



GENESEE VALLEY CHAPTER MILITARY OFFICERS ASSOCIATION OF AMERICA NEWSLETTER

2010 - 2011 - 2012 - 2013 - 2014 - 2015 - 2016 - 2017 - 2018

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SERVING MEMBERS AND THEIR COUNTRY

*** NEVER STOP SERVING ***

August 2019



PRESIDENT'S CORNER Greetings Genesee Valley Chapter Members! I am Tim Vaughan, your newly installed chapter President and look forward to working with the officers, board of directors and members to continue the traditions of excellence this chapter has worked hard to attain. Many thanks are in order for our immediate past President, Peter Ingalsbe, for his dedication and determination to make this chapter a resounding success. But this chaptergs success and excellence doesnot happen alone, the officers and board of directors also play a big part in that success and deserve many thanks as well. They continually work behind the scenes to ensure this chapter runs smoothly and efficiently. In that vein, I too will strive to maintain this chapter success story and will rely on the assistance of the officers and board of directors to sustain the Genesee Valley Chapterøs track record of excellence.

James Nielsen, CDR, USN (Ret) 1st VP

Valley Chapter officers include:

In addition to myself, your 2019-2021 Genesee

Ken Carlsen, CDR, USN (Ret) 2nd VP Willard Brown, COL, USA (Ret) 3rd VP Nancy Swanson, CAPT, USN (Ret) Secretary Norma Weissend, Lt Col, USAF (Ret) Treasurer Larry Feasel, COL, USA (Ret) Member-at-Large

Marion Mench, Spouse Liaison

Thank you for desire and willingness to serve this Chapter.

MOAA 2018 Levels of Excellence Award.

Outstanding news! The Genesee Valley Chapter has yet again been awarded the five-star Levels of Excellence Award from MOAA National. Only the very, very best councils or chapters receive a five-star award. This is the ninth year in a row, and we were one of five chapters in New York State to earn the five-star award. The New York State Council of Chapters also earned a five-star award. This doesnot happen in a vacuum; it takes hard work, dedication and is a team effortí so letos keep up the great work and try to make it ten years in a row! Read that again, NINE YEARS of Five-Star Levels of Excellenceí IN A ROW!!! That is AWESOME!

NYS Council of Chapters. The 47th Annual MOAA Convention is September 23-26, 2019 at the Ramada by Wyndham Fishkill in Fishkill, NY. Registration is rapidly closing, but if you are interested in attending, contact Norma

Weissend directly to see if there is still timeí her contact information is located under the Board of Directors.

Honor Flight Challenge. Each year your GVC chapter sponsors one participant for Honor Flight Rochester. Rosemary Luzum has initiated an Honor Flight Rochester Challenge to GVC members by donating \$100 in hopes we can increase our support of Honor Flight Rochester. You can accept this challenge by sending your \$100 check, made out to Honor Flight Rochester, to Norma Weissend, GVC Treasurer, 4587 Ridge Rd, Canandaigua, NY 14424. Yeah, I know, that s more change than you'dl find between the cushions in your couch, but if you could see the excitement and difference Honor Flight missions make to these veterans, it is hard not to accept Rosemary is challenge. I haveí will you?

Board of Directors Vacancy. After many years of outstanding service as our Legislative Chair, Russ Green has decided to step down from this position, so we are looking for someone who is interested in serving your chapter in this capacity. If you think you might be a good fit, please contact me or any board member.

MOAA Legislative Issues.

Take part in MOAA's 2019 Summer Storm, visit www.MOAA.org/SummerStorm for resources to engage local officials or send a message to Congress on two of MOAAøs Legislative Issues, Ending the Widows Tax and Protecting Military Medicine. Two MOAA Issue Papers are included at the end of our newsletter.

TRICARE Rates Increasing in 2020. Tricare just released the 2020 rates for the Tricare Reserve Select (TRS) and Tricare Retired Reserve (TRR) programs, as well as for the Tricare Young Adult and Continued Health Care Benefit Programs. Like almost everything else, the prices will mainly be increasing. Go to www.moaa.org and enter oTRICARE Rates Increasingö in the Search box.

