



The Bald Eagles

**Summer 2018
Edition**

ARLINGTON HEIGHTS NEWSLETTER

****A Satellite of Scott Air Force Base, Illinois****

This office continues to serve as a link between retirees, dependents/annuitants, and their entitlements. Our host organization is **85th SUPPORT COMMAND**. Volunteers staff the office from 0900 to 1500 hours, Monday through Friday. Our mailing address and other contact information is presented below:

85th SUPPORT COMMAND
1515 W. CENTRAL ROAD
Bldg 203, Retiree Office
ARLINGTON HEIGHTS, IL 60005-2475

Note New Phone Numbers

SRAO Telephone: (719) 366-2091

SRAO Email Address: usrao2@gmail.com

ID Cards: (719) 366-2064

ID Card appointments <https://rapids-appointments.dmdc.osd.mil/>

Our apologies - Our phone number has changed and at this time we **no longer** have a **toll-free number**. If a toll free number becomes available we will contact all our subscribers, accordingly.

IF YOU'RE VISITING US

Our building has an electronic entry system. Please use the yellow telephone outside the entrance to call any office for entry and escort to your destination. Unlike in the past, you'll have to use the 10 digit number.

The DCMA/USAR Building 203 is located behind the flagpole and completely accessible to those handicapped. Parking spaces are near the door and the building has elevators for your use.

Contact us for a strip map to help you find the Arlington Heights Army Reserve Center

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This Satellite Retiree Assistance Office [SRAO] newsletter is authorized under Air Force Instruction (AFI) 36-3106. While every effort is made to provide accurate information, we cannot be responsible for errors or omissions in material from other sources. Any opinion or beliefs found in this newsletter do not reflect the opinion or beliefs of the Department of Defense, the Department of Homeland Security or any other government agency. We invite input from our readers and reserve the right to edit content.



APPLICATION PROCESS FOR NEW VETERANS' ID CARD

Recently, the U.S. Department of Veterans Affairs (VA) announced that the application process for the national Veterans Identification Card (VIC) is now available for veterans—yet another action honoring their service.

This has been mandated through legislation since 2015 to honor veterans and this rollout of the ID card fulfills that overdue promise.

Only those veterans with honorable service will be able to apply for the ID card, which will provide proof of military service and may be accepted by retailers in lieu of the standard DD-214 form to obtain pro-motional discounts and other services where offered to veterans.

“The new Veterans’ Identification Card provides a safer and more convenient and efficient way for most veterans to show proof of service.” said VA Secretary Dr. David J. Shulkin. “With the card, veterans with honorable service to our nation will no longer need to carry around their paper DD-214s to obtain veteran discounts and other services.

The VIC provides a more portable and secure alternative for those who served the minimum obligated time in service, but did not meet the retirement or medical discharge threshold. Veterans who served in the armed forces, including the reserve components, and who have a discharge of honorable, or general under honorable conditions, can request a VIC.

To request a VIC, veterans must visit www.vets.gov and click on “Apply for Printed Veteran ID card at the bottom left of the page and sign in or create a new account if it is their first time on the site.

Veterans who apply for a card should receive it within 60 days and can check delivery status of their cards at vets.gov. A digital version of the VIC will be available online as well.

[Source: Misawa AB RAO Newsletter Oct-Dec 2017]

COMMISSARY PRICE LIST TOOL



Remember back when the commissary website used to list all the sale items at each stateside store and their exact prices? A super handy way to milk the most savings out of a commissary run, it was also the only way to easily tell when items were marked down. The system did not use sale tags until 2011, so unless you happened to know the regular price off the top of your head, there was no way to tell at a glance in the store whether or not things were cheap. The list was the only tool.

But the section has been down since a DeCA site redesign last year. In a recent erroneous news release officials were reportedly getting ready to launch an even better one. Instead of just a super long, alphabetical list of items and prices, the new section would supposedly let customers look up the price of any item in any store, the release said.

However, on 29 MAR officials with DeCA reported that their announcement about the new tool was wrong and patrons, they said, will not be able to look up "any item" as they originally announced. Instead, the new tool will be the same as the old, not nearly as cool as what they originally said tool. You'll only be able to see sale items. As for when this will be available, officials didn't release a roll out date for that, instead saying "the next few months."

[Source: Military.com | Amy Bushatz | March 26 & 29, 2018]

DFAS ADDRESS CHANGE - FINAL NOTICE



On May 1, 2017, the mailing addresses for Retired and Annuitant Pay changed, and mail has been forwarded from the old P.O. Box addresses to the new mailing addresses since that date. The old addresses in Kentucky will be discontinued on April 30, 2018 and any mail received after April 30, 2018 will be returned.

The new addresses are:

- **Retired Pay:** Defense Finance and Accounting Service, U.S. Military Retired Pay, 8899 E 56th Street, Indianapolis IN 46249-1200
- **Annuitant Pay:** Defense Finance and Accounting Service, U.S. Military Annuitant Pay, 8899 E 56th Street, Indianapolis IN 46249-1300

Mail sent to the old P.O. Boxes in London, KY, will be forwarded to the new addresses until April 30, 2018 (after that date, mail sent to the old addresses will be returned). Sending mail to the old addresses will add seven to ten days to the normal processing time. The telephone and fax numbers have not changed. Continue to use <https://mypay.dfas.mil/mypay.aspx> to access your Retiree Account Statements.

For additional information visit <https://www.dfas.mil/retiredmilitary.html>

[Source: DFAS-Cleveland / Director, Retired Pay / April 18, 2018]

DIRECT DEPOSIT ADDRESS CHANGES



If you are getting government payments you are most likely receiving them via Direct Deposit. In fact, the government requires all payments to individuals be made via direct deposit, there are exceptions to this rule, but they can be cumbersome. If you are unable to obtain a bank account, the government will issue you a debit card, they will then deposit your payments to that debit card. For more information see the DFAS website. If you are one of the 99 percent of the people who get your government payments by direct deposit or Electronic Funds Transfer (EFT), the following addresses just how to change your bank account information in case you move or change banks.

