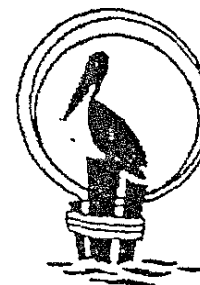




THE PELICAN POST

The official newsletter of the Disabled American Veterans
Space Coast Chapter 123, Inc.
Office & Meeting Place: Brevard Veterans Memorial Center
400 Sykes Creek Parkway, Merritt Island, FL 32952-3547
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THE PELICAN POST

Due to the high costs associated with the publication and distribution of the Pelican Post, this edition and the following editions of the publication will be available on our Chapter Website. This is the last issue that will be mailed to all members. To find the Pelican Post on the website, go to <http://www.davmembersportal.org/chapters/fl/123/default.aspx>. In the left side column click on NEWS. This will allow you to access the newsletter. You will need the Adobe Reader program to view the newsletter. If they don't already have it installed. It is a free download at: <http://get.adobe.com/reader/> Should you wish to continue to receive the Pelican Post Newsletter through the mail, please contact the DAV Chapter 123 Office **by mail with your name and current mailing address. Moreover, please notify the Chapter Office by email to FL123webmaster@davfrat.org of your email address so we can notify you when a new issue is posted to the website. Your email address will be confidential and not shared. The Pelican Post will be distributed quarterly unless an issue occurs that will invite your immediate attention. For those of you who fail to provide the DAV Chapter Office with your mailing and email address, you may be left out.**

The Commander's Call, by Bill Benagh, Commander

I will start off by introducing myself. I am Bill Benagh and I am a retired Army Officer. I served two tours in Vietnam and had other overseas assignments and duties. I have been a Life Member of the DAV for many years.

I am very proud to be the Commander of Chapter 123 and plan to carry on the successes of the previous Commander Charlie Donovan.

As most of you know, our major effort in the Chapter is the Service Officer Program. We will be expanding this effort and the Senior Service Officer John Bibby has more information in his column. We are currently a Chapter of slightly over 600 members and we always welcome new members. I encourage each of our current members to actively recruit new members. It is vital that our Chapter grows and that we provide assistance to our membership. As always, any assistance that you can provide is greatly appreciated. It is tax deductible. Many thanks to those of you have donated this year and in the past. It is very gratifying to have the funds available to support and expand our efforts.

Don't forget—this is YOUR CHAPTER. YOUR General Meeting is the second Thursday of the month at 1030 at the Brevard County Veterans Center on Sykes Creek Parkway.

Membership Report, by Joe Ford, Senior Vice Commander

All comrades can be proud of our 2010/2011 membership year. Our goal for the year was to recruit at least seven full life members. I am proud to report we exceeded that goal by 50%. We also recruited many new members who will become full Life in the near future. I commend the service officers for their efforts. A large portion of our new recruits come out of that office. Our goal for the 2011/2012 membership year is eleven (11) new full life members. As the chapter membership chairman, I challenge each of you to recruit at least one new full life member. If we work toward that challenge we can grow the chapter to new heights in a very short time. The age of the majority of our active members is between 65 to 75 years. That says we are in dire need of some young blood to take the reins of the chapter. The younger generation veteran population is growing every day and will continue for many years. We need to actively seek members from that resource.

My thanks for all your efforts last year and ask for your full support this year.

The Chapter Treasurer's Report, by Don Bullen

The function of the chapter treasurer is to manage and maintain such accounts and records of the chapter as required by law and as necessary for the fiscal well-being of our organization. This includes daily oversight and periodic reporting on chapter financial assets entrusted to our care. Financial reports are provided to the leadership as required, to the

membership monthly at scheduled meetings and annually to the State of Florida as prescribed by statute. The Chapter Annual Financial Report is submitted at the end of each 30 June reporting period. The following generous citizens have made cash donations to Chapter 123, DAV for the benefit of veterans supported by the chapter.

