



Still Serving in Korea



Newsletter 02-1

The newsletter for U.S. military retirees in the Republic of Korea

Jan-Mar 2002

Medical Care Matters

Class Action Lawsuit Returning to Court

The class action lawsuit brought by retired Air Force Col. George "Bud" Day, a Medal of Honor recipient, will be returning to court on Mar 6. Last February a three-judge panel ruled that the federal government had broken its promise to military retirees who joined the military before Jun 7, 1956 and were guaranteed free medical care for life. The U.S. moved for a rehearing, which was referred to the U.S. Court of Appeals for the Federal Circuit in Washington, D.C. For more information, visit <http://www.classact-lawsuit.com/index.html>.

Armed Forces News, Feb 15

Long Term Care Open Season Set

Dates have been established by the U.S. Office of Personnel Management (OPM) for the early enrollment open season for the recently announced Federal Long Term Care (LTC) Insurance Program.

The Long Term Care Insurance Program, Public Law 106, provides insurance for federal government employees, military active duty, federal and military retirees and their family members. There will be no government subsidy, but the plan is expected to reduce rates up to about 20 percent below rates for individual commercial plans.

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Still Serving in Korea is published quarterly by the Osan Air Base Retiree Activities Office to inform retirees and family members on information of interest on rights, benefits and privileges, and on the status of legislative initiatives which affect military retirees and beneficiaries. Items in this newsletter do not necessarily reflect the views of the 51 FW, 7AF, PACAF, USAF, USFK, or DOD.

Pay Matters

Concurrent Receipt

The Retiree Activities Office received a call indicating that clarification is needed on this issue. Some people are under the impression that, as a result of recent legislation, retirees with 70 percent or higher rating from the Department of Veterans Affairs (VA) are now authorized to receive full retired pay in addition to VA disability pay. This is not correct. There has been only one change from the previous authorization that retirees with 100 percent VA disability rating receive \$300, retirees with 90 percent rating receive \$200 and retirees with 70-80 percent rating receive \$100. Retirees must have received their disability rating from the VA within four years of retirement. The change is a modest expansion of that program – payment of \$50 a month to career retirees rated 60 percent disabled within four years of retirement – that began in Feb 2002.

The misunderstanding probably arose from the legislation that authorized concurrent receipt, but there was no budget authority to fund the receipt of full retired pay for any category of disabled retiree.

Veterans' and retiree organizations are encouraging all military retirees, including non-disabled retirees, to contact their legislators to press for passage of funding for this important legislation. Military retirees are the only federal retirees who fund their own disability pay.

Osan AB Retiree Activities Office

Vets Oppose VA's \$1,500 Deductible

Some veterans groups and their congressional allies say they will resist an administration proposal to charge certain veterans up to a \$1,500 annual deductible for their health care from the Department of Veterans Affairs (VA). The deductible would impact the new priority 7 group of veterans whose incomes are more than \$24,000 if single, or \$28,000 if married, and who have no service-related disabilities or other qualifications. They or their insurance companies would pay 45 percent of the charges each time they receive medical care until they reach the \$1,500 annual cap. The Paralyzed Veterans of America charges that it would put some of the VA's specialized services out of reach of some veterans. The American Legion says that \$1,500 is grossly out of line. The chairmen of both the House and Senate veterans' affairs committees also disputed this funding plan.

Armed Forces News, Feb 15

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The program is the result of a contract with Metropolitan Life Insurance Company and John Hancock Life Insurance Company, who have come together as LTC Partners to provide this insurance.

The early enrollment will run from Mar 25-May 15, but OPM officials emphasize this enrollment is designed **only** for those who've done their homework and already know about long term care and long term care insurance.

For most people, early enrollment is not a good idea – they need the benefits of the extensive educational campaign that LTC Partners is preparing. For those people, the open season starting Jul 1 is the time to apply for enrollment in this new program. The open season runs from Jul 1 through Dec 31, 2002. There will be staggered 60-day enrollment periods within the open season.

More details will be announced later and OPM will post new Frequently Asked Questions about the early enrollment and the open season soon.

Air Force Retiree News recipients who want to receive more information about the plan can subscribe to a special service by visiting the web site at <http://www.opm.gov/insure/ltc/#bbs>. A complimentary health and financial bulletin is also available.