Direct Deposit of VA Payments

If you get payments from the VA for GI Bill, disability compensation, vocational rehabilitation, Dependents Indemnity Compensation, or more you can change your direct deposit information on the

VA's eBenefits website. To change your information click on "Manage" on the top of the screen, then click on "Contact and Direct Deposit" on the menu that appears. To update your payment information online, you must have a submitted claim that is currently under consideration or be receiving benefits. You can also mail the Direct Deposit Enrollment VA's eBenefits website. to: VA National Direct Deposit Center, Suite B, 125 S. Main Street, Muskogee, OK 74401. If you have problems, the best way to get a speedy answer is calling the VA. For GI Bill benefits, call 888-GI BILL (888-442-4551), for all other benefits call 800-827-1000.

Military Retirement & Survivor Benefit Plan Payments

If you are receiving military retirement or Survivor Benefit Plan (SBP) annuity payments, the fastest and easiest way to change your direct deposit account information is through the Defense Finance

and Accounting System (DFAS) myPay online account access system. If you don't already have a myPay account, it can take a little effort to set one up, but the benefit is worth the effort. You'll have 24 hour a day, 7 day a week access to your account details, annual account statements, the ability to change your direct deposit account, change your mailing address, and print tax statements.

If you are unable to set up a myPay account, or do not want to, then you will need to change your direct deposit information using the paper Direct Deposit Enrollment Form (FMS 2231), and mailing it to: Defense Finance and Accounting Service, 8899 E. 56 Street. Indianapolis, IN 46249. Paper forms may take up to 60 days to be processed. As always, if you have problems, you can always call DFAS at 800-321-1080 for help.

If you are living overseas and want your government payments directly deposited into an American bank, you follow the instructions above, if you want them deposited into a foreign bank it can be a bit trickier. Normally, the deposit will be in U.S. Dollars, the bank will convert it to the local currency, you may have to pay a conversion fee. If you are in Canada you have the option to be paid in U.S. Dollars or Canadian Dollars. Currently the U.S. Treasury allows your VA payments to be directly deposited into foreign banks in 65 different countries, and your military retirement to be directly deposited into foreign banks in 45 countries. To sign up for direct deposit into a foreign bank you will need to submit an International Direct Deposit Enrollment SF 1199-I) and submit it by mail to the proper agency above.

[Source: Military.com | Jim Absher | April 11, 2018]

Direct Deposit Overseas

FREE HEALTH SCREENING SCAM



"Free health screening!" This offer often pops up at local health fairs, senior housing, and community centers. Screenings are mostly an affordable way to stay on top of your health, and most providers are legitimate, but BBB has been hearing about scammers who use them as bait to steal sensitive personal information from unsuspecting victims.

How the Scam Works

- You show up for your free health screening, and the representative asks you to fill out a sign-in sheet. This sheet asks for standard information, such as your name. But it also requests sensitive information, such as your Medicare or Social Security number. In some versions, "health company reps" claim that your health plan will cover the cost and send you the results. All you need to do is provide your ID and plan information.
- **Don't fall for it!** Scammers may go through the motions of the health screening – such as taking your blood pressure or cholesterol levels -- only to use your personal information later. Scammers can use this information to bill your insurance for thousands of dollars' worth of tests, gain access to your personal genetic information, or simply to steal your identity.

Protect Yourself from Free Health Screening Scams

- Guard your personal information carefully. Never give your medical insurance ID number, Social Security number, or banking information to strangers.
- It is illegal to accept anything of value in exchange for medical services. Never trade personal information for "free" tests.

- Don't consent to lab tests without direct orders from your doctor. Protect yourself and your health insurance benefits.
- Keep a close eye on correspondence from your medical insurance provider. Inform your provider right away if you notice any unauthorized changes or charges.

Read more about healthcare scams at www.BBB.org/healthcarescam. In the United States, learn more about how to protect yourself from Medicare fraud at www.Medicare.gov. If you've fallen victim to this type of scam, you can help others avoid being scammed by filing a report with www.BBB.org/ScamTracker. Learn more about other scams and how to avoid them at www.BBB.org/scamtips.

[Source: BBB Scam Alert | April 6, 2018]

2019 TRICARE DENTAL PROGRAM [TRDP] TRANSITION INFORMATION

Beginning on January 1, 2019, the TRDP will be replaced by the Federal Employees Dental and Vision Insurance Program (FEDVIP). To **Learn More** be sure to visit TRICARE.benefeds.com throughout 2018 for updates about the TRDP to FEDVIP dental plan transition and further information about the enrollment period beginning in November 2018.



[Source: <https://trdp.org> – Jun 2018]

New Online Notice of Death Option



Reporting the death of a retiree can be a difficult time for anyone. We know that many in the RSO community will assist the family with this task, and waiting on the phone to report a death can take valuable time out of your day. Therefore, DFAS has worked to correct the issues that forced the removal of the online form used to report the death of a retiree. We are pleased to report that as of March 1, 2018, the online option has been restored.

When reporting a retiree's death, be sure to have the following information available:

- Retiree's full name
- Retiree's SSN
- The date of death
- Cause of death
- Marital status
- If married, the wedding date

To use the online Notice of Death option, click on the link at the top of the Retired Military & Annuitants main page, which is located at <https://www.dfas.mil/retiredmilitary>. This will take you to a form where you will enter all of the pertinent information.

The form also asks for your name, address, phone number and email address. As a third party completing this form for someone else, please use the information of the person who reported the death to you. Updates on the status of the claim will be sent to the email address provided, including an email verifying that the notification was received.

[Source: R&A Quarterly News Letter – March 2018]

SRAO Note: If you have difficulty accessing the online option – please call our office and we'll assist you with the reporting.

HEALTH CARE OPTIONS AT AGE 65



At age 65, it's decision time: employer health plan and/or Medicare/TRICARE known as TRICARE For Life (TFL)? At age 65, TRICARE converts to a Medicare supplement plan and TRICARE Prime and Select are not available. TFL requires Medicare Parts A & B. Younger spouses continue under your employer health plan, stay under TRICARE Prime/Select, or stay with both until age 65. Here are your options:

- You keep your employer plan while working and delay Medicare/TFL. You're allowed to delay Part B while working and covered by an employer's health plan. You temporarily lose TFL benefits until you enroll in Part B.
- Go with both the employer plan and Medicare/TFL. Enroll in Parts A/B Medicare, get your TFL benefits and have your employer's plan. You'll pay for all programs and you might be over insured.

