



Federal Update for July 27 – 31, 2015



Military Enlistment Standards 2015 Update ► Citizenship

In order to join the US Military, you must either be a US citizen, or you must be a legal permanent immigrant, physically living in the United States, with a green card. The US military cannot and will not assist with the immigration process. If you are not a US citizen, you must legally and permanently immigrate to the United States first, via the regular immigration procedures and quotas, establish a residence, and then (if you meet the other qualifying criteria), visit a military recruiter's office and apply for enlistment. For enlistment purposes, citizens of the United States include citizens of: Guam, Puerto Rico, The U.S. Virgin Islands, The Northern Marianas Islands, American Samoa, The Federated States of Micronesia, and The Republic of the Marshall Islands.

Not all legal immigrants may be eligible to enlist. Applicants who have been residents of countries considered hostile to the interests of the United States require a waiver. See your local recruiter for the most current list of countries considered hostile to the interests of the United States. While non-citizens may enlist, they will find their job choices extremely limited. DOD policy prohibits granting security clearances to non-U.S. Citizens. Therefore, non-Citizens who enlist in the United States military will be limited to those jobs which do not require a security clearance. For legal immigrants who do enlist, there are accelerated citizenship procedures for non-citizens on active duty. For details go to <http://usmilitary.about.com/od/theorderlyroom/a/citizenship.htm>. [Source: About.com Newsletter | Rod Powers | June 02, 2015 ++]

NDAA for 2016 Update ► Bills Would Curb ER Visits, Boost Co-Pays

House and Senate lawmakers hashing out a compromise on the 2016 defense policy bill will mull several military health provisions as they finalize the legislation. Discrepancies to be addressed include access to urgent care and other medical appointments, mental health services for troops, family members and veterans, pharmacy fees and birth control. The Senate bill would allow Tricare beneficiaries up to four visits a year for urgent care without referrals, a move designed to reduce the number of emergency room visits for nonemergency treatment.

Earlier this year, the Pentagon proposed fining beneficiaries who often seek care in ERs rather than make a doctor's appointment or wait until normal office hours. Troops and their families use ERs both at military and civilian hospitals at rates above the national average, costing the government millions, advocacy groups say. The average ER visit costs \$531, the average urgent care visit \$131, according to Senate staff. The House bill doesn't have the urgent care benefit, but also seeks to address ER overuse by requiring DoD to meet appointment wait time standards for beneficiaries that were set by the department itself. If it can't, DoD would have to give beneficiaries appointments with Tricare-approved providers.

The provisions are hailed by military advocates. "We appear to be making headway in our efforts to improve access to acute care," National Military Family Association officials said in a statement. Another Senate proposal would boost drug co-payments starting next year. Fees would rise substantially by 2025 for nearly all types of medications, including generics. That has caught the eye of advocates. The plan "shifts a disproportionate share onto beneficiaries who are already doing their part to lower health care costs," the Military Officers Association of America said in a statement. The House version rejects any proposals to raise Tricare fees, including pharmacy co-payments.

The Senate draft bill aims to improve mental health services in both military and local communities by requiring all DoD primary care and mental health providers to be trained to assess for suicide risk and manage patients at risk. The bill also has a proposal from Sen. Joe Donnelly (D-IN) that would require DoD to develop a system to encourage civilian mental health providers to get training to treat service-related behavioral health conditions in troops, veterans and their families and be listed in a registry accessible to patients. Donnelly said many private psychiatrists, psychologists and social workers are unfamiliar with the unique stressors facing troops, families and vets, and programs that train cultural sensitivity, awareness and treatments for service-related conditions would help by broadening access to care. [Source: NavyTimes | Patricia Kime | July 07, 2015 ++]

Burn Pit Toxic Exposure Update ► IAVA Vets Worry about Health

In Afghanistan and Iraq, especially in the early years, soldiers burned their waste in big, open-air pits. "A burn pit's just a big hole in the ground. You push dirt up and just have trash there, and light it on fire and walk away," says Army veteran Eric Mullins. Eric Mullins is an Army veteran who served in Iraq in 2003 and again in 2008. On his first tour, he was assigned to burn barrels of human waste. "We didn't have bathrooms there and we didn't have electricity. So we had these, they were a type of an outhouse, to use the bathroom," he says. "So every morning, being the private, being the lowest ranking guy there, (I) had to go out, take the barrels out, fill it with gas and burn the barrels of human waste."

