

YOUR MISSION • YOUR VOICE

FRA *today*

DIABETES



1 in 12 Americans
has diabetes.

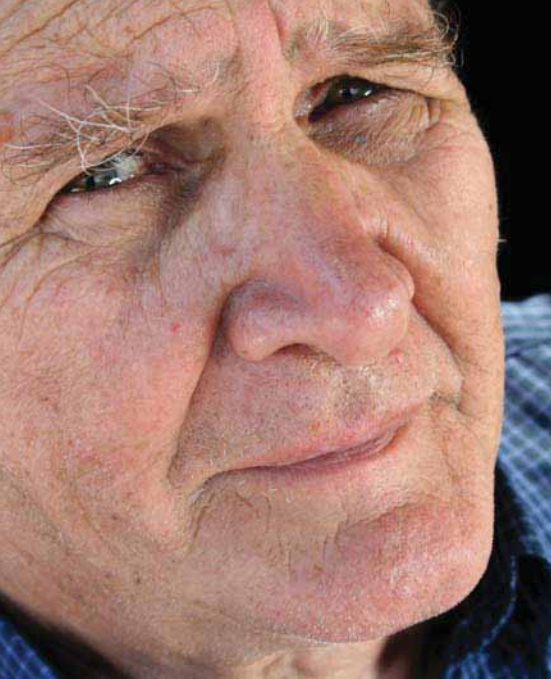
Know the warning signs and
what you can do about it. *p.18*

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MESOTHELIOMA



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have to fight
this alone.**

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Featured

18 DIABETES

It's the start of a new year and there's no better time to resolve to lead a healthier lifestyle. Taking care of yourself is important for everyone, but particularly so for those who are at risk for, or suffer from, diabetes.

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LOYALTY, PROTECTION AND SERVICE

FRA IS A CONGRESSIONALLY CHARTERED, NON-PROFIT ORGANIZATION ADVOCATING FOR CURRENT AND FORMER ENLISTED MEMBERS OF THE U.S. NAVY, MARINE CORPS AND COAST GUARD ON CAPITOL HILL. FOR MORE INFORMATION ON THE BENEFITS OF MEMBERSHIP, PLEASE VISIT WWW.FRA.ORG OR CALL 800-FRA-1924.

ON THE COVER

The incidence of heart disease, as well as the number of cancer- and stroke-related deaths, have declined over the past 20 years, but diabetes is more prevalent than ever before.

FRA Facts – Did you know??



Eileen Murphy

- FRA spends at least 85 cents out of every dollar to directly support services for our members.
- FRA shipmates advanced FRA's legislative efforts by sending more than 112,000 letters to the 112th Congress through the FRA Action Center at www.fra.org.
- FRA has testified before the House and Senate Veterans Affairs' Committees every year since its federal charter was approved in 1996.
- An average of five new FRA Veteran Service Officers (VSOs) have been accredited each year since delegates approved an official VSO policy at the 82nd FRA National Convention.
- The VA lists 759 accredited VSOs affiliated with FRA.
- In the past year, FRA shipmates have volunteered in 58 VA facilities.
- In the first three quarters of 2012, 245 FRA volunteers contributed 26,962 service hours at VA facilities, averaging more than 110 hours per volunteer!
- In the past year, 137 shipmates volunteered at the Fresno-Central California VA Health Care System, contributing a total of 15,316 hours at the facility.
- Every member of Congress receives a copy of *FRA Today* each month.
- Nearly 95 percent of FRA readers say they read at least three out of every four issues of *FRA Today*.
- The number of subscribers to FRA *NewsBytes*, FRA's free weekly e-mail update on legislative matter that impact your military and veterans' benefits, has increased by more than 162% since 2010.
- *NewsBytes* subscribers are 80 percent more likely to retain their FRA membership.
- Shipmates and Auxiliary members can subscribe to *NewsBytes* by e-mailing requests to newsbytes@fra.org, and several branches have voted to automatically subscribe all their members to *NewsBytes*.
- A recorded version of *NewsBytes* is available every Friday afternoon at 1-800-FRA-1924, ext. 112.

