



JEFFERSON BARRACKS SATELLITE RETIREE ACTIVITIES OFFICE NEWSWIRE February 2010

The staff of the Jefferson Barracks Satellite Retiree Activities Office publishes this NEWSWIRE. This publication is designed to directly inform all military retirees, spouses, widows, widowers and their families of changes to their benefits, the status of current legislation impacting their retirement, health related information and of activities at Scott AFB and Jefferson Barracks AFS.

SCHEDULE OF EVENTS FOR FEBRUARY

11 February Thursday—1300 Hours, Scott RAO monthly council meeting: Located at 215 Heritage Drive, Building P-10, Room A-209. The meeting includes reports from committee chairmen and other directors generally related to Scott AFB activities and services. Updated reports from the Lambert/ St. Louis RAO and the Jefferson Barracks Satellite Retiree Activities Office (JBSRAO) are part of the meeting agenda.

18 February --- Monthly luncheon 1100 Hrs. **O'Charley's 4130 Rusty Rd. St Louis, MO 63128** (314) 845-8200. The restaurant is located just north of South County Costco Store, Lindbergh Blvd and Rusty Rd.

White House Weighs In on Reform Impact on TRICARE, VA Health Care

Source: NAUS Weekly Update

An entry posted on the official White House Blog this week seeks to suppress mounting concerns with the possible impact health reform may have with TRICARE and VA healthcare programs. Written by Matt Flavin, White House Director of Veterans and Wounded Warrior Policy, the article briefly outlines the President's position regarding service members, veterans and their families and notes one of his top priorities since coming into office has been to give our veterans "the care they were promised and the benefits that they have earned." According to the information, "There is absolutely nothing in health reform that will affect TRICARE benefits."

Whereas assurances like these are welcome, NAUS notes past ones offered by President Obama, VA Secretary Eric Shinseki and congressional leaders failed to alleviate anxiety among members of the military and veterans' community, primarily because the exception is not clearly spelled out in health reform legislation. But that's not for a lack of trying.

In mid-December, the National Military & Veterans Alliance, of which NAUS is a member, sent a letter ([letter](#)) to the leaders of the Senate Armed Services calling for explicit language in the Senate bill, [H.R. 3590](#), to protect veterans' health care, TRICARE and TRICARE for Life. Identical letters were sent to the Chairmen and Ranking Members of the Committees on Veterans' Affairs and Finance, as well as the Majority and Minority leaders. **NAUS Note:** The House version, H.R. 3962, does contain a provision protecting these important earned benefits.

The response to the NMVA letter was immediate, but not the reaction we expected. Senate staff members rebuffed the idea of including clear language, citing provisions in the Senate bill referring to IRS regulations they believe exempt military and veterans from the onerous fees and other penalties that could result from the health reform effort. Sound confusing? We think so and that's our point. If the Administration and Congress sincerely want to convince the military and veterans community that military and veterans healthcare benefits are protected, there should be no reason why explicit language exempting these two groups of beneficiaries cannot be inserted into the final bill. And unless they do that, TRICARE beneficiaries and veterans will likely remain concerned, rightfully so, that their hard-earned healthcare benefits could be adversely affected by health reform efforts.

Medicare Part B Inequity Strikes

Source: Military Officers Association of America Update

The Senate failed to act in time on legislation to prevent all Medicare beneficiaries from seeing a Part B premium increases this year.

As a result nearly 25% of Medicare beneficiaries are now subject to increased Part B premiums (and a net reduction in their Social Security checks) this month.

In years like 2010 when there's no Social Security COLA, current law protects most Medicare beneficiaries from premium increases. This "hold harmless" provision covers nearly 75% of Medicare beneficiaries who will maintain their 2009 Part B premiums of \$96.40 per month.