- Go Medicare/TFL only. Check to see whether you can suspend your employer's plan before you cancel it. Enroll in Medicare Parts A/B up to three months prior to age 65.

As long as you are working and covered by your employer's plan, the employer's plan pays first, Medicare second, and TRICARE third. Once you stop working, the payment order is: Medicare pays first, then your employer's plan, and finally TRICARE. If you have TFL only, Medicare is the first payer, then TRICARE. It's best not to enroll in another drug plan. Another drug plan has to pay first, and you'll be filing manual claims with TRICARE. In addition, another drug plan disqualifies you from the TRICARE Pharmacy Home Delivery program.

[Source: MOAA Newsletter / Shane Ostrom / March 1, 2018]

GETTING A COPY OF YOUR MILITARY RECORDS



If you need a set of your military records for any reason, you can obtain them by faxing or mailing a request to the National Personnel Records Center. While they will accept a letter (if you get all the right information into it), it is best to use the standard form SF-180 to request it. You can download that form at Standard Form 180.

Mail the completed form to:

National Personnel Records Center
1 Archives Drive
St Louis, MO 63138

OR Fax the form to 314-801-9195

If you need the records in emergency circumstances, contact our office (847-377-3344) (Lake County VAC) and we can help you expedite the process.

[Source: The Standard Bearer (MOAA) Newsletter - March 2018]



FACEBOOK QUIZ SCAM

All your friends are sharing a new quiz on Facebook. But before you join in, be sure to do your homework. Those fun quizzes can be a way to steal your personal information.

How the Scam Works

- A clever quiz is making the rounds of your friends' Facebook feeds. Answer a few questions about yourself and find your spirit animal, top place to live, or favorite TV show character. These quizzes may seem like harmless fun – and some are – but many of them are designed to gather personal information about you. Telling the difference can be difficult.
- One warning sign is if a quiz requires you to grant a third-party application access to your Facebook profile. When you start a quiz, a pop-up will appear. It reads something like: "Allowing [quiz name] access will let it pull your profile information, photos, your friends' info, and other content that it requires to work." This means the quiz creators can access any data you share, which may include photos, workplace details, and your location. This can put you at risk for many other scams, such as an emergency con.

Tips to Spot this Scam:

- **Be skeptical:** Before you take a quiz, figure out who created it. Is it a brand you trust?
- **Adjust privacy settings:** Review your social media account's privacy settings and be strict about what information you share.
- **Remove personal details from your profile:** Don't share information like your phone number or home address on Facebook or other accounts.

For more details about this scam, read BBB's full article and check out Komando.com. To report a scam, go to BBB Scam Tracker (BBB.org/scamtracker). To protect yourself from all kinds of scams, visit the BBB Scam Tips page (BBB.org/scamtips).

[Source: *BBB Scam Alert* | February 2, 2018]

SILVER STAR SERVICE BANNER REQUEST

Silver Star Families of America define a wounded service member as any Armed Forces personnel either currently serving honorably or those who have served honorably from ANY war, who having served in a war zone, has been wounded by enemy action or who have been injured or contracted a serious illness that

could be rated at least 10 percent disabled by the Department of Veterans Affairs. All wounds, injuries or illnesses must have originated in a war zone, including: Purple Heart recipients, victims of friendly fire, injured in a war zone, and those who suffer from PTS, TBI, Agent Orange Effects and Gulf War Syndrome.

SRAO Note: If you desire an application for requesting a Silver Star Service Banner, please contact our office and we'll forward a copy of the form and all applicable requested information.

[Source: *West Suburban Chapter eNEWS 04-14-2018*]



MILITARY DEATH BENEFITS

Online fundraising sites let well-wishers provide financial support for grieving families, both in and out of uniform. But as more requests on behalf of active-duty military dependents show up on these sites, sometimes offering emotional pleas for survivors who are destitute or “left with nothing,” donors should consider what programs are in place to assist these families, and whether online generosity may overlap with existing benefits. Most civilians, and even some in the military, “are generally unaware of the robust benefits the government provides,” said Jen Harlow, director of casework support services for the nonprofit Tragedy Assistance Program for Survivors (TAPS), “and also what organizations like ours provide.”

Among other things, TAPS offers information about benefits and helps connect survivors with those benefits, government and otherwise. It provides grief counseling, staffs a 24-hour help line, and works with other organizations to help fill gaps, such as supplementing a family’s finances until monthly payments from various government sources begin. Usually, Harlow said, the person who starts a fundraising campaign for

a survivor on a site such as GoFundMe is a friend or family member. TAPS may reach out to let them know about the nonprofit and to make sure they know about benefits available to the survivors.

If you’re considering a donation, you may want to contact the campaign organizer to learn how the money will be used. An example: A campaign seeking money for education costs for children of a fallen service member may have been started by a friend who is unaware of the federal and nonprofit-program offerings that will cover such expenses. Donors also should consider the costs associated with online giving. Sites have different methods of covering their costs; GoFundMe, for example, takes 2.9 percent plus 30 cents per donation. On a \$100 donation, \$3.20 goes to the administrator. Use these factors to inform your giving, but don’t let them dissuade you from acting on your charitable instincts. “If people want to give, that’s wonderful, and they should support the military family as much as they can, because people sacrifice so much,” said Bonnie Carroll, president and founder of TAPS.

DEATH BENEFIT BASICS

Immediate benefits to survivors of those who die on active duty:

SGLI: Servicemembers’ Group Life Insurance will pay up to \$400,000 to beneficiaries selected by the service member. Service members who wish to reduce that amount must do so in writing.

Death gratuity: This \$100,000 payment also goes to beneficiaries of the service member’s choice. Note: The service member is not obligated to choose those dependent on his income when selecting SGLI or death-gratuity beneficiaries.

CAO: The service member’s primary next of kin is assigned a casualty assistance officer, who will provide information about benefits and help family members apply for those benefits, among other need-dependent duties.