Mullins says he had to stand there, breathing in the fumes, and stir the waste until it turned into liquid. He says they also burned confidential documents, plastic, and anything you'd normally throw into a trash can. "There were some aerosol cans that'd popped after a bit, and we were like, 'Oh crap,'" he says. "I know nothing was intentional but it got your heart beating." Sometimes, Mullins says, he'll smell something that reminds him of the burn pits in Iraq, and it takes him right back: Mullins says no one wore respirators or eye protection in or near the burn pits. "We never thought about it, we were 18, 19, 20 years old. We were young kids, we were in this country burning trash; we never thought there would be long-term effects," he says. "But after you get older, you become a dad, you realize maybe you shouldn't have been doing that."

"Burn pits tend to be one of the major concerns of the post 9/11 generation." research director for the Iraq and Afghanistan Veterans of America Jackie Maffucci says. Veterans tell them they have concerns about respiratory problems that started after they got back to the States. "Anecdotally, I've spoken to some veterans who used to be extremely active — running half marathons, marathons, those kinds of things — and now have trouble walking up the block to go to the store or to go get their mail from the mailbox," she says. "And they're very concerned that this in part is a result of their exposures when they were deployed." There has been some research into long-term health effects, but it's still early, she says. A study of soldiers published in the New England Journal of Medicine found links between prolonged exposure to burn pits and sulfur mine fires, and a severe respiratory illness called constrictive bronchiolitis.

A few years ago, the VA asked the Institute of Medicine to look into long-term health effects from burn pits. Dr. Paul Ciminera directs the Post 9/11 Era Environmental Health Program with the Veterans Health Administration. "The Institute of Medicine in their finding that was strongest in their 2011 report (was) that there could be reduced lung function," he says. "So reduced lung function in itself doesn't mean disease, but it could mean that individuals who deployed had some damage to their lungs." Ciminera says at this point, they haven't identified any health outcomes at the population level that they can tie specifically to burn pits. "So, individuals who have health problems and wish to receive compensation or service connection for that condition will need to go through our process and have their case looked at on a case-by-case basis," he says.

In other words, the VA has not yet identified what they call "presumptive diseases" related to exposure to burn pits. There are a number of presumptive diseases the VA has recognized in connection to exposure to Agent Orange during the Vietnam War. In an email, VA spokesperson Meagan Lutz explained how this process works:

The presumptive disability decision-making process involves numerous steps and several VA stakeholders. VA has a responsibility to review the latest evidence based science to understand if illnesses Veterans are encountering are connected to service, and might be associated with long-term adverse health effects. The VA often requests the help of organizations, like the IOM,

to determine the long-term health effects of, in the case of Agent Orange, an environmental exposure.

The presumption of service connection relieves claimants of the need to submit evidence showing that their disabilities were incurred in or caused by their service. It relieves claimants of the burden of submitting medical evidence directly linking the onset of their condition to service, a burden that would be difficult to meet where the condition manifests at a time remote from service and the relevant medical principles may not be widely known. It also ensures that similar claims are given similar treatment, and enables VA to process claims more quickly by relying upon medical principles that need not be independently established in each case. Finally, it helps Veterans, who may not have been otherwise eligible, obtain prompt medical assistance for their service connected conditions.