Air Force Retiree News, Jan 29

TRICARE Plus

Korea retirees are reminded that they are eligible to sign up for TRICARE Plus at their primary military treatment facility. TRICARE Plus is free, and it is available to all retirees and their dependents in Korea. The benefit to you of TRICARE Plus is that you are assigned a primary care provider, and you have a higher priority for access to care. The benefit for the medical community is that they can count TRICARE Plus beneficiaries as part of their care population. The care population is what is used to determine the staffing levels for hospitals, clinics, etc.

TRICARE Plus is an advantage to both the retiree community and the medical community. Please sign up yourself and your dependents at your local TRICARE office without delay. We all benefit from TRICARE Plus.

Osan AB Retiree Activities Office

Reduced Catastrophic Benefits Funds Expected

Funds were expected to become available about Dec 1 to reimburse beneficiaries whose out-of-pocket TRICARE expenses (from Oct 1, 2000 to Sep 30, 2001) were between \$3,000 and \$7,500. The National Defense Authorization Act (NDAA) lowered the annual catastrophic cap (the maximum out-of-pocket expense for TRICARE covered medical bills in a fiscal year) for retirees and their families. The cap was reduced from \$7,500 per family to \$3,000. However, the Department of Defense (DoD) was unable to implement the change on time because there was no

funding to pay for it. DoD reported that beneficiaries who had out-of-pocket expenses up to the old \$7,500 cap between Oct 1, 2000 and Sep 30, 2001 would be reimbursed when funds became available. Congress included the funding in a supplemental package that was signed into law on Jul 24, 2001 (P.L. 107-20). Now DoD and the TRICARE contractors are in the process of tracking down who is affected by the cap to pay them refunds.

An earlier Air Force Retiree News Service release urged beneficiaries to save receipts. Now, however, officials say members should not have to apply or resubmit any claims, as the refunds should be automatic. But, beneficiaries can request a refund of the excess above \$3,000 up to \$7,500 for the noted period by contacting their local TRICARE Service Center. The location and phone numbers are available at <http://www.tricare.osd.mil/tricarecenters/default.cfm>. (If you're not sure of your TRICARE region, a map is available). For the future, the \$3,000 retiree catastrophic cap will kick in automatically.

McConnell AFB Retiree Activities Office, Jan 02

Osan Retiree Dental Information

The Dental Flight Commander of the 51st Medical Group, Osan AB Hospital, has a reminder for Osan area retirees. Staffing of the Dental Flight is optimal from December through about May. With the exception of exercise periods and the week immediately following an exercise, retirees should have no problem getting an appointment during this time for examinations, cleanings and routine dental care.

As a reminder, the space available care policy for retiree dental appointments is as follows: if active duty personnel can get an appointment in less than seven days, retirees can obtain an appointment for dental care; if active duty dental appointments taken seven or more days, retirees will only be seen on a space available basis. Space available access to dental care means waiting at the dental clinic for a cancellation.

Osan area retirees are encouraged to get their dental needs taken care of before the summer personnel rotation begins.

All retirees are reminded that good dental care begins with preventive care by the individual. This includes regular brushing, flossing and use of an effective mouthwash. Listerine is highly recommended as a mouthwash; however, if you check the AAFES brand of mouthwash, you'll find that it uses exactly the same formula as Listerine and costs about half as much. ■

Osan AB Retiree Activities Office

Retiree Activities Office (RAO) Cell Phone

The RAO Director now has a cell phone. He can be reached via cell phone at 017-477-1441.

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VFW Concerned about VA Budget

The Veterans of Foreign Wars (VFW) says it is concerned about problems in the Department of Veterans Affairs (VA) system that even a \$1.5 billion increase in the VA's budget will not fix. "A preceding decade of flat and even deficit budgets for VA has placed the system on the brink of disaster," said VFW commander James N. Goldsmith. "Let there be no doubt in anyone's mind that even more dollars will be required for veterans' health care because more and more veterans are streaming into the system." The VFW said that the president's budget is not realistic because the administration is depending on the VA to collect about \$1.5 billion from veterans' health insurance payments and co-payments for non-service-connected medical care. (See previous item.) "VA has continually failed to meet its collection targets in these areas, and projecting an increase of \$400 million is a certain recipe for future shortfalls," Goldsmith said.