Burial benefits: A grave site at a Veterans Affairs Department cemetery, with a headstone or marker; a burial flag; and transportation to the burial site for immediate family members, or the reimbursement of transportation costs.

Ongoing monthly payments include:

- **DIC:** Dependency and Indemnity Compensation pays a monthly, nontaxable allowance of \$1,283.11 to the spouse and another \$317.87 per child under 18, along with another \$270 per month for two years if there is at least one child. Rates adjust each year for cost-of-living increases. Some surviving parents may receive DIC, with the amount based on their income.
- **SBP:** The Survivor Benefit Plan pays a monthly benefit equal to 55 percent of the service member’s retirement pay had the member been retired at 100 percent disability at time of death. However, the amount of the SBP is offset, dollar for dollar, by the amount of Dependency and Indemnity Compensation the surviving spouse receives.
- **Social Security:** Monthly benefits are paid to the surviving spouse with children, based on the earnings of the service member.

Education benefits:

- **Fry Scholarship:** The Marine Gunnery Sergeant John David Fry Scholarship provides Post-9/11 GI Bill benefits (full tuition and fees, a monthly housing allowance, and a stipend for books and supplies) for public school, in-state students who are dependents of fallen service members. Up to 36 months of benefits are paid at the 100 percent level. A surviving spouse is generally eligible for 15 years after the service member’s death; a child’s eligibility ends on the child’s 33rd birthday.
- **DEA:** Children and spouses also may be eligible for the VA-run Survivors’ and Dependents’ Educational Assistance program, though there are some limitations.
- **Other scholarships:** Spouses and children may be eligible for a number of scholarship programs funded by charities and other service groups. A good starting point is the Fisher House Foundation’s scholarship search tool.

Other continuing benefits:

- Tricare health benefits continue at the rates for active-duty dependents for three years; after that, co-pays and cost shares are the same as retirees pay. Spouses and children are eligible for Tricare Dental Program benefits for three years and may be eligible for the Tricare Retiree Dental Program afterward.
- Commissary and exchange shopping privileges continue.
- Eligibility for VA-backed home loans continues.

[Source: MilitaryTimes | Karen Jowers | January 17, 2018]

NATIONAL ANTHEM



In May, 2007 Chaplain Jim Higgins attended a showing of 'Superman 3' at LSA Anaconda located on the Ballad Airport in Iraq, north of Baghdad. They have a large auditorium that is used for movies as well as memorial services and other large gatherings. As is the custom at all military bases, attendees stand to attention when The National Anthem begins before the main feature. All was going well until three-quarters of the way through The National Anthem, the music stopped. Now, what would happen if this occurred with 1,000 18-to-22-year-olds back in the States? You can imagine that there would be hoots, catcalls, laughter, a few rude comments, and everyone would sit down and yell for the movie to begin. Of course,

that is, only if they had stood for The National Anthem in the first place. In Iraq, 1,000 soldiers continued to stand at attention, eyes fixed forward. The music started again, and the soldiers continued to quietly stand at attention. Again, though, at the same point, the music stopped.

What would you expect 1,000 soldiers standing at attention to do? Frankly, Chaplain Higgins expected some laughter, and everyone would eventually sit down and wait for the movie to start. No! You could have heard a pin drop while every soldier continued to stand at attention. Suddenly, there was a lone voice from the front of the auditorium, then a dozen voices, and soon the room was filled with the voices of a thousand soldiers, finishing where the recording left off: "And the rockets' red glare, the bombs bursting in air, gave proof through the night that our flag was still there. Oh, say, does that Star Spangled Banner yet wave, o'er the land of the free, and the home of the brave."

It was the most inspiring moment the Chaplain Higgins had in Iraq, and he wanted you to know what kind of U.S. Soldiers are serving you.

[Source: <https://www.truthorfiction.com/iraq-anthem> | Rich McMeekin | March 2, 2018]

MILITARY SKILCRAFT PEN

Anyone who's served in the military, worked for the federal government or addressed a package at the post office is probably familiar with an iconic government pen. But they might not have realized it was made by the visually impaired for the past five decades. The ubiquitous SKILCRAFT U.S. Government pens turned 50 during April 2018. National Industries for the Blind traces the pen's history to April 20, 1968, when it was introduced

to government buyers. The nonprofit organization was tapped to supply pens after another manufacturer made 13 million defective ballpoints in 1967. The pens must be able to write a continuous line 1 mile (1.6 kilometers) long and keep the ink flowing despite extreme temperatures — from 40 degrees below zero to 160 degrees (4 to 71 degrees Celsius).

[Source: *The Associated Press* | Jonathan Drew | April 27, 2018]



TRICARE FOR LIFE – CO PAYS

Military members and retirees, including Tricare for Life users, are used to slight drug price co-pay increases year over year. But when fees for 90-day supplies for prescription drugs received through the system's mail-order pharmacy, Express-Scripts, went from free to \$7 on 1 FEB, many Tricare for Life users said they were blindsided. They had been told they would be largely exempt from a series of major Tricare changes rolled out Jan. 1, including higher co-pays and enrollment fees. [See *additional info in the below article.*]

So why were they now being billed for drugs that had been free? The answer is that the 1 FEB drug price increases and the 1 JAN Tricare changes are entirely unrelated. But Tricare for Life users still wondered where, exactly, these changes came from. That history lies in the 2018 National Defense Authorization Act, and a section that makes permanent a protection for military survivors against a measure known as the "widow's tax." That measure required that any money received from the Survivor Benefit Plan (SBP) by a new widow or widower whose spouse died from a service-related cause be offset dollar-to-dollar by the money he or she could receive from the Dependency and Indemnity Compensation program. The fix, which had been set to expire this year, reduced the amount of that offset.

Some members of Congress wanted to make that fix permanent. But to do so, they had to find a way to pay for it -- to the tune of about \$1 billion a year. The funding solution? Raise pharmacy fees for everyone. That pharmacy cost increase, which impacts all Tricare pharmacy users, was approved in the 2018 National Defense Authorization Act. As a result, the only places left for beneficiaries to receive medication for free are military treatment facility pharmacies.