The VA is also doing its own studies. In 2013, Congress directed the VA to establish an open burn pit registry. Veterans can sign up on the registry and fill out a questionnaire about their health. Ciminera says more than 40,000 veterans have signed up so far. Jackie Maffucci with IAVA says this kind of research into health effects takes years. She encourages any veterans who think they were exposed to sign up for the registry. "Because, particularly as we saw with Vietnam veterans and Agent Orange, the longer of a gap there is between the research and the outcomes, the harder it is to draw those parallels to be able to say, 'I was here, I was exposed, here are my records, I need that care,'" she says. She says she hopes the post 9/11 generation of veterans won't have to wait as long for answers.[Source: Michigan Radio | Rebecca Williams | July 07, 2015 ++]

PTSD Update ► VA/DoD Want Both Good and Damaged Brains

If you have post-traumatic stress or a blast-related traumatic brain injury, two research institutes want your brains. Not now, of course — when you're done using them. The Veterans Affairs Department's National Center for Posttraumatic Stress Disorder has launched the first brain tissue repository to study PTSD, following the Defense Department's launch in late 2013 of its own brain bank for research. The two facilities hope to enhance the scientific catalog of neuroscience, say officials with the departments.

Dr. Matthew Friedman, senior adviser to the VA center, said researchers can learn much by studying brain images, but there's "no substitute for looking at the neurons themselves" when it comes to decoding the complex, mysterious body organ. Understanding changes at the cellular and synaptic levels is critical to finding potential biological signs for developing PTSD and other mental health conditions, diagnosing disorders and treating them, Friedman said. The Leahy-Friedman National Brain Repository for PTSD — named for Friedman, who previously served as the national center's executive director, and Sen. Patrick Leahy, D-Vt., who led the push to fund the brain bank — is looking for veterans with and without PTSD to track now and

study their brains and other tissues after they die. Friedman said the brain bank would be "very grateful" to veterans who decide to participate.

Several medical centers and research institutions are involved in the repository initiative, including VA hospitals in Boston, San Antonio, West Haven, Connecticut, and White River Junction, Vermont. The Uniformed Services University of Health Sciences (USUHS), Bethesda, Maryland, also plays a role, with psychiatrists reviewing veterans' medical records to analyze their medical backgrounds. USUHS hosts DoD's Brain Tissue Repository for Traumatic Brain Injury as part of its Center for Neuroscience and Regenerative Medicine.

Researchers at the military's medical school also are asking veterans to donate their brains to science, but are seeking those with brain injuries. They hope former service members will make their intentions known in their wills or tell family members they want to participate. Studies of these brains will advance the understanding of TBI and other diseases of the brain, including dementia, Alzheimer's and chronic traumatic encephalopathy, as well as brain function after injury, according to a DoD official.

Veterans with PTSD or those without who are interested in furthering the science of trauma-related mental health disorders by enrolling in the brain bank can call the center at 800-762-6609 or visit its website at http://www.research.va.gov/programs/tissue_banking/PTSD/default.cfm. Those with traumatic brain injury or family members who want to contribute their loved ones' tissue can contact the repository through its web site www.researchbraininjury.org/brain-tissue-donation or email the center at cnrm-tbi@usuhs.edu. [Source: MilitaryTimes | Patricia Kime | July 12, 2015 ++]

OPM Data Breach Update ► OPM Director Resigns

OPM announced 9 JUL that the size of a hack that began last year led to the pilfering of sensitive personal information of 21.5 million former and current employees — including potentially millions of military personnel. Every sailor, Marine and Navy Department civilian who has completed the SF-86 security questionnaire from 2000 to the present is at risk according to an ALNAV message released 10 JUL. The information jeopardized includes answers to questions about personal finances, drug and alcohol abuse and other highly personal details used to assess a person's suitability for classified access. OPM has also said that investigative notes attached to the questionnaire may also have been breached.

OPM's 9 JUL admission, following weeks of scrutiny on Capitol Hill after OPM acknowledge a separate data breach that affected 4.2 million, led to a rush of lawmakers who called for her ousting, including the top three House Republicans and Democratic Sen. Mark Warner, who sits on the Senate Intelligence Committee.