Armed Forces News, Feb 15

Tax Scam

Some taxpayers have received e-mail from a non-Internal Revenue Service (IRS) source indicating that the taxpayer is under audit and needs to complete a questionnaire within 48 hours to avoid the penalties and interest. The e-mail refers to an "e-audit" and references the IRS Form 1040. The taxpayer is asked for social security number, bank account numbers and other confidential information.

The IRS does not conduct e-audits, nor does it notify taxpayers of a pending audit by e-mail.

Do not provide the requested information. This may be an identity-theft attempt. If you receive e-mail of this nature (the source may be the address blessthe.com), please contact the IRS office in your area. (Korea retirees should contact their local investigative service [Air Force OSI, Army CID] or the U.S. Embassy.)

*Air Force Office of Special Investigations
Criminal Information Report 02-06, Feb 7*

Budget Would Cut Commissary Funding

The President's Budget for FY2003 envisions cutting commissary funding by \$137 million compared to 2002, including elimination of more than 2,600 jobs from stores and Defense Commissary Agency (DeCA) headquarters.

Official Department of Defense (DoD) statements indicate more than 1,000 of these positions are already vacant, and the cuts would entail no loss in service to the customer. The Retired Officers Association (TROA) finds that hard to believe. A cut of \$137 million represents a 12-percent cut in the commissary subsidy. And the jobs being cut include meat and produce managers, shelf stockers and cashiers – people whose work has a direct impact on customers.

Such reductions almost have to indicate the likelihood of additional store closings, reduced operating hours, less

stock on store shelves, and longer lines at the check-out counter.

Last year, the Administration proposed testing privatization of commissaries at some locations. In early February, Secretary of Defense Rumsfeld testified that he still thinks that's a good idea. Fortunately, Congress has refused to go down that road, recognizing that eliminating the federal subsidy for commissaries has to reduce the value of the benefit. The same argument applies to this new proposed cutback.

Surveys show consistently that the commissary is one of the most important military benefits. Any substantial cut in the commissary subsidy will surely reduce the benefit.

The Retired Officers Association Legislative Update, Feb 9

VA Home Loan Ceiling Raised

An act recently passed (see next page) by Congress and signed by President Bush increases the guaranty on Department of Veterans Affairs (VA) home loans from \$50,750 to \$60,000.

The increase means eligible veterans can use their loan benefit to purchase a home costing as much as \$240,000 without a down payment. Many lenders will make VA no-down-payment loans for four times the maximum guaranty amount, said Judy Caden, deputy director of VA's Loan Guaranty Service. Before the president signed the Veterans Education and Benefits Expansion Act of 2001 on Dec 27, 2001 the maximum guaranty was \$50,750, which allowed no-down-payment loans of up to \$203,000.

The act also changed the Native American veterans housing loan program, assistance for specially adapted housing and home loans for National Guardsmen and reservists.

VA's direct loan program for Native Americans assists those vets buying on trust land, she noted. VA issues the loan, not a private lender, so the program's different from regular guaranteed home loans.

The act extends the nine-year-old program for four years to Dec 31, 2005. The program's loan ceiling is \$80,000, except in certain high-cost areas where VA has approved up to \$120,000, she said. Loan interest rates are competitive with the mortgage market, she added.

The act also increases specialty-housing grants from \$43,000 to \$48,000 for severely disabled veterans who need homes built to accommodate wheelchairs. Veterans can use both a grant and a regular VA guaranteed loan to cover the total cost of their home purchase, she said.

Another grant program for housing adaptations for less seriously disabled vets had its ceiling raised to \$9,250 – up from \$8,250, she pointed out. "The money is for some blinded veterans and amputees who need extra help," she said. [Source: American Forces Press Service, Jan 10] □

Air Force Retiree News, Jan 12

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VA Matters

Vets E&B Expansion Act

The Veterans Education & Benefits Expansion Act (H.R. 1291) of 2001 was signed into law Dec 27, 2001. The Act provides the following:

