 4/29/14 and referred to Appropriations May 6th.

SB 1224 (Allows VA medications to be broken down into single unit doses in personal care and assisted living facilities) Passed the Senate May 5th 2014. Sent to the House

Other Bills we are tracking: Part of Education Package

HB 472 (waive residency for veterans moving into PA for instate tuition) Remains stalled in Senate Education Committee - Two separate letters of support provided for this bill from the PA War Veterans Council

The PA War Veterans Council legislative committee chair Bob Gray and vice chair Rich Hudzinski of VVA/MOAA have met with the PA AARP staff in an effort to work together on legislation that is beneficial to veterans and older Pennsylvanians. Over 60 % of older Pennsylvanians are veterans. AARP is reviewing legislation and initiatives but has not gotten back with any specific issues as yet.

Federal Legislation

The Veterans' Access to Care through Choice, Accountability and Transparency Act of 2014

Monday, June 9, 2014

WASHINGTON, June 9 – Sen. Bernie Sanders (I-Vt.), chairman of the Senate Committee on Veterans' Affairs, and Sen. John McCain (R-Ariz.) tonight introduced legislation to improve veterans' access to health care and address serious problems facing the Department of Veterans Affairs.

Other original cosponsors were Sens. Jeff Merkley (D-Ore.), Tim Kaine (D-Va.) and Richard Burr (R-N.C.), the ranking Republican on the Senate Veterans' Affairs Committee.

To read the bill, click [here](#).

To read a section-by-section summary, click [here](#).

2014 VA Hospital Veterans Assistance Council Briefings for Western PA given at the Butler VA Hospital and Eastern at the Coatesville VA Hospital PA given by the VISN-4 Acting Director in June

2014 VA Healthcare VISN4, Veterans Assistance Council (VAC) Western Market Meeting 6/4/14, VA Butler Campus.

MOAA Rep in Attendance: Tom Tallon, CW4, USA – Retired.

Objective: Venue to be briefed by VISN4 leaders:

Overview/Introduction

Gary Devansky, FACHE, Interim Network Director, VISN 4

VISN Update

David Macpherson, M.D., Chief Medical Officer, VISN 4

Directors' Presentations

James E. Van Zandt VA Medical Center (Altoona, PA), William Mills, Director

VA Butler Healthcare (Butler, PA),

John Gennaro, Director

Louis A. Johnson VA Healthcare System (Clarksburg, WV), Beth Brown, Director

Erie VA Medical Center (Erie, PA), Carla Sivek, Director

VA Pittsburgh Healthcare System

(Pittsburgh, PA), Terry Gerigk Wolf,

Director

Summary Discussion:

Given a copy and briefed of each 2012 Annual report from each Director.

Care is good to excellent, but access/scheduling is the problem.

Access is the Problem:

Newly Enrolled Appointment Request

(NEAR) List: Only VA Pittsburgh had a backlog in the VISN4 Western Region, with over **700** Veterans names on their NEAR List. For many, many years, only 1-employee at VA Pittsburgh maintained their NEAR list, which was overly complicated and confusing. VA Pittsburgh had no clear procedures on how they put Veterans on the NEAR List and how they were removed from the NEAR list. There is no uniformity on NEAR List procedures. Nationwide, each VA facility has been responsible for maintaining and clearing their respective NEAR list using their own locally established procedures.

Temporary Solutions: VA Staff attempted to call all veterans on the NEAR List within 36-hours and called every veteran on the NEAR list at least 3-times within the 5-days, evenings and weekends too. Sent letters to veterans with no phone, but a few veterans had no phone and no address. An accelerated care report was done last week, with 14-Day appointments as the target time. VA Pittsburgh tripled the number of appointment slots available.

Question: Since each VA facility is responsible for establishing and maintaining their own scheduling procedures that have been overly complicated and confusing, will VISN4 make a uniform scheduling policy/procedure?

Answer: VISN 4 is waiting for a National VA Policy on scheduling and accessing care, but will conduct monthly review of compliance reports.

Questions: What about accountability? Has anyone been held responsible? Any discipline?