The announcement provided the first significant details about the hack since OPM first revealed the breach 12 JUN. OPM will provide a "suite of services" to individuals whose personal

information was hacked, which includes nearly everyone that underwent a background investigation or reinvestigation through OPM in 2000 or later (which applies to anyone who submitted Forms SF-86, SF-85 or SF-85P). Individuals who underwent a background investigation prior to 2000 may still be impacted, but OPM said that is “less likely.”

The personal information breached in the hack included details such as Social Security numbers; residency and educational history; employment history; information about immediate family and other personal and business relationships; health, criminal and financial history; and other details, OPM said. The incident is separate, but related, to the initial hack announced by OPM in May, which affected 4.2 current and former federal employees. The second breach, which specifically targeted individuals that underwent background investigations, such as those applying for security clearances, was detected in late May as OPM was beefing up its systems in response to the first hack.

OPM said 19.7 million of those impacted applied for a background investigation, while an additional 1.8 million were non-applicants, primarily spouses or co-habitants of applicants. The breached records include findings from interviews conducted by background investigators and 1.1 million of the records included fingerprints. Notifications will go out to those impacted by the hack “in the coming weeks,” OPM said.

Services to those individuals will be provided by a private sector firm and will include full service identity restoration support and victim recovery assistance, identity theft insurance, identity monitoring for minor children, continuing credit monitoring and fraud monitoring services beyond credit files. The protections will be provided for at least three years at no cost to the individuals, according to OPM.

They will also receive “educational materials and guidance” to help protect themselves against potential fraud. OPM said a call center will be opened to help answer questions for those affected by the hack.

Katherine Archuleta, who has been at the helm of OPM since November 2013, submitted her resignation 9 JUL. Her letter of resignation to the president stated that she believed it was best for her to step aside and allow new leadership that will enable the agency to move beyond the current challenges and allow the employees at OPM to continue their important work. Beth Cobert, OPM's deputy director for management, will take over Archuleta's job. [Source: GovExec.com | Eric Katz | July 09, 2015 ++]

OPM Data Breach Update 2 ► Lifetime Credit Monitoring on the Table

The Obama administration has not yet selected a contractor to provide a “suite of services” to the 21.5 million individuals affected by the hack of background investigation details maintained by the Office of Personnel Management, nor does it know how much the services will cost.

White House Press Secretary Josh Earnest said at a 10 JUL briefing OPM was “working diligently” to identify exactly who was impacted by the breach of data, which included Social Security numbers; health, criminal and financial histories; information about family and personal relationships; and other personal details. When OPM announced the specifics of the background investigation hack on 9 JUL, it said those affected would receive notifications “in the coming weeks.”

Once the individuals are identified, “there will be an effort after that to locate those individuals and communicate to them the kind of risk that they face,” Earnest said. He added OPM is “going to work quickly” to select a contractor, but noted the importance of choosing one capable of the enormity of the task ahead. He said there is no deadline for making the selection, but OPM is “working very aggressively” to do it as quickly as possible. OPM awarded Winvale -- which in turn provided CSID’s services -- with the more than \$20 million contract to give credit monitoring and identity theft insurance to victims of the initial hack of OPM personnel files, which included 4.2 million current and former federal employees.

The related, but separate, data breach affected five times that number, and OPM has said it will provide a more comprehensive package of benefits to those individuals, making the likely value of the new contract far greater than that of the original. That more comprehensive package will include full service identity restoration support and victim recovery assistance, identity theft insurance, identity monitoring for minor children, continuing credit monitoring and fraud monitoring services beyond credit files. Whereas OPM offered just 18 months of protections to the former and current federal workers affected in the initial hack, it will provide “at least” three years of services to those impacted by the second breach.

