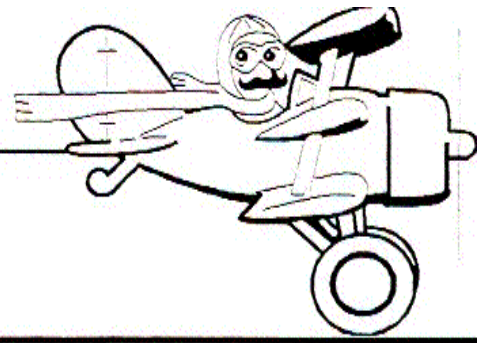


HANGAR FLYING

January/February 2010



A Publication of the McChord AFB Retiree Activities Office for Air Force Retirees, their spouses or survivors. Department of the Air Force, 100 Joe Jackson Blvd, Customer Service Mall Rm 1001, McChord AFB WA 98438-1114; Phone (253) 982-3214 (Voice Mail 24 hours a day) Fax 253-982-5234. Email - rao@mcchord.af.mil Web Site www.mcchordrao.com Retiree Activities Office: Open 0900-1200 Monday – Friday.

Health Care Language Does Not Threaten Military Benefits: In an article by Tom Philpott, we are told that the national health care insurance bill recently passed by the House, and the bill currently being debated by the Senate, “pose no threat to current military health care benefits.” The House bill (HR 3962) states in section 311 that “nothing” in the bill “shall be construed as affecting” authority used by DOD and the VA to provide Tricare and VA health care benefits. Confusing the issue, with many beneficiaries, has been an email currently being passed among military retirees, which falsely warns that the congressional budget has drafted legislation to attach new fees to Tricare for Life. The email is filled with misinformation. The Congressional Budget Office (CBO) has no authority to draft legislation; they can only provide suggestions and options for cutting down on the cost of entitlements. The President and the Congress have embraced none of these ideas.

Military retirees and disabled veterans are rightly worried that any tax imposed on so-called “Cadillac” health insurance programs will include Tricare and VA health care... “Simply not true say congressional staff members.” The Senate bill’s provision to allow excise tax on “applicable employer sponsored coverage” does not name Tricare and VA health care. Many military support groups are pressing for specific language in the Senate bill, which would exclude Tricare, Tricare-for-Life and VA health care from any excise tax on employer sponsored health care insurance. For now Tricare, Tricare-for-Life and VA health benefits appear to be safe, but the inevitable rising cost of these health care programs will bring, in the future, more budget pressures to shift some of the cost of these programs to beneficiaries.

Given these pressures, many military associations are lobbying Congress to define in law, that military members and retirees have earned through their service certain unassailable rights to promised retirement and health care benefits. (*Source: compiled from Tom Philpott’s Military Update Nov 28, 2009*)

VA Studying Vietnam-era Women Veterans: The Department of Veterans Affairs has launched a comprehensive study of women veterans who served in the military during the Vietnam War. The study will explore the effects of their military service upon their mental and physical health. The VA realizes that women veterans require specialized programs, and this study will help VA provide high-quality care for women veterans of the Vietnam era. The study, which began in November will last more than four years, will contact approximately 10,000 women in a mailed survey, telephone interview and a review of their medical records. As women Vietnam veterans approach their mid-60s, it is important to understand the impact of wartime deployment on health and mental outcomes nearly 40 years later, said VA officials. The study will assess the prevalence of post-traumatic stress disorder and other mental and physical health conditions for women Vietnam veterans, and explore the relationship between PTSD and other conditions. VA will study women Vietnam veterans who may have had direct exposure to traumatic events, and for the first time, study those who served in facilities near Vietnam. These women may have had similar, but less direct exposures. Both women veterans who receive their health care from VA and those who receive health care from other providers will be contacted to determine the prevalence of a variety of health conditions. (*Continued on next page*)

About 250,000 women veterans served in the military during the Vietnam War and about 7,000 were in or near Vietnam. Those who were in Vietnam, those who served elsewhere in Southeast Asia and those who served in the United States are potential study participants.

The study represents to date the most comprehensive examination of a group of women Vietnam veterans, and will be used to shape future research on women veterans in future wars. Such an understanding will lay the groundwork for planning and providing appropriate services for women veterans, as well as for the aging veteran population today. Women veterans are one of the fastest growing segments of the veteran population. There are approximately 1.8 million women veterans among the nation's 23 million living veterans. Women comprise 7.8 percent of the total veteran population and nearly 5.5 percent of all veterans who use VA health care services. VA estimates women veterans will constitute 10.5 percent of the veteran population by 2020 and 9.5 percent of all VA patients.