Answer: An audit was conducted, but no malice intent was found in VA Pittsburgh. There is a continuing investigation. The NEAR List is now reviewed constantly to have Veterans seen within 14-days. Once National Scheduling and Access Procedures are published, VISN4 staff will implement those procedures and conduct monthly reviews of the compliance reports.

Observation: A lot of office reps from elected officials attended the meeting, but the majority of attendees were from veterans organizations (MOAA, Vietnam Veterans, VFW, American Legion, DAV, AMVETS, and Paralyzed Veterans).

Closing: It was a satisfactory meeting, regarding the temporary fixes of the NEAR list. To permanently remedy the access and scheduling problem for veterans care, at a minimum, their needs to be a national VA scheduling and accessing policy, with compliance reports. Additionally, greater access to private healthcare should be fostered and made available when VA can't meet the care needs of our veterans in a timely manner.

Thomas E. Tallon
CW4, USA – Retired
MOAA Representative
Pittsburgh Chapter
H: 724-941-9445
C: 412-418-0295

VA Hospital Coatesville, VISN-4 East Briefing

On Thurs. June 5, I attended the VISN-4 briefing at the Coatesville VA facility. I had very little knowledge of just how things did or

did not work at the VA facilities and found the background material presented by the Dir. of VISN-4, Gary Dubansky, to be very enlightening. The meeting was attended by about 39 people including 5 of the 8 administrators of hospitals in this Section.

The overall tone of the presentation by all speakers, was that the facilities in this region are in pretty good shape from an admin. side. Of course there are some things in the physical facilities side and key personnel such as physicians and specialists, that need more attention. It was felt by all concerned that there is no problem such as arose in Phoenix in this Center. Of course, the results of the audit were not available at this time so we can wait to see the outcome,

There were many questions on the overall operation of the facilities as well as specifics on care of some special needs vets. The accessibility of care for disabled vets was discussed at length and answered to most everyone's satisfaction. The VA system will insure DA Vets will have care. I ask if there was a problem with scheduling at some facilities as we had a vet in our chapter who was scheduled 90 days out for an appointment. All admin people were quite surprised at that as the Medical Director had just briefed us that that does not happen in VISN-4. I think it has been addressed.

We finished the day with a short tour of the newly opened Hospice care facility at Coatesville. I can assure you it is a first class set up. Can't vouch for the care but it seems quite good. They are open for inspection if and when you wish to stop by.

I found the day interesting and informative and if you have any questions, don't hesitate to contact me.

Jim Cunningham
Corr. Sec.
Lancaster MOAA



U.S. Department
of Veterans Affairs

News Release

Office of Public Affairs
Media Relations

Washington, DC 20420
(202) 461-7600
www.va.gov

FOR IMMEDIATE RELEASE

June 9, 2014

VA Releases Data on Quality, Access to Veterans Healthcare *Acting Secretary Gibson Provides Transparency, Announces Further Actions on Timely Healthcare Access*

WASHINGTON – Today, the Department of Veterans Affairs (VA) released the results from its Nationwide Access Audit, along with facility level patient access data, medical center quality and efficiency data, and mental health provider survey data, for all Veterans health facilities.

Full details made public at VA.gov follow Acting Secretary of Veterans Affairs Sloan Gibson's commitment last week in Phoenix, Arizona and San Antonio, Texas to provide timely access to quality healthcare Veterans have earned and deserved.

"It is our duty and our privilege to provide Veterans the care they have earned through their service and sacrifice," said Acting Secretary Gibson. "As the President has said, as Secretary Shinseki said, and as I stated plainly last week, we must work together to fix the unacceptable, systemic problems in accessing VA healthcare.

"Today, we're providing the details to offer transparency into the scale of our challenges, and of our system itself. I'll repeat – this data shows the extent of the systemic

problems we face, problems that demand immediate actions. As of today, VA has contacted 50,000 Veterans across the country to get them off of wait lists and into clinics. Veterans deserve to have full faith in their VA, and they will keep hearing from us until all our Veterans receive the care they've earned."