[Source: *Military.com* | Amy Bushatz | February 27, 2018]



TRICARE PHARMACY COPAYS CHANGES



Feb. 1, 2018, copayments for prescription drugs at TRICARE Pharmacy Home Delivery and retail pharmacies will increase. These changes are required by law and affect TRICARE beneficiaries who are not active duty service members. While retail pharmacy and home delivery copayments will increase, prescriptions filled at military pharmacies remain available at no cost. You can save the most money by filling your prescriptions at military pharmacies. “Military pharmacies and TRICARE Pharmacy Home Delivery will remain the lowest cost pharmacy option for TRICARE beneficiaries,” said U.S. Air Force Lt. Col. Ann McManis, Pharmacy Operations Division at the Defense Health Agency.

Using home delivery, the copayments for a 90-day supply of generic formulary drugs will increase from \$0 to \$7. For brand-name formulary drugs, copayments will increase from \$20 to \$24, and copayments for non-formulary drugs (A drug in a therapeutic class that isn’t as

clinically or cost-effective as other drugs in the same class. You pay a higher cost share for these drugs.) without a medical necessity will increase from \$49 to \$53. At a retail network pharmacy, copayments for a 30-day supply of generic formulary drugs will increase from \$10 to \$11 and from \$24 to \$28 for brand-name formulary drugs. In some cases, survivors of active duty service members may be eligible for lower cost-sharing amounts.

TRICARE groups pharmacy drugs into three categories: generic formulary, brand-name formulary and non-formulary. You pay the least for generic formulary drugs and the most for non-formulary drugs, regardless of whether you get them from home delivery or a retail pharmacy. To see the new TRICARE pharmacy copayments, visit www.tricare.mil/pharmacycosts. To learn more about the TRICARE Pharmacy Program, or move your prescriptions to home delivery, visit www.tricare.mil/pharmacy.

[Source: <https://tricare.mil> | Benefits Update | December 15, 2017]

VA BENEFITS - A FEW YOU MAY HAVE OVERLOOKED



1. Any veteran who is service-connected for a disability for which he or she uses prosthetic or orthopedic appliances may receive an annual clothing allowance.
2. VA provides pensions to low-income surviving spouses and unmarried children of deceased veterans with wartime service.
3. A surviving spouse age 57 and older who remarries after December 15, 2003, is entitled to continue to receive benefits.

4. Passports are available to family members free of charge for the purpose of visiting their loved one's grave or memorialization site at the American military cemeteries on foreign soil.
5. A rating percentage is considered "protected" once it is in place for 20 years. There would be no danger of a decreased disability rating after the 20 year mark.
6. A new imaging study has found that Gulf War veterans have what appear to be unique structural changes in the wiring of their brains.
7. Disabled Veterans may be eligible to claim a federal tax refund based on: an increase in the Veteran's percentage of disability from the Veteran's Administration (which may include a retroactive determination) or the combat-disabled Veteran applying for, and being granted, Combat-Related Special Compensation, after an award for Concurrent Retirement and Disability.
8. Veterans who are 100% service-connected IU may be eligible for an additional monthly entitlement of \$62.50/mo for catastrophic injury.

[Source: U.S. Veteran Compensation Programs / December 31, 2017]

MEDICARE ID CARDS



Every Medicare beneficiary will receive a new identification number and card soon. The measure is part of an effort to help protect beneficiaries from identity fraud, according to Medicare, a federal health insurance program primarily for folks ages 65 and older. Currently, Medicare identification numbers are based on Social Security numbers. As the Medicare program tells beneficiaries: *"Fraudsters are always looking for ways to get your Social Security number, so we're removing Social Security numbers from all Medicare cards to make them safer. Your new card will have a new Medicare number that's unique to you."*

This announcement isn't just one for seniors to note, however. Health care fraud can happen to anyone. So, you should safeguard your health insurance card, regardless of whether you're insured under Medicare.

What seniors need to know about their new Medicare cards.

Now, there are some basic facts every Medicare beneficiary should know about their new cards.

These IDs:

- Are free. So, there is no cost to beneficiaries.
- Will be mailed out beginning in April.
- Will be mailed automatically. So, beneficiaries don't need to do anything to ensure they are issued a new card.
- Will be mailed to the beneficiary addresses on file with the Social Security Administration. So, beneficiaries who need to update that address should log into their SSA.gov accounts.
- Have no bearing on beneficiaries' coverage or benefits. So, coverage and benefits will not change in connection with the new IDs.

Once you receive your new card, the Medicare program advises that you take three important steps:

- 1) Destroy your old Medicare card right away.
- 2) Use your new card. Doctors, other health care providers and plans approved by Medicare know that Medicare is replacing the old cards. They are ready to accept your new card when you need care.

3) Beware of people contacting you about your new Medicare card and asking you for your Medicare number, personal information or to pay a fee for your new card. Treat your Medicare number like you treat your Social Security or credit card numbers. Remember, Medicare will never contact you uninvited to ask for your personal information.

Tip No. 3 touches on an important point: You still must safeguard your new Medicare number and card. That’s because receiving a new ID number or card is not enough in itself to prevent fraud. Medicare numbers will no longer give away Social Security numbers, which may help prevent fraud. But Medicare numbers will still be unique identifiers, which means they’re still useful to thieves.

What everyone should know about health care fraud

Medicare beneficiaries are not the only folks who should safeguard their health insurance information. The FBI advises everyone to do so, explaining: *“Make sure there is a legitimate reason to provide your insurance card or insurance information to others, and be especially vigilant if your information is requested when services are offered for free, or any offers are made during telemarketing calls.”*

According to the FBI, health care fraud costs the country tens of billions of dollars every year. And that’s not even counting any harm that fraudsters cause to the patients whose data they use to commit fraud. Besides safeguarding sensitive data, you can fight health care fraud by monitoring certain health care documents — just as you (hopefully) monitor financial statements for financial fraud. That way, if you are ever victimized, you will catch it and can report it sooner than later.