Mr. Seymour Barris
 Mr. James G. Cummings
 Mr. Lawrence M. Kirklin
 Mr. Maxwell King
 Mr. Arthur Lapham
 Spirit Riders Ministry
 Mr. George K Wilcutt

United Way
 Mr. Joe Ford
 Mr. & Mrs. John Sidwell
 Mr. & Mrs. Robert Best
 Mr. James F. Lehan
 Mr. Harold Derosier
 Mr. DeVaughn Bird

Mr. Joseph Brubaker
 Mr. Harold Genthner
 Mrs. Barbara Best
 Mr. Arthur R. Sanders
 Mr. & Mrs. Kenneth Ondrus
 Mr. Truman H Palmer
 Beverly M. Mackmull Trust

The Chaplains Report by Chip Hanson

George Patton, once said, "It is better to fight for something than to live for nothing." I use this quote because there are those who would rather look the other way, while our freedoms, liberty, morals, and our Nation falls further down the slippery slope that we and our ancestors fought and died for. As chaplain of the DAV Chapter 123, I have had the privilege of watching our Service Officers fight for our Veterans, both young and old. They do not stop the fight until the Veteran receives all they deserve. General Patton is very proud of all of you.

The Holidays will soon be here, remember how we were when we missed our families at this time. If you know someone who is overseas, or just away from home in the military, send them card or a letter, thanking them. Also many veterans are not doing well. They have no close friends or relatives and they may live in a nursing home or worse, in Hospice. Go see them. It is the right thing to do.

The Service Office Report by John Bibby

Currently there are 8 Certified Chapter Service Officers available to serve you at the DAV office in the Brevard Veterans Memorial Center on Sykes Creek Parkway. So far this year we have conducted a total of 593 Veteran interviews. The Service Officers have **voluntarily** worked 928 hours to serve the Veterans and completed 565 forms for them. The National Service Officers (NSO's) will be at the Veterans Memorial Center on October 13, 2011. If you are experiencing particular problems with your claim(s) with the Department of Veterans Affairs, make it a point to visit with the NSO's.

For those of you already receiving VA benefits, bring in all your VA correspondence for a periodic review of your claims. You may find yourself eligible for an increase in rating. A 60% rating for one service connected condition or multiple service connected conditions totaling 70% with one condition being rated at least 40% may make you eligible for Individual Unemployability at the 100% rate. If you do not qualify for this program, you may have a condition that merits a rating increase. Moreover, several new medical issues have been added as presumptive conditions caused by Agent Orange. They are Parkinson's disease, Ischemic Heart Disease (Coronary Artery Disease) and Amyotrophic lateral sclerosis, or ALS, also known as Lou Gehrig's disease.

Please let this office know of **any action** taken by the VA on your claim. Service Officers are present from 0800 to 1100 hours as follows:

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
Bill Benagh	John Bibby	Adam Hauck	Clay Smith	Dale Thompson	Denise Johnson or Lonnie Crofton

Fill in as needed
 Reggie Harris



New Florida Law Places "V" For Veteran on Your Drivers License

Florida Veterans can now add a "V" to their driver's license to indicate their status as Veterans. It is hoped that retailers and restaurants that offer discounts to military veterans will accept the license with the "V" as proof of military service. To add the "V" to your driver's license or ID card visit any driver's license office and present their DD-214 which indicates an Honorable Discharge from active



duty and pay a one-time \$1.00 fee at the time of renewal. **To add the "V" to the license prior to the renewal date, a charge of \$32.25 is assessed for a new license.** To obtain a copy of your DD-214 see your friendly DAV Service Officer.



The Washington Watch

2012 Retiree COLA Update

May 20, 2011 • Terry Howell

According to the Bureau of Labor Statistics the national inflation rate is still trending upward. Of course anyone who has been grocery shopping lately could tell you that, but, the Bureau of Labor Statistics reports that the Consumer Price Index for April is up 0.8 percent over the March CPI, which bodes well for COLA in 2012.

This is important for military retirees, and those drawing VA benefits, because the CPI is the indicator used to determine the annual [cost-of-living-adjustment \(COLA\)](#) and adjustments to VA [Disability and Compensation, Veterans Pension](#), and other VA rates for the following year.

According to the Military Officers Association of America (MOAA) the April 2011 CPI is up 2.9% from the 2008 CPI. The 2008 CPI will be used to calculate the 2012 COLA since there has been no COLA since 2009. This means that if the trend continues the COLA for 2012 could be quite substantial. This will also mean an increase in VA Compensation and Pension programs as well as social security rates.