In recent years the VA has undertaken a number of initiatives to create or enhance services for women veterans. These initiatives include implementing comprehensive primary care nationwide, staffing every VA medical center with a women veterans program manager, supporting a multifaceted research program on women's health, and improving communication and outreach to women veterans. VA organizations such as the Center for Women Veterans and the Women Veterans Health Strategic Healthcare Group will continue operating. The study will be managed by the VA's Cooperative Studies Program and is projected to cost \$5.6 million. (Courtesy of The Department of Veterans Affairs -- www.va.gov/)

President Obama Signs The VA Healthcare Reform Law

President Barack Obama recently signed new legislation that creates predictable funding for veterans' health care. The Veterans Healthcare Reform and Transparency Act calls for appropriations a year in advance after more than two decades of regular budget delays. (Source: *Veterans Report, Military.com*)

An Overview of VA Home Loans: The VA Loan Guaranty Program began in 1944 in order to give soldiers returning from war the same opportunities to own homes as their civilian counterparts. Today, the general purpose of VA home loans is to provide veterans with secure home financing in appreciation for their service to America. The program is administered by the Veterans Benefits Administration, an organizational element of the U.S. Department of Veterans Affairs. A VA loan is made by a VA-approved mortgage lender with a portion backed by the good faith and credit of the U.S. Government. The benefits of the VA loan program create one of the safest and most secure home financing options for VA-eligible borrowers. Although there are over 23 million people eligible for VA home loan benefits, less than 10 percent have a VA mortgage. Typically, those with two years of active duty in branches of Army, Navy, Air Force, Marines and Coast Guard are eligible for the VA Home Loan Guaranty Program. Some surviving spouses and Reservists/National Guard members also qualify. A Certificate of Eligibility (COE) is needed before anyone can apply for a VA loan. A COE tells lenders how much entitlement a borrower has. Most COEs can be obtained by an approved VA lender on behalf of a borrower using a system called ACE.

Borrowers can expect to find the following benefits associated with VA loans:

- No down payment (100% financing)
- No private mortgage insurance (PMI)
- Relaxed qualifying standards
- Competitive interest rates
- No penalties for mortgage pre-payment
- Cash-out and debt consolidation
- Streamline rate reduction

Generally, full entitlement is for a loan of \$417,000. Income and credit qualifying is required before a loan of any amount is made. The VA guidelines for income and credit qualifying are more relaxed than that of many conventional loan programs. (Source: *Department of Veterans Affairs*)

Vietnam Veterans Benefits Agent Orange Rules: Vietnam veterans may be eligible for compensation and health care for certain diseases associated with Agent Orange, the defoliant sprayed to unmask enemy hiding places in the jungles throughout Vietnam. Special health care and compensation benefits are available to the 2.6 million men and women who served in Vietnam between 1962 and 1975, only 3,300 of whom remain in uniform today. Those discharged during that period are the largest group of veterans receiving VA health care and monthly compensation.

A small percentage of their disability claims are for illnesses that scientists have listed as being associated with Agent Orange. VA presumes that all military personnel who served in Vietnam were exposed to Agent Orange, and federal law presumes that certain illnesses are a result of that exposure. This "presumptive policy" simplifies the process of receiving compensation for these diseases since VA foregoes the normal requirements of proving that an illness began or was worsened during military service.

Based on clinical research, [these](#) diseases are on VA's Agent Orange list of presumptive disabilities. In addition, monetary benefits, health care and vocational rehabilitation services are provided to Vietnam veterans' offspring with [spina bifida](#), a congenital birth defect of the spine. Children of female veterans who served in Vietnam are authorized health care and monetary benefits for certain additional [birth defects](#).

Veterans who served in Vietnam during the war also are eligible for a complete physical examination. If a VA physician suspects a disease might be related to Agent Orange, VA will provide free medical care. Those who participate in the examination program become part of an Agent Orange Registry and receive periodic mailings from VA about the latest Agent Orange studies and new diseases being covered under VA policies.