Acting Secretary Gibson announced a series of additional actions in response to today's audit findings and data, including:

- **Establishing New Patient Satisfaction Measurement Program**

Acting Secretary Gibson has directed VHA to immediately begin developing a new patient satisfaction measurement program to provide real-time, robust, location-by-location information on patient satisfaction, to include satisfaction data of those Veterans attempting to access VA healthcare for the first time. This program will be developed with input from Veterans Service Organizations, outside health care organizations, and other entities. This

will ensure VA collects an additional set of data – directly from the Veteran’s perspective – to understand how VA is doing throughout the system.

- **Holding Senior Leaders Accountable**

Where audited sites identify concerns within the parent facility or its affiliated clinics, VA will trigger administrative procedures to ascertain the appropriate follow-on personnel actions for specific individuals.

- **Ordering an Immediate VHA Central Office and VISN Office Hiring Freeze**

Acting Secretary Gibson has ordered an immediate hiring freeze at the Veterans Health Administration (VHA) central office in Washington D.C. and the 21 VHA Veterans Integrated Service Network (VISN) regional offices, except for critical positions to be approved by the Secretary on a case-by-case basis. This action will begin to remove bureaucratic obstacles and establish responsive, forward leaning leadership.

- **Removing 14-Day Scheduling Goal**

VA is eliminating the 14-day scheduling goal from employee performance contracts. This action will eliminate incentives to engage in inappropriate scheduling practices or behaviors.

- **Increasing Transparency by Posting Data Twice-Monthly**

At the direction of the Acting Secretary, VHA will post regular updates to the access data released today at the middle and end of each month at VA.gov. Twice-monthly data updates will enhance transparency and provide the most immediate information to Veterans and the public on Veterans access to quality healthcare.

- **Initiating an Independent, External Audit of Scheduling Practices**

Acting Secretary Gibson has also directed that an independent, external audit of system-wide VHA scheduling practices be performed.

- **Sending Additional Frontline Team to Address Phoenix**

Following his trip to Phoenix VA Medical Center last week, Acting Secretary Gibson directed a VHA frontline team to travel to Phoenix to immediately address scheduling, access, and resource requirements needed to provide Veterans the timely, quality healthcare they deserve.

- **Utilizing High Performing Facilities to Help Those That Need Improvement**

VA will formalize a process in which high performing facilities provide direct assistance and share best practices with facilities that require improvement on particular medical center quality and efficiency, also known as SAIL, performance measures.

- **Applying Immediate Access Reforms Announced in Phoenix to Most Challenged VA Facilities**

Last week, Acting Secretary Gibson announced a series of measures to address healthcare access problems in Phoenix. Today, Acting Secretary Gibson announced he'll apply the same reforms to facilities with the most access problems from the results of the audit, including:

- **Hiring Additional Clinical and Patient Support Staff**

VA will deploy teams of dedicated human resource employees to accelerate the hiring of additional, needed staff.

- **Employing New Staffing Measures**

VA's first goal is to get Veterans off wait lists and into clinics. VA is using temporary staffing measures, along with clinical and administrative support, to ensure these Veterans receive the care they have earned through their service.

- **Deploying Mobile Medical Units**

VA will send mobile medical units to facilities to immediately provide services to patients and Veterans awaiting care.

- **Providing More Care by Modifying Local Contract Operations**

VA will modify local contract operations to be able to offer more community-based care to Veterans waiting to be seen by a doctor.

- **Removing Senior Leadership Where Appropriate**

Where appropriate, VA will initiate the process of removing senior leaders. Acting Secretary Gibson is committed to using all authority at VA's disposal to enforce accountability among senior leaders.

- **Suspending Performance Awards**

VA has suspended all VHA senior executive performance awards for FY2014.

- **Future Travel**

Over the course of the next several weeks, Acting Secretary Gibson will travel to a series of VA facilities across the country. He will hear directly from Veterans and employees about obstacles to providing timely, quality care and how VA can immediately address them.

National audit and patient access data available at www.va.gov/health/access-audit.asp.

Medical center quality and efficiency (SAIL) and mental health data available at <http://www.hospitalcompare.va.gov/>.