NOTE: The COLA referred to here is the annual [cost-of-living-adjustment for retirees](#). It is not the same as the [Cost-of-Living-Allowance for active duty](#).

Budget Deal Impacts Defense

Air Force Sergeants Association "On Call" Newsletter

Over the past several months there have been an increasing number of proposals that would increase TRICARE premiums for military beneficiaries; eliminate presumptive service-connected conditions for disabled and ill veterans; reduce annual cost-of-living allowances; freeze military pay; end government subsidies to military commissaries; eliminate DOD elementary schools stateside; and reduce Tuition Assistance payments to active duty service members. By far, the most damaging proposals we have seen would significantly reduce the value of military retirement offered to individuals who voluntarily serve 20 or more years in uniform--including those now serving. Although none of these proposals have been offered in the form of actionable legislation, in the future some will. Rest assured that AFSA will actively oppose any change that adversely affects military readiness or reduces the value of service made by the men and women in uniform. Be proactive and reach out to your elected officials—**Now**, and remind them that maintaining our Armed Forces is their constitutional duty. Taken from AFSA "On Call" newsletter, August 5, 2011, Volume 6 Edition 24.

Obama proposes TRICARE changes

By Lisa Daniel, American Forces Press Service

WASHINGTON (AFRNS) -- Military retirees would pay an annual fee for TRICARE-for-Life health insurance and TRICARE pharmacy co-payments would be restructured under the deficit reduction plan President Barack Obama released Sept. 19, 2011. The Administration plan envisions:

- Establishing an annual enrollment fee for TRICARE For Life
- Another (unspecified) retail pharmacy copay hike
- Establishing a Base Reduction And Closer - style commission to recommend "modernizing" the military retirement system

It's time to man the battle stations. Most upsetting, the stated intent of the proposals is to "align government programs with those in the private sector" and address the "measurable disparity between the fees most retired private sector workers pay...and what retired military personnel pay." This isn't just about equity. It's about an attack on the core elements that sustain the quality career force that protects our national security.

Any who continue to sit on the sidelines jeopardize their own interests, the military community's, and the nation's future capability to sustain a strong national defense.

The plan includes establishing "**modest annual fees**" for members of TRICARE-for-Life, which becomes a second-payer insurance to military retirees who transition to the federal Medicare program upon turning age 65. The change would begin with a \$200 annual fee in fiscal 2013.

The plan also includes savings of \$15.1 billion in mandatory funds and \$5.5 billion in discretionary funds over 10 years by **restructuring co-payments for TRICARE pharmacy benefits**.

To bring the TRICARE plan more in line with private and other federal plans, the president's proposed plan would eliminate co-pays for generic mail-order drugs, while shifting retail co-pays from a dollar amount to a percentage co-pay. The change would apply to military families and retirees, but not active-duty service members.

These changes will ensure fiscal responsibility without compromising quality care for service members and their families, Pentagon Press Secretary George Little said in a statement released Sept. 19, 2011.

Defense Secretary Leon E. Panetta "has consistently emphasized the need to keep faith with our troops and their families," Little said. "That includes maintaining the highest quality health care for them," he continued. "We will continue to maintain the highest possible health care, but during this period of fiscal belt tightening, we may see modest cost increases in TRICARE enrollment fees and co-pays to sustain the health system."

The changes are necessary to help reduce the deficit and ensure the long-term strengths of the programs, a White House news release issued after Obama's speech said. The changes also would help to level "a measurable disparity" between military retirees and private sector workers, it says.

The statement notes that the administration has expanded GI Bill benefits, job training and veterans' homeless prevention programs, and proposed tax credits for employers to hire veterans.

"Still, as the cost of health care rises and benefit programs across the public and private sectors are being restructured to remain solvent," the release says, "it's important that programs that serve military retirees and veterans are modernized to be able to meet the needs of the future."

The plan also would create a commission to "modernize" military benefits through a process based on that of the 2005 Base Realignment and Closure Commission, the White House release said. Under the proposal, the Defense Department would make a proposal to the commission, which can alter the proposal before sending it to the president. The president may not alter the proposals, but would decide whether or not to send it to Congress. The Congress would have to approve or disapprove without modifications.