- Increases the amount of educational benefits under the Montgomery GI Bill (MGIB) for an approved program of education on a full-time basis from the current monthly rate of \$672 for an obligated period of active duty of three or more years to \$800 effective Jan 1, 2002; \$900 effective Oct 1, 2002; and \$985 effective Oct 1, 2003. Also effective January 1, those with fewer than three years of active duty rate \$650 a month. Additional increases to \$732 will come on Oct 1 and to \$800 on Oct 1, 2003. In addition, beginning Oct 1 this year, beneficiaries can combine their monthly benefits into a lump sum to pay for 60 percent of the costs of educational courses leading to technical jobs
- Increases the rates of Survivors and Dependents Educational Assistance from \$608 to \$670 for full-time, \$456 to \$503 for three-quarter-time, and \$304 to \$345 for half-time studies.
- Allows a Vietnam-era veteran to convert from Vietnam-era GI Bill benefits to MGIB benefits if the veteran had eligibility for the Vietnam-era GI Bill benefits as of Dec 31, 1989, was not on active duty on Oct 19, 1984, and served three continuous years in the Armed Forces after Jul 2, 1985.
- Repeals the 30-year presumptive period for respiratory cancers associated with exposure to herbicide agents.
- Adds Diabetes Mellitus (Type 2) to the list of diseases presumed to be service-connected in Vietnam veterans exposed to herbicide agents.
- Expands, effective Mar 1, 2002, the definition of illnesses presumed service-connected for Gulf War veterans to include a medically unexplained chronic multi-symptom illness such as chronic fatigue syndrome, fibromyalgia and irritable bowel syndrome defined by a cluster of signs or symptoms. Signs or symptoms that may be a manifestation of undiagnosed illness or a chronic multisymptom illness would include fatigue, unexplained rashes or other dermatological signs or symptoms, headache, muscle pain, joint pain, neurological signs or symptoms, neuropsychological signs or symptoms, signs or symptoms involving the respiratory system (upper or lower), sleep disturbances, gastrointestinal signs or symptoms, cardiovascular signs or symptoms, abnormal weight loss, and/or menstrual disorders.

- Expands the definition of permanent and total disability for veterans applying for nonservice-connected pension to include: (1) a patient in a nursing home for long-term care because of disability, (2) a person disabled, as determined by the Commissioner of Social Security for purposes of benefits administered by the Commissioner, (3) a person unemployable, as a result of disability reasonably certain to continue throughout the life of the person, and (4) a person suffering from any disability which is sufficient to render it impossible for the average person to follow a substantially gainful occupation, but only if it is reasonably certain that such disability will continue throughout the life of the person or otherwise justifying a determination of permanent and total disability.
- Provides a non-service-connected pension to low-income wartime veterans aged 65 and older without requiring a determination of disability.
- Increases the home loan guaranty from \$50,750 to \$60,000.
- Increases the automobile and adaptive equipment grant for severely disabled veterans from \$8,000 to \$9,000.
- Increases the burial and funeral expense benefit for a service-connected veteran from \$1,500 to \$2,000, and increase the burial plot allowance from \$150 to \$300.
- Provides a headstone for veterans buried in private cemeteries, even in cases where a non-VA headstone has already been provided.

The fiscal 2000 authorization act approved a partial transfer of GI Bill benefits to spouses or children of military beneficiaries, but left the implementation up to the services. Under the plan, service members with at least six years of service in critical specialties could transfer up to half of their benefits to spouses or children upon agreeing to serve six more years on active duty. Spouses could start to school immediately, but children would have to wait until the service sponsor completed 10 years of service. There are no plans to offer the option this year, although the Defense Department is to forward a status report to Congress by Jun 30. [Source: Veterans Resources Network Notice , 8 Jan, and AF News, 11 Jan] ■

RAO Baguio Bulletin Update, Jan 22

Social Security Handbook On-Line

Do you have questions about Social Security benefits such as what makes you eligible for disability benefits? The Social Security Handbook is now available on-line at http://www.ssa.gov/OP_Home/handbook/ssa-hbk-htm.

Osan AB Retiree Activities Office

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Survivor Matters

Advance (or Advanced) Medical Directive

It is the right of every person to have an "advance medical directive." The following guidance is provided to help military beneficiaries decide if the choice of an advance medical directive is in their best interest.

An advance medical directive is a written document that sets forth a person's desires concerning what medical care he will receive should he become incapable of making healthcare decisions on his own, or that gives another person the legal authority to make healthcare decisions on behalf of a person who has become mentally incapacitated.