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Chapter News

Keystone Capital Chapter



Robert J. DeSousa graduated on June 6, 2014 from the US Army War College in Carlisle PA with a Masters in Strategic Studies. Bob serves as a Colonel in the Pennsylvania Army National Guard. He is the State Judge Advocate. In his civilian capacity he is the State Director for United States Senator Pat Toomey. He, his wife Elizabeth and their four children reside in Harrisburg PA

Early Request for Gold Bars and ROTC/JROTC Awards

Gold Bars are allocated on a first-come, first-served basis. Each year we have closed out requests prior to the published cut-off date. Demands have historically outpaced our capabilities. Please coordinate with local ROTC programs, plan, and submit your request as early as possible.

Requests will be accepted beginning Feb. 1, 2014, and projected close out will occur on or about Oct. 1, 2014. Our goal this year is to support all three graduation dates - May, August, and December for the ROTC programs. In order to be successful, we need you to include all graduation dates that you plan to support when you submit your request.

Requests for gold bar sets should be made via e-mail to awards@moaa.org or by letter addressed to Council and Chapter Affairs at MOAA, with an information copy sent to the interested chapter's state council. Chapters located in states with no state council can make their requests directly to National MOAA. National MOAA also has available certificates and folders that can be used by chapters to prepare personalized packages for new officers. Allow three to four weeks for delivery of the Gold Bars. All orders are shipped out of MOAA's fulfillment warehouse in Atlanta, GA.

Washington News

Prevent TRICARE Prescription Fee Hike

MOAA Legislative Update

May 30, 2014

Both the House and Senate defense bill reject administration proposals to consolidate TRICARE health care options and implement enrollment fees for TRICARE For Life (TFL).

But, the Senate defense bill includes the administration's proposal to dramatically alter the TRICARE pharmacy benefit (as well as [cap military pay raises and increase housing costs for military families](#)).

The proposal would change pharmacy benefits in three key ways:

1) Copay increases

The charts below illustrate how pharmacy copays would increase over the next decade. Retail and mail-order copays would double or triple while the MTF would remain cost free.

Retail (1 month)	Current	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22
Generic	\$5	\$5	\$6	\$7	\$8	\$9	\$10	\$11	\$12
Brand	\$17	\$26	\$28	\$30	\$32	\$34	\$36	\$38	\$40
Non-Formulary	\$44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Mail order (3 month)	Current	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22
Generic	\$0	\$0	\$0	\$0	\$0	\$9	\$10	\$11	\$12
Brand	\$13	\$26	\$28	\$30	\$32	\$34	\$36	\$38	\$40
Non-Formulary	\$43	\$51	\$54	\$58	\$62	\$66	\$70	\$75	\$80

2) Mandatory mail-order refills of maintenance medications for all TRICARE beneficiaries

The FY 2013 defense authorization act required all TRICARE For Life beneficiaries to refill maintenance medications through either the mail-order pharmacy or an MTF for at least one year. The Senate version of the FY 2015 defense bill would expand this requirement to all TRICARE beneficiaries.

3) Non-formulary medication restrictions

Drugs not listed on the [TRICARE formulary](#) would only be available on a limited basis via the retail pharmacy system. These drugs would still be available through mail-order pharmacy or the MTF.

Send your legislators a [MOAA-suggested message](#) asking them to resist efforts to dramatically increase TRICARE pharmacy copays.

- See more at:

http://www.moaa.org/Main_Menu/Take_Action/Top_Issues/Serving_in_Uniform/Health_Care/Prevent_Rx_Fee_Hike.html#sthash.5lk6Jlfp.dpuf

Bill Boosts Survivor Pay MOAA Legislative Update

June 6, 2014

On May 21, Rep. John Tierney (D-Mass.) introduced H.R. 4741, the Surviving Spouses Benefits Improvement Act.

The bill would increase Dependency Indemnity Compensation (DIC) payments a surviving spouse receives from the VA when a servicemember or veteran dies from a service-connected cause.