Corrections

The report of LA FRA elected officers was in error in the December issue of *FRA Today* (page 14). LA FRA elected Diane Hoover as National President and Carolyn Whitaker as National Vice President. Ronalee S. Klase was elected to serve a three-year term as National Treasurer and Karen Smith continues in the second of a three-year term as National Financial Secretary. We regret any confusion this may have caused.

The cover photo of FRA National President Mark Kilgore was taken by the Association's National Veterans Service Officer Chris Slawinski. We apologize for the omission.

Eileen Murphy is the Director of Marketing and Communications and serves as the Managing Editor of *FRA Today*. Please contact her at eileen@fra.org.

FRA today

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VOLUME 92 NUMBER 1





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THESE ARE CHALLENGING TIMES. Every day, young men and women risk their lives to protect and defend our Nation. But all too often, they leave the military with skills not needed in the public sector workforce, or have sustained injuries to prevent them from pursuing the career for which they were trained. This is reflected in the troubling high unemployment rate among veterans.

FRA believes that educating our service members and veterans is an important duty. The Association has been an outspoken advocate for enhanced education benefits for many years. For example, FRA was instrumental in ensuring the new Post-9/11 GI Bill benefit was available to military personnel who previously had no education benefits, and allowed transferability of benefits to family members of career service members.

The FRA Education Foundation's scholarship program has also been helping deserving students reach their educational and professional goals, presenting annual awards of up to \$5,000 to individuals pursuing college and graduate degrees. Thanks to the generosity of our members, legacy gifts and corporate sponsors, the scope of the program has grown substantially since 2001, increasing the number of recipients by more than 50 percent and boosting the monetary value of the awards by more than 260 percent. Just since 2001, the FRA scholarship program has provided 286 scholarships totaling \$1,177,564. And

this year, for the first time, the FRA Education Foundation is an approved CFC charity (**Code #80236**).

We recognize more is needed to ensure that our Nation's military, and their families, are afforded an education that will benefit their future — and that of our country. The FRA Education Foundation makes scholarships available to eligible* full-time students who are U.S. citizens attending accredited colleges and universities in the United States.

Application Process

The applications are posted online at www.fra.org/foundation. FRA Education Foundation makes scholarship applications available from September 1st thru April 15th each year for the following school year. Scholarship applications must be postmarked no later than April 15. All applicants are considered for any scholarship the FRA is able to offer during a specific year, provided the applicant meets the eligibility requirement for the award (often based on the desires of the donor). Scholarship recipients are notified in writing and by telephone, and only applicants who have been selected to receive a scholarship are notified.

Questions about FRA Education Foundation scholarships should be sent to Scholarship Coordinator, Marilyn Smith, at scholars@fra.org or call 1-800-FRA-1924, extension 107.



Other Scholarship Programs

The Walter E. Beall Scholarship

FRA's Past Regional Presidents administer a scholarship for students who aspire to further their education in aeronautical engineering or pursue aviation-oriented degrees. These scholarships are funded by the estate of Past Regional President Southeast Walter Beall.

Applications for the Walter E. Beall Scholarships are available by writing to: Walter E. Beall Scholarship, 4911 Fennell Court, Suffolk, VA 23435, Attn: W. R. Holcombe. Requests can also be submitted via e-mail to prp.inc2@verizon.net. Applications for the Beall Scholarship must be sent to the above address and be postmarked no later than April 15th. Visit www.walterbeallscholarship.org for additional information.

The FRA Auxiliary Scholarships

The Auxiliary of the Fleet Reserve Association also sponsors an annual scholarship program. Applications for FRA scholarships can also be used to apply for Auxiliary scholarships; however, applicants who wish to be considered for both FRA and Auxiliary awards must submit separate application packages. (Applicants should simply check the FRA or Auxiliary scholarship box on Part B of the application and address the package to the appropriate organization. Never check both boxes or your application may be disqualified.) Visit www.la-fra.org for more information.