In health care fraud, one such document is known as an explanation of benefits, or EOB. The FBI explains: *“One of the most effective ways to determine if insurance information is being used without your knowledge is to review the explanation of benefits forms sent from your insurance company. These forms list the services and supplies supposedly provided to patients from medical providers. If any billings are suspect, immediately contact the insurance company.”*

You may also wish to request a copy of your file from medical consumer reporting companies like MIB <https://www.mib.com> and Milliman IntelliScript <http://www.rxhistories.com> . They track your medical data — just as credit reporting companies like Equifax, Experian and TransUnion track your credit data.

[Source: MoneyTalksNews / Karla Bowsher / January 31, 2018]

GOLD STAR LICENSE PLATES



Any Illinois resident who is a surviving widow/widower, parent or sibling(s) of a person who served in the U.S. Armed Forces and lost his/her life while serving during peacetime or war. The surviving widow/widower, parent, daughter, son or sibling(s) may be issued one set of plates. A [gold star affirmation](#) document verifying receipt of the Gold Star, including the service member's name and relationship to the applicant is required.

For more information go to [gold star license](#).

[Source: Lake County VAC]

BUMPER STICKER SEEN ON BASE: *“My Kid Fought In Iraq So Your Kid Can Party In College and Protest”*

NEW CREDIT CARD DATA THEFT METHOD



The new credit card chips make it harder for scammers to steal your payment information, so con artists have created a different technique called "shimming."

How the Scam Works

Remember skimming? That's the con where scammers inserted a device into ATMs or other terminals, harvesting your payment information as you swipe your credit or debit card. Scammers succeeded with this tactic for a while, but skimmers don't work for cards with newer chip technology. In addition, card skimmers are easy to notice because they are often bulky or wobbly. Con artists' new way to steal payment information is called "shimming." Scammers insert a shim -- a paper-thin, card-sized device with an embedded microchip and flash storage -- into the slot where you enter the chip side of your credit or debit card. When you insert your card at a gas pump, ATM, or another card reader, it copies and saves your payment information. Then, scammers return with a special card that collects the stolen information, such as your PIN and card number. They use this information to make purchases with your account information.

Protect Yourself from Shimming

- **Keep a close eye on your bank and credit accounts.** Check your online statements regularly to make sure there are no suspicious charges. If you see any, report them to your bank or credit card company immediately. Use the customer service number on the back of the card to be sure you are reaching the real company and not an imposter.
- **Be wary if your card gets stuck in a chip reader.** If the reader seems to have a tighter than normal grip on your card, there could be a shim inside. You may want to cancel your transaction and notify the business.
- **Use contactless payment methods.** Contactless payment methods are not vulnerable to shimming. Try using "tap-and-go" features on your credit card instead of swiping or inserting your card.

For More Information

Read more about credit card scams at BBB.org/ScamTips. If you've fallen victim to this type of scam, help others avoid being scammed by filing a report with BBB.org/ScamTracker. Learn more about specific kinds of scams and how to avoid them at BBB.org/ScamTips.

[Source: *BBB Scam alert* / May 4, 2018]



Benjamin Button at Age 60

SHINGLES

It might be time to get vaccinated against shingles if you're 50 or older. Folks in this age group — even people who are healthy — should get a new

shingles vaccine sold under the name **Shingrix**, according to the Centers for Disease Control and Prevention. The CDC's vaccine

recommendations include a shingles vaccine for adults age 50 and older. Previously, the CDC specified a different shingles vaccine, **Zostavax**, as the go-to prevention for shingles. However, that recommendation only applied to folks 60 and older. The CDC still recommends Zostavax as an effective treatment for shingles, but now says Shingrix is the better option for most people.

The new shingles vaccination recommendation was strongly supported, with the CDC’s Advisory Committee on Immunization Practices voting 14-1 to recommend Shingrix for the 50-and-older age group. That vote was made in October, but the details on which the committee based that decision were just recently released.

About shingles -- Shingles is a painful, blistering rash. The rash typically clears up within a few weeks, although it can lead to prolonged complications. According to the CDC, the most common complication is postherpetic neuralgia, a pain that can last for months or years after the rash is gone. Shingles, also known as herpes zoster, is caused by the varicella zoster virus (VZV), which also causes chickenpox. The CDC explains: “After a person recovers from

chickenpox, the virus stays dormant (inactive) in the body. Scientists aren’t sure why the virus can reactivate years later, causing shingles.” So, anyone who has recovered from chickenpox can get shingles, although the risk of developing shingles increases with age. In the U.S., close to 1 in 3 people will develop it at some point.

About the new vaccine -- “Shingrix” is the trade name for the new shingles vaccine, the recombinant zoster vaccine, or RZV. Part of the big deal about Shingrix — which is manufactured by the pharmaceutical company GlaxoSmithKline — is its effectiveness. The CDC’s Advisory Committee on Immunization Practices reports that clinical trials found the vaccine is more than 90 percent effective in preventing shingles in folks age 50 and older. Zostavax, by contrast, is anywhere from 38 percent to 70 percent effective, depending on age. AARP reports that insurance companies will be more likely to cover Shingrix in light of the CDC’s official recommendation. GlaxoSmithKline notes that broad coverage is expected to kick in starting in April. That should give you ample time to talk to your doctor about whether a shingles vaccine is best for you.

[Source: MoneyTalksNews / Karla Bowsher / February 22, 2018]

CHOLESTEROL

Can you answer?

1. Which is the good cholesterol: LDL or HDL?
2. Can you have too much cholesterol and feel just fine?
3. Which should you avoid: trans fat or saturated fat?
4. Should you eat more vegetables or more whole grains?



Sorry. No answers to the quiz on this page but you will find the answers in this article. And that’s the point – this is important enough to your health that you should look for – and know – the answers to these questions. They could save your life. On these pages, you will find out what you can do to prevent or control high cholesterol. And some very important facts, like this:

- Cholesterol is a fat-like material that provides structure for your body’s cells. Your liver makes most of the cholesterol your body needs, but you also get some from the foods you eat.

- Too much cholesterol can cause a sticky substance (plaque) to build up in your blood vessels. This plaque can block blood vessels and cause heart attacks and strokes.

I feel fine...