Living wills and durable healthcare powers of attorney are both advance medical directives. The advance medical directive is often simply referred to as an advance directive.

A living will is a written document that sets forth a person's desires concerning the medical care that he will receive should he become terminally ill or when his death is imminent.

A living will may specify which medical treatments should be provided, as well as which medical treatments should not.

A durable healthcare power of attorney is a written document which gives another person (known as the agent, proxy or surrogate) legal authority to make healthcare decisions. This document is valid for any period of mental incapacitation.

All competent adult patients have the moral and legal right to participate in their medical treatment decisions and to refuse medical treatment even in life-saving or life-sustaining situations. This includes the right to prepare advance medical directives concerning their medical care.

In general, active-duty patients have the same rights as non-active-duty patients. However, active-duty soldiers may not refuse certain life-saving medical or surgical procedures. When an active-duty soldier refuses such treatment, the matter is referred to the office of the staff judge advocate for resolution. Guidance concerning this is covered in Army Regulation 600-20. (and applicable regulations for the other military services)

An advance medical directive is voluntary in nature. Patients are not required to have one to be admitted or treated. Patients' care will not be compromised if they do not have advance medical directives.

Patients having advance medical directives must inform their primary care managers accordingly. They must also provide copies of their advance medical directives to their

physicians or the outpatient records room as soon as possible.

Patients who desire to make cadaver donations must coordinate with the medical institutions of their choice. Advance arrangements must be made between the donor and the medical institution that will be receiving the body.

An advance medical directive may be revoked or changed at any time. Patients may verbally inform their primary care managers or providers if they wish to change it.

To formally change an advance medical directive, patients must contact their legal assistance office.

If a patient does not currently have an advance medical directive and would like to get one, the legal assistance office is available to provide legal advice and assist individuals in preparing one.

Discuss the information in your advance medical directive with individual physicians and family members. Since local laws vary from state to state, it is suggested that patients verify that an advance medical directive prepared in one state continues to be valid when a move to another state has taken place.

(Reprinted from the Fort Leonard Wood, Mo., Guidon by Health.mil, Jan 20

Veterans Group Life Insurance (VGLI)

How Do You Apply For VGLI? Within approximately 45 to 60 days following your separation from service, you should receive an application from the Office of Servicemen's Group Life Insurance (OSGLI). You must submit this form, with the first month's premium, within 120 days following separation from service.

What Happens If You Don't Apply Within The 120-Day Period? If you do not submit your application and premium within 120 days following separation from service, you can still apply for VGLI within 1 year after your SGLI has terminated (that is, 1 year after the end of the 120-day period following separation.) However, when you apply after the 120-day period, you must submit proof of good health. You are not eligible to apply for VGLI after one year and 120-day period.

How Do You Renew VGLI Coverage? You have the option of renewing your VGLI coverage for an additional 5-year term at the end of every 5-year coverage period. OSGLI will send you a renewal form to continue coverage. The premium rate schedule for the new period will be based on your age at the time of renewal. You may renew up to the same amount of VGLI coverage you currently have in force. To ensure your renewal, be sure to send the renewal application and premium to OSGLI prior to the expiration of your current VGLI term. ■

from the Internet at www.insurance.va.gov

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Community Matters

Armed Forces Retirement Home

The most recent National Defense Authorization Act contained major changes to the Armed Forces Retirement Home (AFRH) that directly impacts retirees who may be in need of or interested in residency at the Home. AFRH operates at two locations: Washington, DC, and Gulfport, Mississippi. Both locations currently have vacancies.

The most significant change to the operations of the AFRH is the reduction in the residency fee. The fee structure for independent living is now 35% of all income to a maximum of \$1,000. Previously, the fee was 40% of all income to a maximum of \$1,500. Also, residents at the Gulfport location will benefit from a temporary reduction to a maximum of \$800 until renovated rooms are available in Dec 2006.

Veterans are eligible to become a resident of either the U.S. Soldiers' and Airmen's Home (Washington) or the U.S. Naval Home (Gulfport) if their active duty service in the military is at least 50 percent enlisted, warrant officer or limited duty officer and who are:

- Veterans with 20 or more years of active duty service and are at least 60 years old, or
- Veterans unable to earn a livelihood due to a service-connected disability, or
- Veterans unable to earn a livelihood due to non service-connected disability, and who served in a war theater or received hostile fire pay, or
- Female veterans who served prior to 1948.