VA News. When Veterans Should Use Urgent Care Centers vs. Emergency Departments

As part of implementing the VA MISSION Act of 2018, VA started offering urgent care services to provide Veterans with greater choice and access to timely, high-quality care. To find an urgent care center, visit VA Urgent Care Locator.

When should a Veteran go to an urgent care center?

For acute symptoms such as, sinus infections, sore throats, rashes, low back pain, or urinary tract infections to treat those minor illnesses or injuries. Some other examples of non-emergent care include:

- Bee stings
- Earaches
- Eye infections/irritations
- Minor burns
- Minor cuts and lacerations
- Sports-related injuries
- Sprains

When should a Veteran go to an emergency department?

An emergency condition is one that can permanently endanger a Veteran¢ life. Some examples of conditions that need emergency medical care can include:

- Heart attack symptoms (severe chest pain)
- Stroke symptoms
- Moderate to severe difficulty breathing
- Uncontrollable bleeding
- Sudden, severe pain
- Poisoning
- Head trauma
- Vomiting blood or coughing up blood
- Loss of consciousness

If you are experiencing a life-threatening injury, dial 911 immediately. Emergency department visits are necessary for true emergencies. If greater care is required, VA health care physicians will transfer Veterans directly to a hospital emergency room for further treatment.

Spouses Club. The Spouses Club of GVC MOAA will be meeting for lunch at the Monroe Golf Club on Wednesday September 18, 2019. Please contact Signe Zale at the email or phone number listed below for details and to RSVP. If you canot make it in September, the Spouses Club of GVC MOAA normally meets on the third Wednesday of each month at various locations. Again, contact Signe Zale for future meeting dates and locations.

Your Chapter Dues at Work - We Support...

- Honor Flight Rochester
- U of R, RIT and Brockport ROTC Cadets
- Veterans Memorial Committee
- Rochester Armed Forces Day Luncheon
- National Veterans Golden Age Games
- Battlefields to Ballfields
- Batavia DAV

Address Change? Have you moved? Have you changed your email address? If so, please contact Ken Carlsen or Nancy Swanson at the email address below or write us at:

GVC/MOAA

PO Box 20874

Rochester, NY 14602-0874

Tim Vaughan, Col, USAF (Retired) MOAA GVC President "Never Stop Serving"

Upcoming Events.

Sep 15, 2019: GVC/MOAA Dinner, Canandaigua Yacht Club, 3pm/4pm

Sep 23-26, 2019: NYS Council of Chapters Annual Conference, Ramada Hotel, Fishkill, NY

Oct 27, 2019: GVC/MOAA Dinner, Farmerøs Creekside Tavern & Inn, Le Roy, NY, 1pm/2pm

Dec 8, 2019: GVC/MOAA Holiday Dinner, Brook Lea Country Club, Rochester, NY, 1pm/2pm

Dec 14, 2019: Wreaths Across America, Sampson Veterans Memorial Cemetery, Romulus, NY, 10:30am/12pm

GVC/MOAA BOARD MEMBERS 2019-2021

President: Tim Vaughan, Col, USAF (Ret)

(585) 412-6425

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1st VP: James Nielsen, CDR, USN (Ret)

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(585) 905-0346

Email: gns92649@hotmail.com

Treasurer: Norma Weissend, Lt Col, USAF

(Ret) (585) 727-6190

Email: normaweis@roadrunner.com

Past President: Peter Ingalsbe, COL, USA

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Past President: Norma Weissend, Lt Col,

USAF (Ret) (585) 727-6190 (Cell) Email: normaweis@roadrunner.com

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Email: mszczygiel1@rochester.rr.com

Past President: Barbara Green, COL, USA

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Email: bgreenanc@gmail.com

Transition Liaison: Dave Szczygiel, BG, USA

(Ret) (585) 346-3736

Email: mszczygiel1@rochester.rr.com **Spouse Liaison**: Marion Mench

(585) 217-1779

Email: mosimpli@rochester.rr.com **Spouses Club Liaisons**: Co-Chairs Joan Tierney: jtierney41@yahoo.com Signe Zale: sigbobzale@aol.com

2019 GVC Member Dues. Annual dues are *ONLY* **\$20!** Send your dues payment to Norma Weissend, 4587 Ridge Rd, Canandaigua, NY 14424. Check out <u>GVCMOAA.ORG</u> for special Life Member rates.