"The administration believes that any major military retirement reforms should include grandfathering provisions that ensure that the country does not break faith with military personnel now serving," the statement said.

Veterans Benefits



Defense Secretary Leon Panetta reassured Veterans their benefits will not be slashed amid widespread budget cutting talks in Washington. Panetta said he wants to grandfather in today's retirement pensions for current troops. "People who have come into the service...fought for this country, and who have been promised certain benefits, and as a result of that - I'm not going to break faith with what's been promised to them," Panetta said. However, Secretary Panetta continues to say that everything is on the table. The idea that seems to be on the table and is most discussed is the Defense Business Board's recommendation to replace the current system with a 401(k) retirement plan.

The use of key buzzwords like, "untenable," "unfair," and "illegal" to describe the current retirement program normally shows the bias of the officials being quoted, and the New York Times article quotes several sources who use these terms to describe the current retirement system.

Secretary Panetta did not rule out changes for future retirees. It is sincerely hoped he will be able to fulfill his announced intentions for current retirees and that his successor is of the same mindset.

TRICARE Covers Additional Cervical Cancer Test

TRICARE recently added coverage for an enhanced cervical cancer screening test which helps detect the presence of the human papillomavirus (HPV). The HPV DNA test is done to find a high-risk HPV infection that can cause cervical cancer. The test can be conducted the same time a pap smear is performed and preauthorization is not required. Beneficiaries have no copayments or cost-shares for routine cervical cancer screening and as a reminder; TRICARE



also covers screening for breast, colorectal and prostate cancer without cost shares or co-pays. For more information, visit www.tricare.mil/preventiveservices.

DOD Replacing Social Security Numbers with Unique Identifiers

As identity theft becomes more prevalent, the Department of Defense (DOD) is doing their part to protect those carrying DOD identification cards, including service members and dependents. The DOD will begin the phasing out Social Security numbers on all DOD identification cards. The Social Security numbers will begin to disappear as of June 1, 2011. For those cards expiring in June 2011, the DOD will replace them with new cards bearing unique DOD identification numbers. This number will be 10 digits long and everyone tied to the DOD will receive one. For service members, this number will double as their Geneva Convention identification number.

Those qualifying for DOD benefits will also be given 11 digit benefits numbers. These will contain 9 digits identifying the sponsor for the benefits with the last 2 being used to identify specific family members. Although the Social Security numbers will no longer be printed on the cards, they will remain embedded on bar codes on the cards. These will not be eliminated until 2012.

Cards will be replaced as their expiration date comes due. It will take the DOD approximately 4 years to replace all expired cards with newly issued cards bearing the new DOD identification numbers.

If your current military ID card has an "Indefinite" expiration date you will have to make an appointment to be issued a new card. The Patrick Air Force Base Identification Card Office is on an appointment-based system. Customers with appointments have priority at the ID office, operated by the 45th Force Support Squadron's Military Personnel Section, Customer Support Element. Walk-in customers will be seen on a standby basis, and all other mission-critical functions will be handled prior to seeing a standby customer.

Customers can schedule an appointment by calling (321) 494-6144/6147.



The Veterans Administration

Are You Eligible for the Veterans Administration Aid and Attendance Program?

Aid and attendance is a special monthly benefit payable to a Veteran, spouse, surviving spouse or parent that are helpless or nearly helpless and require the regular aid and attendance from another person. If you require the assistance of another person in performing personal functions required in everyday living; or you are bedridden from convalescence or treatment; a patient in a nursing home, or have a visual impairment of blindness or nearly blind with corrected visual acuity of 5/200 or less in both eyes or concentric contraction of the visual field to 5 degrees or less, you may be eligible for this benefit. To learn more, contact your local Disabled American Veterans Service Office.

Veterans Administration Compensation for "Exposure" to Agent Orange

Many Veterans don't fully understand how VA disability compensation works when it comes to Agent Orange. This is particularly true of any benefits that are connected to exposure to Agent Orange. Vietnam Veterans are **NOT** compensated for "exposure" to the herbicide. **They are compensated for conditions (illnesses) that are caused by or aggravated (made worse) by the exposure to Agent Orange.**

There is so much information available about Agent Orange it's not possible to list it here. See your friendly DAV Service Officer if you have any questions!