Applicants must be free of drug, alcohol, and psychiatric problems, and never have been convicted of a felony.

Married couples are welcome, but both must be eligible in their own right.

At the time of admission applicants must be able to live independently. As an example of this, they must be able to take care of their own personal needs, attend a central dining facility for meals and keep all medical appointments. If increased health care is needed after being admitted, assisted living and long term care are available at both Homes.

AFRH Public Affairs Office and www.afrh.com

Military Resort Hotels to Expand

The Army is adding 229 rooms to its "Shades of Green" hotel at Walt Disney World Resort in Florida and building a new 330-room hotel in Garmisch, at the foot of the Bavarian Alps. The projects will be funded through nonappropriated funds generated by the four Armed Forces Recreation Centers. (The two other AFRCs are the Dragon Hill Lodge in Yongsan, Korea, and the Hale Koa Hotel in Honolulu.) The new hotel in Garmisch will replace four

older hotels currently operating in Chiemsee and Garmisch. Meanwhile, the Air Force has opened a new hotel for service members in Keystone, Colo. "Rocky Mountain Blue," a 1,749-acre facility with 22 ski lifts, is a partnership between the Air Force and Keystone Resorts, Defense officials said. ■

Armed Forces News, Feb 15

Social Security Notes

People who get benefits can earn more in 2002

If you're younger than 65 and you work while getting Social Security survivors or retirement benefits, you'll be able to earn more money this year and keep all of your benefits.

You can earn up to \$11,280 (up from \$10,680 in 2001). After you earn \$11,280, \$1 is withheld from your benefits for every \$2 you earn. If you will reach age 65 during 2002, \$1 will be withheld for every \$3 of earnings above \$30,000 until your birthday month.

After your 65th birthday, you can receive your full benefit amount no matter how much you earn. To learn more about working and collecting Social Security benefits, visit our Retirement Planner at <http://www.ssa.gov/retire2/whileworking.htm>.

Your Social Security benefit statement is in the mail

If you get Social Security benefits, you should have received your Social Security Benefit Statement (Form SSA-1099) for tax year 2001 already. Like W-2 forms, the benefit statements are mailed out by Jan 31 of each year.

Your benefit statement shows how much you got in Social Security benefits for the prior year. It can be used to complete your federal income tax return and will help you figure out if any of your benefits are taxable. For more information, see the Frequently Asked Questions site and ask about "1099" at <http://ssa-custhelp.ssa.gov/cgi-bin/ssa.cfg/php/enduser/home.php>.

Medicare premiums rise

If you're covered by Medicare Part B (insurance that helps pay for doctors' fees and other medical services and supplies), your monthly premium is now \$54, instead of the \$50 you paid in 2001.

If you didn't sign up for Part B when you were first eligible for Medicare, you can sign up during the annual General Enrollment Period from Jan. 1 to Mar 31. You may have to pay 10 percent more (per year) if you could have enrolled earlier, but didn't.

If you need a replacement Medicare card, visit the site at <https://s3abaca.ssa.gov/pro/imrc/imrchome.shtml>.

For more information, visit Medicare's web site at <http://www.medicare.gov/>.

Air Force Retiree News, Feb 21

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Information Matters

Retiree Activities Web Site Back

In mid-2001, the concern about protecting military computer systems from hackers resulted in a shutdown of some servers and denial of access to many .mil sites from non-.mil computers. One of the servers affected was the one at Osan AB hosting the Retiree Activities Office (RAO) web site. After nearly six months of waiting for www.osan.af.mil/retireeaffairs to return to service, I decided to start a new web site on a commercial server in early Jan. The new site is at <http://www.rao-osan.com>. You will find additional links and substitutes for military links that are not currently available.

The response to the new web site has been encouraging, as noted by the Air Force Personnel Center Retiree Activities Branch in their recent letter to RAO directors. The letter noted, "... that (the site) contains excellent information, not only for those folks living there, but for members of the retiree community who might think about moving to Korea." It goes on that the web site "... has some great links, including Space A travel."