GENESEE VALLEY CHAPTER MILITARY OFFICERS ASSOCIATION OF AMERICA

September 15, 2019

Canandaigua Yacht Club 3524 County Road 16 (West Lake Road)

1500 - Social Hour (Cash Bar) 1600 - Dinner

ENTRÉE CHOICES

12 oz Blackened Delmonico Steak Served with Yukon Gold Mashed Potatoes and Green Beans

Chicken French Served with Wild Rice and Green Beans

Crab and Scallop Stuffed Sole topped with Hollandaise Served with Wild Rice and Green Beans

Salad, Rolls and Dessert Included... Apple Awesome a la mode

HONOR FLIGHT ROCHESTER GUEST SPEAKER!

Join Rosemary Luzum's Challenge & Bring Your Checkbook!

Reservations due ASAP but NLT Friday September 6, 2019

Cancellations NLT 1200 hours, Wednesday, September 11, 2019

Questions: Peter (585) 749-3390

PLEASE CLIP HERE AND SEND FORM BELOW

RESERVATION FORM FOR September 15, 2019 GVC MEETING at Canandaigua Yacht Club

Canandaigua Yacht Club
LL Name(s) Attending:
Please indicate number of each meal desired:
Blackened Delmonico Steak Chicken French Stuffed Sole
dackeried Delitionico Steak Chickeri French Stuffed Sole
Check for meal(s) at \$30.00 each, TOTAL \$
Nacca make sheeks nowable to GVC MOAA and mail to
Please make checks payable to GVC MOAA and mail to:
c/o Peter Ingalsbe
.51 Galvin Ct

151 Galvin Ct Farmington, NY 14425



Let's Put an End to the Widows Tax

Objective: End financial penalties for military survivors.

Under current law, survivors of deceased military members must forfeit part or all of their purchased Survivor Benefit Plan (SBP) annuity when awarded the VA's Dependency and Indemnity Compensation (DIC). The loss of any portion of the SBP annuity is known as the #WidowsTax. For more than **65,000 military survivors**, the widows tax makes SBP the only insurance-type product in the country you pay into but are legally prohibited from collecting.

Issue: Congress needs to keep widows tax repeal language in the annual defense bill.

The House included a provision to repeal the widows tax in its version of the FY 2020 National Defense Authorization Bill. The measure must now make it through conference committee before both chambers approve the final bill and send it to the president for signature.

Background: An age-old law is an injustice to military survivors.

SBP:A voluntary, member-purchased annuity provided by DoD allows for the continuation of a portion of military retired pay upon the death of the servicemember. According to DoD, the intended purpose of SBP is to "ensure that the surviving dependents of military personnel who die in retirement or after becoming eligible for retirement will continue to have a reasonable level of income." Congress later expanded coverage to personnel who die on active duty as well.

DIC: A VA-paid monetary benefit for eligible survivors whose sponsors died of a service-connected injury or disease.

These separate benefits are paid for separate reasons and should not be construed as "double dipping."



Congress: Support House language regarding elimination of the widows tax.

- Defense bill conferees:
 Support House provision Sec.
 630
- Non-conferees: Urge members of the conference committee to support Sec.
 630 and help more than
 65,000 military survivors receive their earned benefits

MOAA Contact Jamie Naughton Associate Director, Survivor Issues JamieN@moaa.org (703) 838-5807







Lt. Gen. Dana Atkins USAF (Ret) President and CEO

Don't Dismantle Military Medicine

Objective: To sustain military readiness.

At the heart of a lethal and ready military force lies a well-trained, fully capable cadre of medical professionals, the result of comprehensive training across a wide array of medical disciplines and specialties.

Issue: DoD's proposal to reduce medical capabilities.

DoD submitted a fiscal year (FY) 2020 budget calling for reducing military medical forces by nearly 18,000 billets, a force reduction of roughly 20%. It appears DoD has not analyzed the longer-term impact this will have on the medical training institutions that provide the very medical professionals who underwrite military readiness.