Vietnam veterans and their families can contact VA for more information about these benefits. For the Agent Orange Registry physical examination, call a local VA hospital or clinic listed in the government pages of your phone book. To file a compensation claim for a current disability related to Agent Orange, veterans can call 1-800-827-1000 for an application form or visit VA's Web site at: <http://vabenefits.vba.va.gov>. (Source: *Department of Veterans Affairs*)

VA Birth Defects Assistance

Program Description: Spina Bifida patients who are natural children of Vietnam and Korea veterans may be eligible for a monthly monetary allowance. The allowance is paid at three different levels, depending on how severe the disability is. Please note: If you want to apply for either of the other Spina Bifida benefits (health care assistance or vocational training), you must start by applying for the monthly allowance.

General Program Requirements: In order to qualify for this benefit program, you must be the biological child of a male or female veteran who served in Vietnam or on the Korean demilitarized zone during specific time periods. Your birth father or mother must have:

- Served in Vietnam during the period from January 9, 1962, through May 7, 1975, or
- Served in or near the Korean demilitarized zone (DMZ) during the period from September 1, 1967, through August 31, 1971 *and* have been exposed to herbicides.
- VA has no requirements regarding the character of the parent's discharge or the length of his or her service.
- You must be diagnosed with a form of Spina Bifida other than Spina Bifida Occulta.

The following information will lead you to the next steps to apply for this benefit. To find out if you're eligible for this benefit, you must first complete the form, "Benefits for Certain Children with Disabilities born of Vietnam Veterans" (VA Form 21-0304). Forms can be found at <http://www.va.gov/vaforms/>.

Alternatively, VA can send you the form if you call 1-800-827-1000. If you have questions about this benefit or would like to speak with a VA benefit specialist, you can call VA toll-free at 1-800-827-1000. People who are hearing impaired may call this toll-free TTY number 1-800-829-4833. For more information, visit: <http://www1.va.gov/opa/IS1/11.asp> (Source: *GovBenefits.gov*)

VA Burial Benefits Reimbursement of Expenses

Program Description: VA burial allowances are partial reimbursements of eligible veterans' burial and funeral costs. When the cause of death is not service-related, VA may be able to pay two modest allowances: one for burial and funeral expense, and one for the cemetery plot. When the cause of death is service-related, the reimbursement comes in the form of a single, larger payment for burial and funeral expenses. In some service-connected death cases, VA can pay a reimbursement for transportation costs.

General Program Requirements: The veteran must have been discharged under conditions other than dishonorable. VA can pay a reimbursement only if the expenses for the funeral/burial have not been reimbursed by another government agency or some other source. Generally, at least **one** of following additional eligibility criteria must also be met. Reimbursement is possible if the veteran:

- Died because of a service-related disability, OR
- Was receiving VA pension or compensation at the time of death, OR
- Was entitled to receive VA compensation, but decided not to reduce his/her military retired pay, OR
- Died in a VA hospital or while in a nursing home under VA contract, or while in an approved state nursing home, OR
- Had a claim pending at the time of death and has been found entitled to compensation or pension from a date prior to the date of death, OR
- Died while traveling, under proper authorization and at VA expense, to or from a specified place for the purpose of examination, treatment, or care.

National Guard and Reserve members who were activated for federal military service and later separated are considered veterans. Commissioned Officers of the Public Health Service and National Oceanic and Atmospheric Administration are considered active duty members and veterans, once discharged.

Your Next Steps: The following information will lead you to the next steps to apply for this benefit.

Application Process

To apply for this program, call 1-800-827-1000 and request that form *Application for Burial Benefits (VA Form 21-530)* be mailed to you. Once you have received the form, fill it out and send it back to VA as directed on the form.

Program Contact Information

Additional information on this program may be obtained from the U.S. Department of Veterans Affairs at http://www.vba.va.gov/VBA/benefits/factsheets/burials/Burialeq_0508.doc. If you have questions or would like to speak with a benefit specialist, you can call VA at this toll-free number: 1-800-827-1000. People who are hearing impaired may call this toll-free TTY number: 1-800-829-4833. (Source: GovBenefits.gov)

VA - Education - Survivors' and Dependents' Educational Assistance Program (DEA)

Program Description: The DEA program provides education and training opportunities to eligible dependents and survivors of certain veterans.

General Program Requirements: Applicants must be a son, daughter, or spouse of a:

- Veteran who is permanently and totally disabled as the result of, or dies of, a service-connected disability. The disability must arise out of or be aggravated by active service.
- Veteran with a permanent and total service-connected disability who dies from any cause.
- Service member who died on active duty in the line of duty.
- Service member who is missing in action, captured in the line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power.