A second site was started in Feb for mobile users. It is at <http://rao-osan.com/~wap/> and is accessible from Internet-capable cell phones and personal digital assistants (PDAs). It contains information such as bus schedules and Korea lodging phone numbers. ■

Osan AB Retiree Activities Office

Laughing Matters

Ever Wonder Why?

- Why the sun lightens our hair, but darkens our skin?
- Why women can't put on mascara with their mouth closed?
- Why you don't ever see the headline "Psychic Wins Lottery"?
- Why "abbreviated" is such a long word?
- Why it is that to stop Windows 98, you have to click on "Start"?
- Why lemon juice is made with artificial flavor and dishwashing liquid is made with real lemons?
- Why the time of day with the slowest traffic is called rush hour?
- Why there isn't a mouse-flavored cat food?
- Why Noah didn't swat those two mosquitoes?
- Why they sterilize the needle for lethal injections?
- And, when dog food has a new and improved taste, who tests it?
- Finally, if flying is so safe, why do they call the place you leave from a terminal?

from the Internet ☺

The Director's Corner

Contacts Established

In the previous newsletter issue, I warned that the changeover of services at the Defense Finance and Accounting Service (DFAS) might affect support to Korea retirees. I am pleased to report that the day the contractor took over full responsibility at Cleveland Center, I was provided a single point of contact to handle most retiree pay issues. I can confidently report that most actions are being completed in a day.

I was surprised to find that the Denver Center of DFAS also changed to contractor staffing. I deal with this center for widows receiving the Survivor Benefit Plan (SBP) annuity. I was pleasantly surprised to receive a response from a civil service employee there that he will continue to support all my requests on behalf of Korea widows.

The Social Security single point-of-contact has settled in to a regular exchange of e-mails to ask and answer questions. Where documents must be sent via fax, I can

do that from home via commercial international telephone.

The Department of Veterans Affairs (VA) e-mail support has significantly improved and I usually get responses to requests such as for change of address and direct deposit within a day or two. Claims processing is still experiencing delays, and there is little I can do in this area except to confirm that a claim is in processing.

Early Warning

Also in the previous newsletter issue, I included a warning about the vulnerability to identity theft of DD Form 214 filed with the county clerk. Since that newsletter item (based on information from a Navy office in Memphis, TN), this form of identity theft has been widely publicized and verified as a significant threat.

Newsletter 2001-3 included an item on lost wallet/purse and how to minimize the financial impact. A recent e-mail contained a recommendation to photocopy all the important documents you carry in the wallet/purse (credit and ID cards, license, etc). It's a good idea.

Jack Terwiel

**RETIREE ACTIVITIES OFFICE
51 MSS/CVR
UNIT 2097
APO AP 96278-2097**

ADDRESS CORRECTION REQUESTED

An Opportunity to Be Heard

The national on-line publication of Republicans and conservatives is GOPUSA at www.gopusa.com. It reaches the conservative leadership of the country and is heavily read by members of Congress from all sides of the political spectrum.

The editor and Chief Executive Officer (CEO) of GOPUSA are very interested in building a strong readership in the military and veteran community. They are interested in writing about veteran/military/retired issues, problems and views. At the same time, they are also interested in positive stories from the same readership block. Toward this objective they have offered me a Thursday edition slot as a columnist on military affairs. This will start out as a trial run, to determine if there is enough readership to warrant a permanent column.

The important thing is, it will give us a regular voice in the right target zone. I am willing to take on this assignment, writing for issues such as concurrent receipt, the inadequacies of TRICARE, VA health care, service earned health care, former spouses retirement pay concerns, etc., etc. However, all the issues can't be addressed at the same time and as the retired military

community, you need to support the other guy's causes, plus do your share of the heavy lifting. This means you will need to keep me informed on all the hot button issues and become regular readers of GOPUSA. You will need to key on the military column. You will need to send in your comments to the publication. Most of all, you will need to recruit family members, friends and other military members to contribute by reading GOPUSA and offering their commentary on the publication. If we can generate a strong enough response, we will have a permanent place in the publication.

So, that is the story. I am willing to give it a try, if you of the family are willing to support the effort. I would like to hear your thoughts and ideas on the matter. ■

Semper Fidelis, Tom Segel
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In the Next Issue

**A Review of Survivor Benefits –
What will they get when you die?
Retiree Newsletter Changes –
Printed copy getting more expensive**

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