The other 25% of Medicare-eligibles will see a significant increase in their premiums. Those affected by the Part B premium increase include: new eligibles that will turn 65 in 2010 Medicare beneficiaries who don't yet receive Social Security benefits and pay Part B premiums directly to Medicare some Medicare-eligibles who also qualify for Medicaid beneficiaries with 2008 adjusted gross incomes greater than \$85,000 (\$170,000 for married couples) even though overall inflation was negative for FY2009, medical costs actually rose, and that's what drives Part B premiums, which are supposed to reflect 25% of Medicare's cost of delivering care. But when the premium for 75% of beneficiaries is frozen, the cost increase must be borne entirely by the remaining 25% (about 11 million beneficiaries).

So the basic Part B premium for beneficiaries not protected by the "hold harmless" provision will be \$110.50 a month in 2010 - a \$14.10 increase. Premiums for higher-income people with a modified adjusted gross income of more than \$85,000 (for those filing an individual return) or \$170,000 (married couples filing jointly) will rise even more -- to \$154.70 - \$353.60 a month, depending on the size of their incomes.

MOAA believes all Medicare-eligibles should have their premiums frozen in years with no Social Security COLA, and the House already passed legislation (H.R. 3631) to do that. But the Senate has to pass it to make it happen.

Please send your Senators a [MOAA-suggested message](#) urging them to pass this important legislation immediately

Medicare Annual Deductible Reminder

Source: Military Officers Association of America Update

Medicare-eligible beneficiaries' first medical service of the calendar year must be both a Medicare- and TRICARE-covered benefit in order for TRICARE For Life (TFL) to pay the annual Medicare deductible of \$135 for 2009.

This can be confusing because TRICARE's deductible is applied at the beginning of the fiscal year while Medicare's deductible is based on the calendar year. For example, if you receive chiropractic care as the first

service of the calendar year, you would be responsible for the \$135 Medicare deductible. Chiropractic care can be a Medicare-covered benefit but is not a TFL-covered benefit. Medicare-aged patients typically do not pay a TRICARE deductible. To avoid the Medicare deductible, be sure your first health care service of the calendar year is covered by both TFL and Medicare.

TRICARE University Provides Online Benefit Education

Source: TRICARE News Release (forwarded to us by Scott RAO)

If you're new to the military and eager to learn about your health care benefits or an old hand who wants to know the latest changes, TRICARE University is the place to go. TRICARE University offers free online courses 24 hours a day, seven days a week, 365 days a year at <http://www.tricare.mil/tricareu>.

"The courses can be taken anytime and you can learn at your own pace," said Rear Adm. Christine Hunter, deputy director of the TRICARE Management Activity. "It's the simplest way to learn about your TRICARE benefit."

Three different online courses are available. Of these, the TRICARE Public Course provides the quickest and easiest way to get a general overview and basic knowledge of TRICARE programs. There is no registration for this course and it's accessible to anyone who wants to know more about TRICARE.

The TRICARE Fundamentals Course is much more in-depth as it is primarily designed for TRICARE benefit counselors and family support staff who provide counseling and assistance to TRICARE beneficiaries. Topics covered include TRICARE eligibility, TRICARE programs and plans and on-line resources. Registration is needed to take the course and "graduates" who pass the test at the end of the course receive a certificate from TRICARE.

Members of the Selected Reserve who want to know more about TRICARE Reserve Select (TRS) can hone their understanding through a TRICARE University course devoted to this premium-based health care plan. Newly activated Guard and Reserve members might also find the TRICARE public course helpful as it provides a convenient way to learn about their health care benefits while on active duty.

To take one of the offered courses, go to <http://www.tricare.mil/tricareu> and click "online training" for a list of options. The TRICARE Public Course is also available through a separate tab on the TRICAREU page .

Three Vaccines Available at TRICARE Network Pharmacies

TRICARE beneficiaries can now receive the following vaccines with NO out-of-pocket copay at your local retail network pharmacy:

- H1N1 flu vaccine
- Seasonal flu vaccine
- Pneumococcal vaccine

To receive the vaccines call your local TRICARE retail network pharmacy to ensure it: participates in the vaccine program, has the vaccine in stock, and has a certified pharmacist on duty to administer the vaccine. [Locate a participating retail network pharmacy](#) or call 877-363-1303

ALARM RED: Defending an Independent Air Force

Source: Maj Steven A. Fino, USAF, The Wright Stuff-Air University

ALARM RED! The Air Force is under attack. By civilians. By politicians. By its sister services. By some of its own Airmen. Why? Many argue the principles that justified an independent Air Force in 1947 suddenly lost credibility following 9/11.