Reservists and National Guard members who are activated for Federal service OR who die/become disabled while on training status are considered veterans. Commissioned Officers of the Public Health Service and National Oceanic and Atmospheric Administration are considered active duty members and veterans, once discharged. *Continued on the next page)*

The following information will lead you to the next steps to apply for this benefit For more information go to <http://www.gibill.va.gov/> or Call 1-888-GIBILL-1 (1-888-442-4551) or 1-800-827-1000 for the hearing impaired, please call 1-800-829-4833

VA Grant for Automobiles and Adaptive Equipment for Disabled Veterans

Program Description: There is a one-time payment by VA of not greater than \$11,000 toward the purchase of an automobile or other transportation. VA also pays for adaptive equipment, or for repair, replacement, and reinstallation of automobile equipment required because of disability. These payments may be made multiple times during the veteran's life.

General Program Requirements: In order to qualify for this benefit program, you must have one of the following disabilities that are the result of injury or disease incurred or aggravated during active service: Permanent loss of use of at least one foot or hand, or serious, permanent vision impairment in both eyes. If you have ankylosis (stiff or immobile joint) of at least one knee or hip due to a service-connected disability, you may qualify for adaptive equipment, without the automobile grant. You can qualify for this benefit even if you are still on active duty. If you are a veteran, your discharge must have been given under other than dishonorable conditions. There is no requirement as to length of service. National Guard and Reserve members who were activated for federal military service and later separated are considered veterans. Commissioned Officers of the Public Health Service and National Oceanic and Atmospheric Administration are considered active duty members and veterans once discharged. To apply for this program, call 1-800-827-1000 and request the form "Application for Automobile or Other Conveyance and Adaptive Equipment" (VA Form 21-4502) will be mailed to you. Fill out the form and return it to VA, as indicated on the form, and you will be notified regarding you eligibility status. For more information, visit <http://www.vba.va.gov/VBA/benefits/factsheets/#BM2> (Source: GovBenefits.gov)

TRICARE Flu Immunization Policy: TRICARE Prime, Standard and Extra beneficiaries can get their shots from network and non-network providers without paying a deductible or making a co-payment.

TRICARE for Life beneficiaries must follow Medicare rules regarding H1N1 vaccine. Vaccination is more critical for the following groups:

- pregnant women
- people who live with or care for children younger than 6 months
- healthcare and emergency medical services personnel
- everyone between the ages of 6 months and 24 years
- people ages 25 through 64 with chronic health disorders or compromised immune systems
- older people with diabetes, cardiovascular disease, asthma or HIV.

Here are some options for TFL beneficiaries getting a flu shot:

- Doctor's Office
- Health Departments
- Pharmacies
- Offices -- many offer flu shots for employees

Medicare will cover the administration of the H1N1 flu shot. Your doctor or healthcare provider can't charge you for the H1N1 vaccine because they received the vaccine for free. If your doctor or health care provider accepts assignment, you pay nothing for the H1N1 vaccine's administration. The Medicare Part B deductible and coinsurance do not apply to the H1N1 vaccine or its administration. You should still get the seasonal flu vaccine. The seasonal flu vaccine is different from the H1N1 flu vaccine. The Centers for Disease Control encourages people to get both vaccines as they are different viruses. (Source: *Military.com Military Report and Medicare.com*)

2009 H1N1 Vaccination: While the seasonal flu vaccination is not expected to protect against the H1N1 virus, the 2009 H1N1 vaccine should be available in the fall. There is not expected to be a shortage of the vaccine, however the following beneficiaries will have priority:

1. pregnant women
2. people who live with or care for children younger than 6 months of age
3. healthcare and emergency medical services personnel
4. persons between the ages of 6 months to 24 years
5. people ages 25 to 64 who are at higher risk for H1N1 because of chronic health disorders or compromised immune systems

As long as the vaccine is obtained from a TRICARE-authorized provider, it will be covered by TRICARE. Pharmacists are not recognized by TRICARE as authorized to provide immunizations. TRICARE is waiving all referral and authorization requirements for H1N1 vaccine. This allows Prime enrollees to obtain the H1N1 vaccine from any authorized provider without point of service charges from October 1, 2009 to April 30, 2010. Check with your primary care manager if you have questions.