Disclosing Personal Information to a Third Party

Currently, family members attempting to act on behalf of their veteran spouse etc., are often unable to obtain essential claim or benefit related information from the Department of Veterans Affairs or to give VA claim or benefit information. Therefore, the VA has developed VA Form 21-0845, ***Authorization to Disclose Personal Information to a Third Party***.

The form allows the National Call Centers and Regional Offices to release specified information normally protected under privacy provisions to family members or other designated persons who are not powers of attorney, agents, or fiduciaries. This information can be unlimited or limited (e.g., the status of claims, benefit information, payment history, payment rate, debt owed VA, or any other information specified by the authorizer. The form also allows such designated individuals to provide certain information to the VA (e.g., such as changes of address or direct deposit accounts).

Designated persons must correctly answer a security question chosen by the claimant or beneficiary to confirm their authorization. This question must be answered correctly by the designated third party.

An organization can be designated as the third party but the name of the person representing the organization must be provided. The form may be revoked at any time by the claimant by an oral declaration, a written letter, or by submitting a new claim. If the claimant has a fiduciary, the third party cannot change the address or direct deposit.

The Decision Review Officer Appeal Process

As you may or may not know, there are a number of complex steps that the Veterans Benefits Administration (VBA) will follow to adjudicate your claim for disability benefits. Your claim is received, checked to determine your eligibility, and the evidence gathered, and put in place in your claim folder. You are given a Compensation and Pension examination and you are notified several times of your opportunity to submit more evidence. Your claim folder is perfected by a Veterans Service Representative (VSR) and eventually your claim is ready for adjudication. Then it marches on to the desk of the Ratings Veterans Service Representative (RVSR).

The RVSR is under tremendous pressure to turn out a given volume of work. This VA employee operates on a quota that doesn't allow the time that would be necessary to do a thorough reading of your entire folder. This is one of the points in the process where serious mistakes often occur. You may receive a denial of your application for a benefit or a extremely lower rating than you believe you deserve at this stage.

Upon receiving your award letter and discovering that the decision is flawed, you have **one year to appeal** that decision. This appeals process allows you to have your case sent to the Board of Veterans Appeals for a complete review by a higher authority. This approach is called a Formal Appeal.

If you respond within 60 days of the date of the award/denial letter, you may ask for a Decision Review Officer to review the decision and request a hearing should you want one to explain your claim. This is usually the first step in the appeal process. The Decision Review Officer process is often much faster than a Board of Veterans Appeals process as the folder is kept "local" at the Regional Office (RO).

The Decision Review Officer is a senior employee with greater training and experience and significant authority to make independent decisions. The Decision Review Officer process is a "de novo" review. This means that the individual who is reviewing your claim has not been previously involved in the review of your file and brings no bias or preconceived ideas to the task. This may be the first time that any individual in the system will actually sit down and read your folder completely.

What is Ischemic Heart Disease?

The Veterans Administration presumes a Veterans' ischemic heart disease is related to their exposure to Agent Orange or other herbicides during military service. Ischemic heart disease and cerebrovascular diseases are major causes of mortality in the United States. Therefore factors associated with these diseases are important to identify. Ischemic Heart Disease may be clinically silent or manifest itself as angina.

Is it the same as Coronary Artery Disease and Atherosclerosis? The short answer is yes. The following may help you if you are denied your benefit because your record isn't specific to Ischemic Heart Disease.

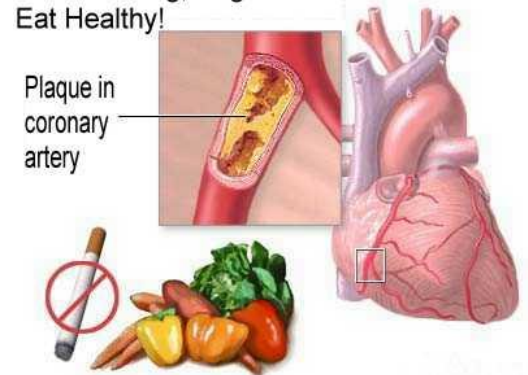
What is ischemia? Ischemia is a restriction in blood supply, generally due to factors in the blood vessels, with resultant damage or dysfunction of tissue. Ischemia often causes chest pain or discomfort known as angina pectoris.