The argument has two rationales. First, the Air Force's *raison d'être*, strategic bombing, does not work. Individuals point to World War II, Korea, Vietnam, and the Gulf War. In each instance, airpower failed to achieve an independent victory. Douhet and Mitchell were wrong. Strategic bombing cannot sufficiently target the will of the people and their means to wage war; it cannot force quick capitulation. Ergo, an independent service based on the promise of strategic bombing, while a valid experiment, has outlived its trial period.

The second rationale touts the effects of "transnationalism" dramatically thrust into the public consciousness on 9/11. Characterized by the rise of the non-state actor—for example, the terrorist cell—the emergence of transnationalism relegates previous forms of state-exercised influence to the history books as inefficient and inappropriate. For example, in a struggle against radicalism—a struggle for people's "hearts and minds"—there are no targets for the Air Force to bomb.

Both arguments belie reality. First, while few in the Air Force would profess a continued belief in airpower's capability to win wars independently through strategic bombing, to deny strategic bombing's significant influence on the wars of the past is to conveniently forget the lessons of history. When properly trained and equipped, an air force can strike deep at the enemy. Airpower puts enemy sanctuaries at risk. It provides national leaders with options to effect political objectives and deters adversaries not privy to our strategic decision calculus. Without a strong, independent Air Force, those options and the corresponding deterrent threat are not available.

Second, proclaiming a new era is easy, but substantiating the claim is difficult. Those that argue the significance of the non-state actor have not adequately substantiated their claim. Even following 9/11, the primacy of the state actor in international politics continued: the US versus Iraq in 2003; Israel versus Lebanon in 2006; Russia versus Georgia in 2008. In each instance, state actors fought to maintain power and prestige. This does not imply that non-state actors do not exert influence on nations. However, to characterize all international struggles after 9/11 to be a counter-insurgent-style battle for "hearts and minds" is a fallacy not grounded in international political reality.

Contrary to critics' claims, the Air Force is ideally suited to contribute at both ends of the conflict spectrum. The Air Force leverages air and space power to provide independent, flexible, and scalable options to the nation's leaders. While the Air Force's stewardship of a large portion of the nation's nuclear arsenal stands at one end of the spectrum, the options that the Air Force provides are not exclusive to force or the threat thereof. The Berlin Airlift is but one historic example of airpower's unique ability to successfully morph to achieve varying political objectives.

In today's parlance of jointness, to proclaim that a service can independently contribute to national defense is heresy. Indeed, if the Air Force solely provided close air support and overhead intelligence support to its joint brethren, there would be no need for independence. However, the Air Force offers that and more. It joins the unique tactical, operational, and strategic capabilities of air and space power into a collective resource which, governed by an Airman's wisdom and leadership, provides the varying effects the nation desires and its military requires. In doing so, the Air Force ultimately offers political leaders that which they truly desire—options to pursue political objectives.

Ideally, the Air Force would point to its mission statement to defuse the criticism. Unfortunately, it cannot. "Fly, fight, and win" is a catchphrase and, like most catchphrases, is devoid of the nuances that give it utility and meaning in the complex, real world. A necessary first step in answering the question "why does the nation need an independent air force?" is to redefine the Air Force's mission statement. The more difficult second step is to revitalize the Air Force's critical air and space capabilities to ensure that it can continue to provide the nation's leaders with independent, flexible, and scalable options to effect political objectives.

The "ALL CLEAR" signal will not be sounded until Air Force leaders successfully do both.

Major Steven Fino is currently a student at Air University's School of Advanced Air & Space Studies. The opinions expressed here are solely those of the author and may not reflect the policies of the US Air Force or the Department of Defense.

What is a veteran?

A 'Veteran' - whether active duty, discharged, retired, or reserve - is someone who, at one point in his life, wrote a blank check made payable to "The United States of America," for an amount of "up to, and including his life."

-Unknown-

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STILL SERVING

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