Under current law, an eligible surviving spouse receives \$1,233 per month in DIC. The amount is based off 43 percent of the basic compensation for a veteran with a 100 percent disability rating. H.R. 4741 increases that percentage to 55 percent, consistent with other federal employee programs. If enacted, the new DIC rate would be \$1,572 per month.

The bill would exempt the increase in DIC payments from the unfair offset for survivors eligible to receive both a DoD Survivor's Benefit Plan annuity (SBP) and DIC.

[Full elimination of the SBP-DIC offset](#) remains a top legislative goal of MOAA and The Military Coalition.

The Bottom Line – Pay Caps Add Up

By Col. Mike Hayden USAF (Ret)

In this year's defense budget, administration and Pentagon leaders requested a military pay raise of 1 percent. That's 0.8 percent below private-sector pay growth, the second-lowest pay raise in 50 years, and a second consecutive year of pay caps.

Like last year, Congress doesn't see eye to eye on the military pay raise. The House rejected the administration's pay cap in favor of a 1.8-percent raise, while the Senate supports the cap of 1 percent.

Uniformed leaders point out this is not a "pay cut," as no servicemembers will see their pay decrease, essentially saying, "Hey, you're still getting a pay raise, so what are you complaining about?"

And, on the surface, a reduction of 0.8 percent doesn't sound like much. But servicemembers and their families know differently and realize this pay proposal fails to keep pay on par with private-sector pay growth.

Servicemembers also realize this is the second year in a row their pay will fail to keep pace with the private sector — a trend that has been repeated several times in the past during tight budget spells.

Throughout the late 1980s and '90s, Congress repeatedly capped military pay below private-sector wage growth. These caps resulted in a 13.5-percent gap between military and civilian pay and a serious retention and recruiting crisis by the early 2000s.

Between 2000 and 2010, Congress worked hard to fix the pay gap. Since then, military pay has kept pace with the private sector until last year, when the president used his executive authority to cap pay.

History has shown that once military pay-cap proposals are accepted, the caps continue until they have wrecked retention and readiness.

History is repeating. The FY 2015 administration budget submission keeps pay caps in place for not just a second straight year but for six straight years.

It took Congress 10 years to make military pay competitive with the civilian sector again. But capping pay for several years definitely will hit your active duty paycheck hard and will have a big impact on your retired pay.

For example, two years of pay caps for an O-3 with 10 years of service will reduce his or her purchasing power by \$1,130 annually.

However, with six years of pay caps, that same O-3 will lose nearly \$30,000 by the time he or she reaches the 20-year point (assuming a 2-percent average rate of civilian wage growth).

And the bleeding doesn't stop there. By age 85, the compounding of six years of pay caps will cost that retiree almost \$120,000 in retired pay.

The grand total loss equals nearly \$150,000 over the servicemember's lifetime.

The bottom line: Pay caps add up. Sustaining pay is critical to maintaining a high-quality all-volunteer force.

Send your senators a [MOAA-suggested message](#) asking them to support a 1.8-percent raise that keeps military pay on pace with private-sector wage growth in FY 2015.

- See more at:
http://www.moaa.org/Main_Article_MB.aspx?id=14449#sthash.ocpN83VF.dpuf

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PA Council of Chapters



2014 State Convention

September 12-13

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Ryan Jr. MOAA President**



http://capitolwords.org/date/2002/09/17/S8663-3_tribute-to-vice-admiral-norbert-robert-ryan-jr

**and Todd DePastino -
writer, educator and
motivational speaker**



<http://veteranvoicesofpittsburgh.com/about/contact/about-todd-depastino>



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GLORIOUS INSULTS

"He loves nature in spite of what it did to him." - **Forrest Tucker**



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PA MOAA chapters have 1,894 members and another 10,591 MOAA national members live in PA and are not in chapters. That means our total PA membership is 12,485 and climbing. Thank you for staying involved!

The Eagle is published monthly by the Pennsylvania Council of Chapters, Military Officers Association of America. Its content does not reflect the official position of the DoD, any branch of the US Armed Forces, NOAA, USPHS, nor MOAA National. Please send articles and audio-visual submissions to the Editor, Bob Gray, at pacocnewsletter@gmail.com.