Note to Non-Active Duty Prime Beneficiaries: If you are getting a Seasonal Flu vaccine, you must have a referral and authorization from your primary care manager to receive it from a non-network provider or you will be subject to point of service charges. (*Source: Tricare News*)

TriWest Offers Lung Health Service: TriWest Healthcare Alliance is offering a new lung health service to West Region TRICARE beneficiaries eligible for its Disease Management programs. Beneficiaries suffering from chronic obstructive pulmonary disease (COPD) can receive extra help through TriWest Healthcare Alliance, which manages the TRICARE military healthcare entitlement on behalf of the Department of Defense (DoD) for 21 western States. COPD is a group of lung diseases that include emphysema, chronic bronchitis and, in some cases, asthma. The COPD program, launched by TriWest in September, is a no-cost entitlement for those who are eligible. Eligibility is determined by TRICARE and is based on claims history. Once a beneficiary is identified as eligible to participate in the program, DoD refers the beneficiary to TriWest, which in turn contact the beneficiary. The COPD Disease Management Program has a number of services to help beneficiaries manage their chronic lung diseases. The beneficiary can also access smoking cessation, exercise and nutrition help from their TriWest health coach. Beneficiaries can find additional resources on TriWest's [Condition Management Page](#), [TRICARE.Mil](#) or at [Ucanquit2](#), an online smoking cessation resource developed by DoD for U.S. service members. (*Source: NAUS Weekly Update*)

TRICARE Offers Hassle-Free Pharmacy: The TRICARE Management Activity is introducing significant new enhancements to beneficiaries as it combines its mail-order and retail pharmacy contracts into one new contract: TRICARE Pharmacy. The improvements to the TRICARE Pharmacy program include the Specialty Medication Care Management program in the mail-order pharmacy; expansion of the Member Choice Center providing assistance to help beneficiaries switch their military treatment facility (MTF) prescriptions to mail-order; and one call center phone number: 1-877-363-1303. The Specialty Medication Care Management program is for beneficiaries using the mail-order pharmacy for their specialty medications. It is structured to improve their health through continuous health evaluation, ongoing monitoring, assessment of education needs, and management of medication use. The TRICARE Pharmacy Program provides outpatient prescription drugs to 9.5 million beneficiaries. TRICARE selected Express Scripts, Inc. to provide beneficiaries with mail-order, retail and specialty pharmacy services. Express Scripts currently handles millions of prescriptions each year through mail-order and retail pharmacies. "TRICARE beneficiaries don't have to do anything. No calls, no paperwork. Beneficiaries do not have to re-enroll, all co-pays stay the same and the network remains essentially unchanged. The decision to combine mail-order and retail contracts resulted from observations that commercial insurance companies were doing the same thing with positive results. Combined call centers and claims processing will help control Department of Defense pharmacy costs. (*Continued on the next page*)

The Department of Defense provides a world-class pharmacy benefit through TRICARE to all eligible uniformed service members, retirees, and family members, including beneficiaries age 65 and older. The TRICARE Pharmacy Program is designed to provide the medications beneficiaries need in a safe, convenient and cost-effective manner. The program has three objectives.

1. Provide a uniform, effective and efficient benefit. TRICARE provides beneficiaries with four high-quality pharmacy options: MTF pharmacies; the mail-order pharmacy; the TRICARE Retail Pharmacy network; and non-network retail pharmacies.
2. Encourage mail-order pharmacy use. The mail-order pharmacy is the least expensive option when not using a MTF pharmacy. Beneficiaries receive up to a 90-day supply of maintenance medications delivered directly to their home. The mail-order pharmacy now offers a program providing enhanced education to promote safe use of specialty medications requiring special handling and administration; frequent dose changes; and possible benefits from additional clinical monitoring. The Member Choice Center is available at 1-877-363-1433 to help beneficiaries switch prescriptions to the convenient, cost-effective mail-order pharmacy.
3. Promote patient safety. All prescriptions dispensed to beneficiaries through MTFs, the mail-order pharmacy and retail network pharmacies are rigorously checked for accuracy and potential drug interactions by referencing new prescriptions against a beneficiary's prescription history.

The TRICARE Retail Pharmacy network includes all major national chains, more than 100 regional chains and more than 20,000 independent community pharmacies. Beneficiaries who are concerned about their current pharmacy's participation in the TRICARE retail network should ask their pharmacist if they are in the TRICARE network. For more information visit www.tricare.mil/pharmacy or www.express-scripts.com/TRICARE, or call 1-877-363-1303. (Source: *TriCare Communications*)

TRICARE Retiree Dental Premium Increase: The first annual TRDP premium rate change took effect on October 1, 2009 for the second contract year, October 1, 2009 through September 30, 2010. Subsequent changes for the third and fourth contract years will be effective October 1, 2010 through September 30, 2011 and October 1, 2011 through September 30, 2012, respectively. This annual premium adjustment is automatic and will be reflected in the allotment from your retired pay or, if you are billed directly, in your payment coupons or EFT (electronic funds transfer) debit applicable to your October 1 payment. To find out the new premium rates for your region, use the [online premium search](#). (Source: *TRDP*)