A 20%
force reduction
constitutes a
qualitative change to the
military health system that
could cause unintended
consequences impacting
all types of medical
care across
America.

Background: DoD has broad authorities to reform the Military Health System significantly.

DoD, the Defense Health Agency (DHA), and the three services are implementing vast Military Health System (MHS) reforms, per the 2017 and 2019 NDAAs. Reforms include transferring administration and management of military treatment facilities (MTFs) to the director of the DHA. According to DoD, the secretary will transfer authority through a "streamlined organizational model that standardizes the delivery of care across the MHS, with less overhead, more timely policy-making, and a transparent process for oversight and measurement of performance." As part of this restructuring, DoD plans to repurpose a significant number of uniformed medical positions for other efforts needed to support the National Defense Strategy.

CONSIDER THE CONSEQUENCES

Combat casualty care capabilities:

- Warfighters who lose confidence in combat care will hesitate in battle, degrading lethality.
- Future readiness will be jeopardized by any interruption of the Graduate Medical Education (GME) pipeline. It takes over a decade to restore a fully trained and capable medical force after interruptions in education.

Recruitment and Retention:

- Cuts to obstetrics and gynecology will negatively affect recruitment and retention of women in service, and it will impact the transition of care to the VA.
- Loss of pediatric care will affect retention.
- Cutting residency and fellowships in GME sends a negative signal to the currently competitive pool of medical and nursing applicants considering a military medical career, sub-optimizing recruiting.

Retiree health care:

• TRICARE Prime retirees already are being pushed into civilian networks from MTFs, in some cases without assessing capacity or willingness for local health care providers to accept new patients.

Already taxed civilian sector health care:

- The civilian sector cannot absorb additional medical school graduates to train. Last year, more than 1,100 civilian medical student graduates were unable to find residency opportunities because of capacity issues.
- Civilian networks are lacking in rural areas where many installations are located.
- Civilian doctors who have not served likely will not fully understand the spectrum of medical needs facing the military community; this is especially concerning for mental health providers (who also face a shortage).

ACTION NEEDED

Congress: Support the
FY 2020 NDAA by ensuring
the House language
regarding DoD medical
billet reductions remains in
this bill to:

- Halt any realignment of medical positions pending a Congressional review
- Develop metrics for longterm effects on military readiness, combat casualty care capabilities, family member readiness, graduate medical education, and beneficiary care

DoD's plan is to cut military doctors and nurses, and rely heavily on community care providers...but their availability cannot be assured.

MOAA Contact Capt. Kathryn Beasley, USN (Ret) Director, Health Affairs KathyB@moaa.org (703) 838-8164





6 QUESTIONS EVERYONE SHOULD BE ASKING

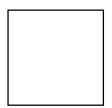
- Can military medical departments absorb these reductions and still support the following: operational plans, medical requirements, combat operations, and humanitarian aid and disaster relief missions? Can they do more than one of these simultaneously if required?
- What are the stateside-to-overseas dwell ratios for deployments? Are they acceptable and at predictable levels, or will these reductions result in more frequent deployments and less time at home with families?
- How will the reductions affect recruitment and retention of military medical professionals, including the reserve component?

- What will be the effect on Graduate Medical Education programs (the physician pipeline)?
- Will these reductions compromise the military health benefit to a point where there is no longer a benefit to joining or staying in the military?
- What will be the effect on civilian medical communities associated with these reductions and the follow-on diminished or eliminated access at military treatment facilities?

BOTTOM LINE FOR THE MISSION, TROOPS, AND FAMILIES

- Hasty reductions will compromise health care,
 frustrate patients, and ultimately be expensive.
 - ------O Hasty reductions put combat, medical, and family readiness at risk as each of these elements are essential to maintain effective combat support capability.
 -o If combat and medical readiness are affected, U.S. and NATO/coalition forces will likely face significant decreases in combat survivability.
 - Recruitment becomes more difficult retention becomes even more difficult – leaving those in uniform waiting for relief.

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First Class Mail