OK, here’s the answer to question number two: Most people with high cholesterol feel healthy and don’t have symptoms. The only way to know if you have high cholesterol is to have your cholesterol checked. When did you have your last physical? at that physical did you ask your provider what your cholesterol numbers were and did you write them down. That is something you should always do. Keep track with the log at the MyHealthVet website: <https://www.myhealth.va.gov/mhv-portal-web/vitals>. Your provider may prescribe medicine to help lower your cholesterol.

- Take your medicine every day, or as directed by your provider.
- If your cholesterol numbers get lower, it’s because your medicine is working. Don’t stop it or take a lower dose unless your provider says you should.

Here are some questions to ask your provider:

- Is my cholesterol under good control?
- When should I have my cholesterol next checked?
- What is a healthy weight for me?
- Is it safe for me to start doing regular physical activity?

Follow a healthy eating plan and be physically active:

- Read food labels and limit foods high in saturated fat, trans fat, and cholesterol.
- Eat plenty of fruits, vegetables, low-fat dairy foods, and whole grains.
- Ask to see a registered dietitian if you need help with a plan.
- “Physical activity” includes any activity that raises your heart rate, such as brisk walking, working in the house or yard, or playing sports.
- Do activity for 10 minutes or more at a time. Aim for at least 2 hours and 30 minutes of activity each week.
- If you are overweight, ask your provider for help with an eating and physical activity plan to lose weight

For more information, contact your local VA Medical Center or Health Clinic. You can also check out what VA has to say at:

https://www.prevention.va.gov/Preventing_Diseases/High_Cholesterol.asp.

[Source: VAntage Point | February 15, 2018]

JIM LOPEZ RETIREMENT



Jim Lopez, the Veterans’ Service Officer for our local area will be retiring on July 31, 2018. Jim has been of immeasurable assistance to the SRAO and many of our Bald Eagle subscribers. We thank him for his invaluable service and we all wish

him well in his retirement and hope that he stays in contact with us. Good Luck Jim – stay well and stay safe.

**NAVAJO CODE TALKER
OBIT: GEORGE B. WILLIE SR.**

They went to war, they did extraordinary things. They saved the world then they came home and lived ordinary lives. They became husbands and fathers and grandfathers. The members of this great generation, the World War II generation, are leaving us quickly now. The Navajo Nation announced that George B. Willie Sr, of Leupp, died on December 15, 2017. He was 92. We don't know much about Willie. But we know enough.

- We know that like many of his generation he had to grow up quickly.
- We know he enlisted in the Marines when he was just 17 years old, serving with the Second Marine Division, 10th Battalion, from 1943 until 1946.
- We know that he served as a Navajo Code Talker, part of a secret project that allowed American troops to freely communicate on their battlefield radios with no fear that Japanese cryptographers could break the code.
- We know that he served in the Battle of Okinawa, relaying strategic information in a code derived from his native language while all around one of the bloodiest battles in the Pacific raged.
- We know that he saved lives then came home under orders not to talk of it. The Code Talkers were a national secret until 1968.

But then, many of the men of that generation never talked much about what they did, what they endured. We knew them as fathers and brothers, not really understanding until we were much older that they were also soldiers. That we had heroes living among us. George B. Willie Sr. married Emma and went on to have 10 children and several grandchildren, according to the Navajo Nation.

Whenever I hear of the death of another World War II veteran, I think of them all, the men -- and yes, women -- who fought to save our way of life. This week, we commemorate the 76th anniversary of the bombing of Pearl Harbor and I wonder how much longer any of those who lived it will still be with us. Their numbers are dwindling quickly now which makes it all the more important that we, their children and grandchildren, make sure their stories never die.



[Source: *The Republic* | Laurie Roberts | December 5, 2017]

VA NATIONAL TRANSPLANT PROGRAM

Solid organ (kidney, liver, heart, lung, kidney/pancreas, heart/lung,) and bone marrow/stem cell are important, life-saving procedures. The Veterans Health Administration has offered solid organ transplant services since 1962 and bone marrow transplant services since 1982. VA Transplant Centers are located across the country. For a list of the 12 VA medical facilities which provide transplant services and the type of transplant they service go to <https://www.va.gov/health/services/transplant>. For more information regarding the VA National Transplant Program, contact your VA specialist, primary care provider, or nearest VA medical facility. For a list of VA medical facilities view the VA directory at:

SBP / DIC OFFSET STATUS AS OF MAR 2018

There are 2 types of SBP/DIC beneficiaries. First are widows and widowers of service members who served a full career in the military and paid into SBP as a retirement. The second groups' sponsors died while on active duty and qualify for SBP by statute. As we continue to push to get the

SBP/DIC offset abolished and we often get small improvements rather than a total abolition; the program gets more difficult to understand. But here goes. Following is where the program currently stands:

1.) Retirees -- If the retiree dies of a full or partial service connected disability or had been 100% service connected disabled for 10 or more years, regardless of what caused his death, the survivor would indeed be entitled to DIC. There is a dollar per dollar offset of SBP payments for DIC payments. Many people have asked if it would really be worthwhile to file for DIC if their service member spouse dies and they are already receiving or going to receive SBP. The answer now is almost always yes. This is because we have been working for years to end the SBP/DIC offset; just as we have worked to end the military retired pay/VA disability pay offset. We have not yet had the same degree of success but we have made some progress.

month and through additional increases and modifications has reached \$310 a month. Last year the SSIA was made permanent and a COLA was added.

2.) Died on Active Duty -- In this case, the survivor is entitled to the present SSIA payment of \$310 a month + COLA which is nontaxable. (No return of premiums since they did not make any). In addition - if there are minor children in the family, they too will qualify for DIC. Presently a surviving spouse with children under the age of 18 will also receive \$317.87 a month per child + a 2 year transition for the parent of \$250 a month The benefit for the child runs out when he/she turns 23. If a child is permanently disabled they may continue to be eligible into adulthood. Call our DC office at (703)-684-1981 to go over these detailed requirements.