Ischemia is a condition in which the blood flow (and thus oxygen) is restricted to a part of the body. Cardiac ischemia is the name for lack of blood flow and oxygen to the heart muscle.

What is ischemic heart disease? It's the term given to heart problems caused by narrowed heart arteries. When arteries are narrowed, less blood and oxygen reaches the heart muscle. This is also called **coronary artery disease** and **coronary heart disease**. This can ultimately lead to heart attack.

What Is Coronary Artery Disease? Coronary artery disease (CAD), also called coronary heart disease, is a condition in which plaque builds up inside the coronary arteries. These arteries supply your heart muscle with oxygen-rich blood. Plaque narrows the arteries and reduces blood flow to your heart muscle. It also makes it more likely that blood clots will form in

Quit Smoking, Begin Exercise
Eat Healthy!



your arteries. Blood clots can partially or completely block blood flow. When your coronary arteries are narrowed or blocked, oxygen-rich blood can't reach your heart muscle. This can cause angina or a heart attack.

Definition of Coronary Artery Disease: Coronary artery disease develops when your coronary arteries — the major blood vessels that supply your heart with blood, oxygen and nutrients, become damaged or diseased. Cholesterol-containing deposits (plaques) on your arteries are usually to blame for coronary artery disease. When plaques build up, they narrow your coronary arteries, causing your heart to receive less blood. Eventually, diminished blood flow may cause chest pain (angina), shortness of breath or other coronary artery disease symptoms. A complete blockage can cause a heart attack.

Definition of Coronary atherosclerosis: Coronary atherosclerosis is an inflammatory disease characterized by the accumulation of white blood cells, cell debris, fatty substances (cholesterol and fatty acids), calcium, and fibrous tissue (plaque or atheromas) on the walls of the coronary arteries that supply the heart muscle. As plaque slowly increase in size over many years, **the artery narrows in places (called stenosis), and blood flow to the heart is reduced.** Cholesterol-containing plaques are highly dangerous even without narrowing of the vessel because the fibrous cap can be softened and rupture suddenly during acute heavy exercise or activity (e.g., extreme athletic effort, shoveling snow, etc). This can cause bleeding from the blood vessel wall, resulting in blood clot formation that may obstruct the vessel. The stenosis may become so significant that the **blood supply is inadequate to meet the needs of the heart (myocardial ischemia)**, and the affected part of the heart muscle no longer functions normally. Myocardial ischemia typically results in chest pain (angina pectoris), but may also cause no symptoms (silent ischemia). Total blockage of a coronary artery results in a heart attack (myocardial infarction).



Symptoms of stable ischemic heart disease include angina (characteristic chest pain on exertion or emotional situations) and decreased exercise tolerance. Unstable Ischemic Heart Disease presents itself as chest pain or other symptoms at rest, or rapidly worsening angina. Diagnosis of Ischemic Heart Disease is with an electrocardiogram, blood tests (cardiac markers), cardiac stress testing or a coronary angiogram. Depending on the symptoms and risk, treatment may be with medication, percutaneous coronary intervention (angioplasty) or coronary artery bypass surgery (CABG).

Various treatments are offered in people deemed to be at high risk of coronary artery disease. These include control of cholesterol levels in those with known high cholesterol, smoking cessation, and control of high blood pressure.



Veteran-Owned Businesses

VeteranOwnedBusiness.com is a comprehensive, user friendly directory of small, medium and large businesses owned by veterans, active duty military, reservists and service disabled veterans. More than 6,000 veteran-owned businesses, divided into 28 categories that range from Accounting to Technology are available. You can search the website to investigate veteran owned businesses to "Hire a Vet." If you are a veteran and would like to add your business, you are invited to submit it online. Be sure to visit this site often and support our veterans! www.veteranownedbusiness.com.



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Or current occupant ... Please inform the Chapter of changes to address & member status ... Thanks

DAV #123

THE PELICAN POST

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