*Navy, Marine Corps and Coast Guard personnel and their families are eligible for FRA Education Foundation scholarships.



Joe Barnes

The Steady Drumbeat to Cut Benefits Continues

AS PRESSURE GROWS TO find alternatives to the looming “fiscal cliff” and mandatory federal budget cuts (sequestration) over the next decade beginning in 2013, the list of commissions and reports citing military pay and benefits as options to be cut to help reduce government spending continues to grow.

These include the recently published “Costs of Military Pay and Benefits in the Defense Budget,” by the Congressional Budget Office (CBO); Senator (and M.D.) Tom Coburn’s November 2012 “Department of Everything” (subtitled, Department of Defense Spending That Has Little to Do With National Security); and another CBO publication entitled “Choices for Deficit Reduction” that proposes higher TRICARE and pharmacy co-pays as budget saving options. These and other publications focus on ways to slash government spending and target — at least in part — TRICARE and other military benefit programs and associated costs.

Print publications are also weighing in on their editorial and news pages. These include the venerable *Washington Post* which recently published an editorial supporting the Obama Administration’s plan to drastically increase military retiree health care fees. The *Post* stated, “Obviously those who serve or served their country deserve generous health benefits. But TRICARE goes well beyond that. ... For retirees under the age of 65, many of whom are in the work force and eligible for employer-provided benefits, TRICARE costs at most \$1,000 per year out of pocket — less than a fifth of civilian plans, according to the Congressional Budget Office. ... At the moment, however, debt is one of the main threats to future U.S. national

strength and security, and it makes no sense to deal with it in ways that would also undermine military readiness.”

So funding hard-earned benefits associated with past commitments to those who serve careers in uniform is a threat to military readiness and a contributor to the debt crisis? FRA promptly sent an editorial response, which ironically was published on December 7, 2012, and reads as follows:

The Washington Post

The Washington Post
AN INDEPENDENT NEWSPAPER

EDITORIALS

FRIDAY, DECEMBER 7, 2012

LETTERS TO THE EDITOR

✉ letters@washpost.com

What price military benefits?

Regarding the Dec. 3 editorial “Time to rein in Tricare”:

Personnel expenditures are directly associated with defense readiness, and renegeing on past commitments by imposing drastic health-care fee hikes on military retirees will negatively affect recruiting and retention. Threats to also cut retirement benefits and other quality-of-life programs are major concerns within the active and reserve military communities and are viewed as devaluing military service.

The debt crisis is serious, but total defense spending as a percentage of gross domestic product is significantly below past wartime periods and is projected to go lower. And despite claims of rising health-care costs, in recent years the Defense Department has asked to shift unspent Defense Health Program funds to other areas.

Military retirees who are younger than 65 and are enrolled in Tricare Prime experienced a 13 percent increase in their enrollment fees last year, and these fees will increase annually based on inflation. Pharmacy co-pays will also increase in 2013.

Military service is unlike any other occupation. Roughly 1 percent of the population has volunteered to shoulder 100 percent of the responsibility for our national security. The benefits associated with this service have been earned through 20 or more years of arduous military service.

JOSEPH L. BARNES, Alexandria
The writer is national executive director of the Fleet Reserve Association.

Given the size of our national debt, the approaching end of the war in Afghanistan and other realities, the drumbeat to cut defense and other

spending is expected to continue into the foreseeable future. This is reflected in a *Navy Times* article, by Rick Maze, that examines pay and benefit programs addressed in the House and Senate versions of the pending FY 2013 National Defense Authorization Act. On the issue of DoD’s proposals to significantly increase TRICARE Prime enrollment fees for military retirees and establish new fees for Standard and TRICARE for Life beneficiaries — none of which are included in either of the House or Senate versions of the legislation — Maze writes, “There is no chance lawmakers will reverse course to allow the Pentagon fee hikes, but it could be a short-lived victory. Raising out of pocket expenses for TRICARE beneficiaries is certain to be discussed as an option in future government wide deficit-reduction efforts.”