The DIC payment became a flat payment regardless of rank in 1993. It is presently a tax free monthly payment of \$1,283.11. Every year it receives a COLA adjustment. If the SBP is 55% of the retired pay the offset will probably completely offset the SBP. Only the very highest ranks in the officers or enlisted ranks would receive more. However, there is the advantage of it being tax free while SBP is taxable. Then if the DIC completely wipes out the SBP payment a beneficiary would be qualified to have all the monthly SBP payments returned to him or her. That could be a large lump sum. (It would be taxable.) Additionally, to partially correct the offset, Congress passed a SSIA (Special Survivor Indemnity Allowance) payment bill. It started in 2008 at only \$50 a

We are still working to end the SBP/DIC offset completely. In the House H.R. 846 has 237 co-sponsors while the Senate's S. 339 has 38 co-sponsors. So you can see there is wide bipartisan support. But it is very unlikely that we will get the bills passed this year. If not, we will have to start again next year. We are not giving up on this issue. Finally, there are also 2 special programs A&A (Aid and Attendance) which presently pays an additional \$317.87 a month and Homebound which pays an additional \$148.91 a month which a parent might be eligible for if he/she is suffering from certain disabilities.

To sum this up; even if you are eligible for SBP if your servicemember's death was in the line of duty OR service connected you may qualify for DIC. It's definitely worth filing for. Anyone who would like to discuss the matter further or has questions can contact the Executive Director of

the Legislative Affairs Office (LAO), Deirdre Parke Holleman at 1-800-554-8732 or dholleman@treadc.org.

[Source: TREA Washington Update / 28 March 20118]



TRICARE PUBLICATIONS FEEDBACK

TRICARE wants your feedback! Got comments or suggestions about a TRICARE newsletter, fact sheet or handbook you read recently? Take a brief survey about our TRICARE publications at www.TRICARE.mil/publications. Our TRICARE publications are your resources for questions about your TRICARE medical, dental and pharmacy benefits. A new search feature now on the TRICARE Publications page allows you to quickly find the information you need to make informed decisions about your health care. If you have ideas for new resources or topics covered in future publications, share your feedback here This is your benefit, and we want to hear from you. Learn more about the recent TRICARE changes and how to take command of your health, by visiting www.tricare.mil/changes. Also, we'll continue to add new TRICARE publications to reflect these changes to the website, so visit the TRICARE Publications page often.

[Source – TRICARE Podcast 434, Baguio RAO Bulletin, 1 Feb 2018]

TRICARE PHARMACY PILOT PROGRAM



Take a daily drug for diabetes or high cholesterol? Your medication now could cost less or be free thanks to a new TRICARE pilot program. The Medication Adherence Pilot Program, ordered by Congress in 2016, started 1 FEB and will run until 2023. Under the program, **Lantus Pens**, a brand-name insulin shot used to manage diabetes, will be available for reduced cost. **Rosuvastatin**, the generic version of the cholesterol management drug Crestor, will be free. About 136,000 beneficiaries will be included in the pilot, officials said. About 16,000 orders for Lantus Pens are placed monthly through TRICARE at retail and mail order pharmacies, while about 40,000 orders of Rosuvastatin are filled, they said.

been free. Starting Feb. 1, they carry a \$7 fee for a 90-day supply. That means Rosuvastatin is now the only medication available by mail or at a retail pharmacy that carries no out-of-pocket cost. Drugs received at a military treatment facility continue to be free.

Before the pilot program, Lantus Pens cost \$28 for a 30-day supply at an in-network retail pharmacy, and \$24 for a 90-day supply through mail-order. Under the program, the drug will cost \$11 for a 30-day supply at a retail pharmacy and \$7 for the 90-day supply received by mail. Rosuvastatin, which had cost \$11 for a 30-day supply at an in-network retail pharmacy or \$7 for a 90-day supply by mail order, will instead be free from both sources. The pilot program is designed to test whether patients experiencing Diabetes and Cholesterol problems are more likely to follow their medication treatment plans when the required drugs are reduced in price or free, officials said.

[Source: MOAA / Amy Bushatz / February 17, 2018]



DIRECTOR'S COMMENTS



In the past, this portion of the Bald Eagles' Newsletter was reserved for the wisdom of our friend SMS Frank Krus Jr., USAF (Ret). Frank used to refer to this section as his "RANT" but it was anything but a RANT. I'm sad to say that the wisdom furnished by Frank in the past cannot be duplicated since Frank is no longer physically with us. Frank passed away after a lengthy illness on March 29, 2018, leaving behind his wife of almost 50 years, Kathy Kilian, and their children Jennifer (Jason) Rosegay and Neil (Brenda) Krus, and loving granddaughter Madalyn.

To say that he is, and will be, sorely missed is the most understated comment we could make. To us, Frank was the Arlington Heights, Illinois Satellite Retiree Assistance Office [SRAO] and we all miss him very much.

Frank had a distinguished military career serving in both the US Army and the US Air Force. He enlisted in the US Army upon graduation from Tuley High School in Chicago and served in the Army for 19 years and earned the rank of Master Sergeant as part of the 12th Special Forces Group [Airborne]. He then served with the Illinois Air National Guard [ILANG] 217th Engineering Installation Squadron at O'Hare where he earned the rank of Senior Master Sergeant. During his military career he traveled throughout the U.S. and around the world participating in parachute drops and receiving parachutist badges from Canada, the Republic of China [Taiwan], and Israel. Frank also traveled several times with WWII veterans of the First Special Service Force [the "Devil's Brigade"] to Montana, Washington D.C., Canada, and Italy and with the United States Forces Austria Veterans Association to Austria.

Frank retired from the Illinois Air National Guard in 1995, but nevertheless continued to serve as a volunteer in the Retiree Office and later as the Director of this SRAO for over 15 years. In addition to his volunteer service here, Frank was a member of Special Forces Association Chapter 37, ILANG Silver Circle, First Special Services Force Association, The Retired Enlisted Association [TREA], and American Legion Post 36. That's what we mean by the phrase "*Still Serving*".

As a final note: If you have the time we always welcome volunteers. See our contact information on the cover page.

Maj Don Starzk, USAF (Ret)
Cpt Ross Rizzo, USAF (Ret)
Co-Directors



RETIRES HELPING RETIRES