Space-A travel an option for retirees: Air Mobility Command aircraft fly all over the globe and often have open passenger seats available. More than 130,000 Space-A travelers take advantage of this military benefit each year. Retired Airmen with a retiree ID card and who are eligible to receive retired or retainer pay, fly as Category VI passengers. Since missions can be rerouted, delayed or cancelled for a variety of reasons -- weather, maintenance issues or higher priority missions -- retirees need to be flexible. They need to plan for any potential delays and added expenses for stays, especially in high-cost areas. There are four different methods for signing up for Space-A travel: in person at the passenger terminal or remotely via telephone, fax or e-mail. Sponsors must provide their name and information on all traveling dependents, and their desired destination(s). Retirees can also use the DOD-chartered airlift missions for Space-A travel, if seats are available. Although retirees cannot visit their grandchildren in Iraq or Afghanistan, they can travel to Germany if the aircraft transitions there. If traveling overseas, retirees should know the restrictions of the host country. For example, retirees traveling to Germany are not authorized to purchase items in the Base Exchange, but they can go off base and shop in the local community. Status of Forces Agreements restrictions, U.S. State Department Travel Advisory guidelines, the Foreign Clearance Guide and passport and visa requirements are all necessary items to research. For more information on Space-A travel, visit the AMC travel Web site at www.amc.af.mil/amctravel. (Source: *Air Force Print News*)

McChord Air Museum's B-18A Bolo Bomber

The McChord Air Museum building (bldg 517) is open to visitors Wednesday thru Friday from 12 to 4 pm. The building houses many displays of Air Force Items from WWII and the Korean Conflict. The museum aircraft are displayed in the Air Park on Heritage Hill. Heritage Hill is located near the base Chapels. The displayed aircraft may be viewed at any time, day or evening via a self-guided tour. We will be running a feature story on each museum aircraft in our upcoming newsletters. The next time you are on base allow some time to check out the museum displays and our restored military aircraft.

Bring the grandchildren, they will enjoy it. The museum

also has a restoration hangar (hangar 301) located in the old 318th FIS area. Hangar 301 currently houses the B-18 Bolo and the Consolidated PBY, which is currently undergoing restoration and the UC-45J Expediter.

The first aircraft assigned to McChord was also the first aircraft acquired by the McChord Air Museum, the Douglas B-18A Bolo. On May 28, 1983, B-18A 37-505 arrived at McChord from Tucson AZ in the belly of an Air Force C-5A. The first production B-18 was delivered to the US Army at Wright Field on February 23, 1937. The 17th Bombardment Group (Medium) based at March AAF received its first B-18 in early 1940 before moving to McChord AAF June 24, 1940, becoming the first aircraft assigned to the new base. The 12th Bombardment Group, also a McChord based unit, flew B-18's from the base until 1942. In the early 1940s, deficiencies in the B-18/B-18A bomber were readily apparent. In range, in speed, in bomb load, and particularly in defensive armor and armament, the design was totally unsuited for the long-range bombing role it had originally been intended to fill. In spite of the known shortcomings in the B-18, the Douglas aircraft was the most numerous American bomber type deployed outside the Continental United States at the time of Pearl Harbor. The AAF hoped the B-18 could play a stopgap role until a more suitable aircraft became available. The Bolos remaining in the continental USA and the Caribbean were deployed in a defensive role in anticipation of attacks on the US mainland. In 1942, 122 B-18As were modified for the maritime submarine patrol to counter the U-boat menace. These modified aircraft were redesignated B-18B and featured a nose mounted radar set, replacing the bombardier's glassed area. The bombardier's station was moved below and behind the radome, where the forward turret had formerly been located. In addition, a Magnetic Anomaly Detector (MAD) set was installed in a long tubular boom that extended behind and below the rudder. Some B-18Bs were also equipped with a set of bomb tracks underneath the wings, which could fire bombs backwards in a prearranged pattern. B-18Bs are credited with two U-boat kills--U-654 on August 22, 1942 and U-512 on October 2, 1942. The antisubmarine role was short lived, and the B-18s were superseded in this role in 1943 by the B-24 Liberator, which had a substantially longer range and a much heavier payload. Two B-18A's were converted for use as transports and designated C-58; many others were used in this role without being redesignated. The McChord Heritage Museum is looking for retired aircraft maintainers, sheet metal specialist and anyone with an interest in old military aircraft restoration. The museum has a variety of both propeller driven and jet powered aircraft. If you are looking for an enjoyable past time, give the museum a call. Call, Ray Jordon (Museum Director) at 982-2485 or Chuck Bowen (Hangar Chief) at 982-2545. For more on the Museums aircraft visit the website at www.mechordairmuseum.org. (Source McChord Heritage Museum)