CSID received significant criticism for its handling of notifications and customer service for those affected by the initial hack, with federal employee groups complaining of long wait times and emails coming from a seemingly untrustworthy source rather than a dot gov address. “It is not yet clear how OPM can handle this massive increase, when they were already struggling with the initial 4.2 million,” said William Dougan, president of the National Federation of Federal Employees. Asked how the new contractor will deal with far larger volume of inquiries and customers, the White House’s Earnest said victims should refer to OPM’s Web portal, opm.gov/cybersecurity. The White House would not rule out offering lifetime credit monitoring to federal employees or possibly everyone affected by the hacks. Earnest said the administration will review a proposal put forward in the Senate to that effect. Prior to her resignation, outgoing OPM Director Katherine Archuleta said OPM would put forward a proposal to give all federal employees free credit and identity theft monitoring “to ensure their personal information is always protected.”

Should OPM need additional funding to implement the necessary changes in response to the hack, as Archuleta previously indicated, Earnest said he expects the appropriation to be greeted with the same “passion and zeal” with which lawmakers initially responded to news of the hack. “If that requires additional funding, we will certainly look forward to the strong bipartisan

support it should have,” Earnest said. He also said the recent targeting of federal employees by U.S. adversaries should not discourage potential applicants from federal service, as the breaches are simply part of a new reality. The government will never claim its work on cybersecurity is finished, he said, as the threats are “ever evolving.” [Source: GovExec.com | Eric Katz | July 10, 2015 ++]

Robert Hurt Introduces Bill to Conduct Independent Audits of the VA

Congressman Robert Hurt (R-Virginia) recently introduced the Veterans Administration Legislative and Objective Review (VALOR) Act, H.R.3122, along with Congressman Tim Walz (D-Minnesota), which requires the Department of Veterans Affairs (VA) to undergo a biannual, independent audit by a non-governmental entity.

Congressman Hurt said:

“In April of last year, we learned of the unacceptable actions by employees at Veterans Administration hospitals around the nation that resulted in tragic outcomes for those who have sacrificed to protect our nation’s freedoms. In the wake of these reports, I heard an outpouring of concern from many local veterans – those most directly affected by the VA’s incompetence – seeking real solutions to these urgent problems. A group of Charlottesville-area veterans suggested that changing the culture of the VA and reforming its practices could only be achieved by applying rigorous third-party scrutiny to the agency’s management and operations on a regular basis. The VALOR Act embodies this concept for reform by requiring a regularly-occurring, independent audit of the VA, which will bring about real change and greater opportunities for congressional oversight of the agency.

“We cannot fully repair the problems with the care our veterans receive without a thorough understanding of these problems and a continuing commitment to resolving them. Given the VA’s gross mismanagement and culture of bureaucracy and paper-pushing, we cannot trust that the agency’s internal reviews are sufficient. Though the Veterans Choice Act was a good step toward assessing the breadth of the VA’s problems, it was only the first step in a long journey to overhauling the VA and ensuring that we never hear stories like these ever again.

The VALOR Act takes a real, meaningful stride toward delivering the quality care our veterans have earned. I thank Congressman Walz for his support as we work to move this bill through the legislative process. I remain committed to ensuring veterans receive a level of care and service worthy of the tremendous sacrifices they have made to preserve our American way of life.”

Congressman Tim Walz (D-Minnesota) said: “This commonsense bill will aid in our efforts to reform the VA and ensure veterans across the country receive the best care possible. I urge my colleagues to support this measured, bipartisan legislation.”

Charlottesville resident Colonel Victor Peña, Retired U.S. Army and Military Officer Association of America Officer, said: “Even after the passage of the Veterans Access, Choice and Accountability Act of 2014, a year ago, the Veterans Administration continues to make headlines detailing its dysfunctional and mismanaged service to veterans. Thank you Congressman Hurt for taking on the challenge of fixing this troubled agency. The audits proposed in the VALOR Act of 2015 should go a long way to remediate many of the problems in the VA.”