TriCare Covered Clinical Preventive Services

TRICARE covers the following types of clinical preventive services, subject to age and other criteria. See each entry for specific criteria.

- Body measurement
- **Breast cancer exams/mammograms**
- Blood pressure
- **Cholesterol testing**
- **Colorectal cancer exams**
- **Hearing exams**
- **Hepatitis B screening**
- **Lipid Panel**
- **Oral cavity and pharyngeal cancer exams**
- **Pediatric lead level screening**
- **Pelvic exams/Pap smears**
- **Prostate cancer exams**
- **Rubella antibodies**
- **School physicals**
- **Skin cancer exams**
- **Testicular cancer exams**
- **Thyroid cancer exams**
- **Tuberculosis screening**
- **Vision screenings** (See also **Eye Exams**) (*Source: TriCare*)

2010 National Health & Wellness Observances

January is:

Cervical Cancer Month <http://www.nccc-online.org>

National Birth Defects Prevention Month <http://www.marchofdimes.com> or <http://www.cdc.gov>

National Blood Donor Month <http://www.aabb.org>

National Glaucoma Awareness Month <http://www.glaucoma.org>

January 4 - 10 National Folic Acid Awareness Week <http://www.folicacidinfo.org>

January 17 - 23 Healthy Weight Week <http://www.healthyweightnetwork.com>

January 24 - 30 National Certified Nurse Anesthetist Week <http://www.aana.com>

February is:

AMD Low Vision Awareness Month <http://www.preventblindness.org>

Heart Month <http://www.americanheart.org> or <http://www.cdc.gov>

National Cancer Prevention Month <http://www.aicr.org> or www.cancer.org

National Senior Independence Month <http://www.aoa.gov>

Wise Health Consumer Month <http://www.healthylife.com>

February 14 - 20 National Cardiac Rehabilitation Week <http://aacvpr.org>

February 15 - 21 Random Acts of Kindness Week <http://www.actsofkindness.org>

February 20 – 25 Trails Advocacy Week <http://www.americanhiking.org>

February 21 – 27 National Eating Disorders Awareness Week <http://www.nationaleatingdisorders.org>

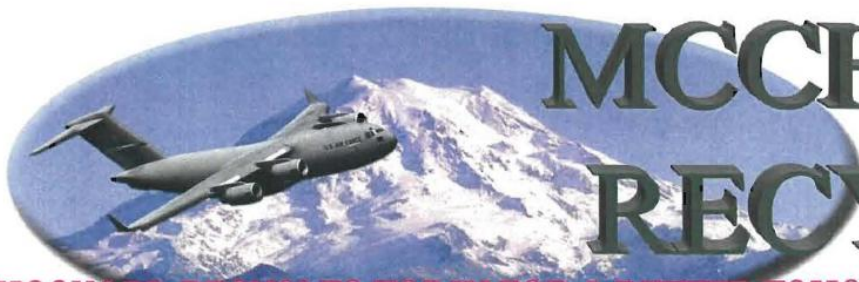
(*Source: The National Wellness Institute*)

Executive Order Calls For More Vets in Government: President Obama opens more jobs to former military. The President has signed an executive order aimed at hiring more veterans to work in the federal government. The executive order is intended to promote and showcase opportunities for veterans. The Defense Department currently has 750 career fields and employs approximately 350,000 veterans. The directors of the Office of Personnel Management and Budget have placed special emphasis on improving the hiring process for veteran's government wide. It is expected to make it easier for disabled veterans to gain federal employment. *(Source: Northwest Airlifter)*

AF Records Transferred to Archives: Approximately 177,000 official military personnel files from the Air Force were recently transferred to the National Archives and Records Administration, making the historical documents part of the public record. As Air Force personnel files continue to reach maturity at 62 years, they will be transferred to national archives ownership. The ownership of these records by the National Archives now makes them open to the public. While the Privacy Act no longer applies to archival records, exemptions of the Freedom of Information Act continue to protect the personal privacy of the members and their families and Social Security numbers are redacted before release. For more information and to request copies of records from the National Archives, visit the [National Archives' eVetRecs website](#). *(source: Military Report, Military.com)*

RAO VOLUNTEERS NEEDED The McChord Retiree Activities Office currently needs volunteers. Retiree volunteers and their spouses and survivors staff the RAO desk. Our hours of operation are 0900 to 1200 hours Monday through Friday. Our volunteers assist retirees with several actions including: serving as an information center for space-available travel, Tricare and base services, offering referrals for financial assistance, pay matters, and providing literature on retirement issues. You can volunteer for a day a week, a day a month or as many days as you like. Working with your fellow retirees can be an enjoyable experience. It is a satisfying feeling knowing that you have helped a fellow retiree or survivor with their needs and problems. It is also great to get together and rub elbows with fellow retirees and their spouses all working together to help the local retired military community. We host a business luncheon at the McChord Club on the second Thursday of each month. Feel free to stop by and check us out or call and volunteer at (253) 982-3214 or e-mail us at rao@mcchord.af.mil. *(Source: McChord AFB Retiree Affairs)*

Tricare program for 'gray area' reservists coming A new program will offer "gray area" reservists the opportunity to purchase Tricare health care coverage. While qualified members of the Selected Reserve may purchase premium-based coverage under Tricare Reserve Select TRS, retired National Guard and Reserve personnel did not have Tricare health coverage options until they reached age 60. Under a provision of the National Defense Authorization Act for 2010, that has all changed. The new provision allows certain members of the Retired Reserve who are not yet age 60, called "gray-area" retirees, to purchase Tricare Standard and Tricare Extra coverage. Tricare Extra simply means beneficiaries have lower out of pocket costs if they use a network provider. This is a major benefit program with implementation on the same magnitude as TRS. It will require detailed design, development and testing, but qualified retired reservists should be able to purchase coverage by late summer or early fall of 2010. While the health care benefit provided for gray-area retirees will be Tricare Standard and Extra – similar to TRS – the new program will differ from TRS in its qualifications, premiums, copayment rates and catastrophic cap requirements. The program is tentatively called Tricare Retired Reserve. The new statute requires premium rates to equal the full cost of the coverage. That is the major difference contrasted with TRS, where the statute provides that Selected Reserve members pay only 28 percent of the cost of the coverage. Premiums for the new gray-area retiree program will be announced after program rules are published in the Federal Register. This new program offers an important health coverage option for Reserve and National Guard members who served their country honorably before hanging up their uniforms at retirement. For more information about Tricare benefits go to www.tricare.mil. *(Source: Tricare)*



MCCHORD'S Retiree Edition RECYCLER

MCCHORD RECYCLES TODAY FOR A BETTER TOMORROW ~ DECEMBER 2009

McChord's Recycler is a product of the Qualified Recycling Program (QRP) Committee:

Michael Grenko
Chief Environmental
Management Flight

QRP Manager

Doug Skitch
Recycling Manager
Quality Assurance

Jim McCormick
Environmental
Attorney

Contracting

Finance

Base Supply

Transportation

Services

AAFES

Commissary

J & M Recycling Inc.

The McChord
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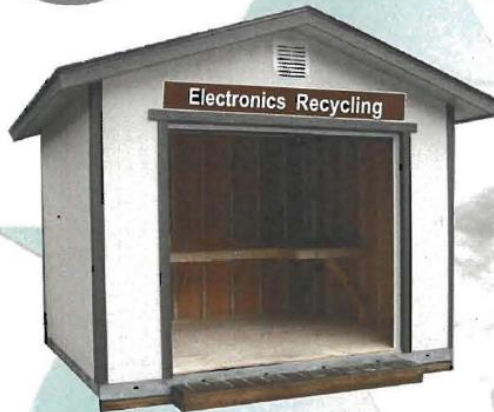
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Recycle Your TV At McChords Recycling Center!



E-CYCLE
washington

McChord Recycling has teamed up with E-Cycle Washington to bring TV, Laptop, Monitors and Computer recycling to McChord.



The McChord Recycling Center has added a new Electronics Shed for public drop off. Clean out your closet and bring your old TV to the Recycling Center .



Old TV's!



Big TV's



Small TV's



Rear
Projection TV



Plasma and
LCD TV's



Console TV's



Computers, Monitors and Laptops



IMPORTANT RESOURCE!!! Keep this and all recycling handouts in a folder for new arrivals to read.