In short, this battle is not going away and it will become significantly more difficult to protect and fund pay and benefits, particularly enhancements enacted since 2000. Please track what’s happening and weigh in with your U.S. Representative and Senators in the recently convened 113th Congress via the FRA Action Center at www.fra.org.

As always your strong and continuing support for FRA and the Association’s legislative agenda is important and essential to protecting TRICARE, retirement benefits and other essential benefits and quality-of-life programs.

Joe Barnes is FRA’s National Executive Director and Chairman of the National Committee on Legislative Service. A member of Navy Department Branch 181, he is also an advisor to the National Committees on Budget and Finance and Future Planning.

Geographic Limits on TRICARE Prime

Thank you for all the hard work you do on Capitol Hill, keeping us apprised of what is coming down the pike and the assistance for contacting our congressional leaders.

I read with interest the “TRICARE Prime Service Areas to be Reduced” article, as we live in Oregon and are using TRICARE Prime.

We are very concerned and unhappy about the loss of TRICARE Prime beginning on April 1, 2013. Please keep up the good work and let us know if there is anything we can do to stop the DoD plan to eliminate TRICARE Prime for retirees [in our area].

Bill Phillips

FRA Response: *Although the TRICARE contracts have been signed and the changes are, indeed, slated to take effect in April, the Senate approved an amendment to the FY 2013 National Defense Authorization requiring a report on the termination of TRICARE Prime health care coverage in certain states. The amendment was sponsored by Nevada Senator Dean Heller, whose state includes many military retirees and their families who are impacted by the termination.*

Heller is asking House and Senate leaders to ensure the conference committee include his amendment in the final bill, which would require the report be issued within 120 days of enactment and “identify areas where TRICARE Prime will no longer be available, estimate the increase in out-of-pocket expenses to affected beneficiaries, and estimate savings to the Department as a result of such changes.” Furthermore, the report must describe how the Department will continue to assess the impact on access to care for beneficiaries who can no longer use TRICARE Prime and provide a report on the effects of this change on these families.

Diet COLA

What a farce!! Has anybody actually gone out and bought a “basket of goods” in the past year?! A loaf of bread is four dollars; hamburger is four dollars or more a pound; and eggs are three times as much this last week as they were the week before! Gasoline alone has gone up over 30 percent in the past three months!

The government decided that food, clothes and gasoline were too expensive, so they eliminated those items from the [Consumer Price Index calculations].

It’s come down to the point that we decide whether to buy food or gasoline or medicine.



Donald L. Kimble

Kilroy was in Quincy

I enjoyed your article about Kilroy. I’ve read these stories before, but still enjoy them. I must correct the location of the Fore River Shipyard, though. It was in Quincy, Mass., and not Halifax.

Dave Gregory



FRA Response: *You’re absolutely right, shipmate, and among several who pointed out our error. Our apologies for the confusion!*

Ship Naming

In light of the November sentencing of Jared Lee Loughner, I respectfully call upon the officers of FRA to urge the Secretary of the Navy to follow through on the Navy’s intent to name a ship in honor of Congresswoman Gabrielle Giffords. Defying the threat of her district being overlaid by a gun’s target sights on a map, she courageously continued to hold her meet-and-greet personal conversations with her constituents in mall parking lots and other venues. She was nearly murdered and was left with permanent brain damage by [Loughner’s] deadly assault.

FRA officers should also strongly support the naming of a Navy vessel in honor of Cesar Chavez, who answered the call to the colors in the Navy as a member of the Greatest Generation. After the war, Chavez fought the good fight in another great struggle, braving threats of violence, to better the lives of impoverished migrant laborers doing back-breaking stoop labor in the country’s farm fields to put produce on the tables of American families.

FRA should support the Navy’s plans to honor these two heroes.

Alexander Beattie



Submissions Send *Shipmate Forum* letters to Editor, *FRA Today*, 125 N. West St. Alexandria, VA 22314. E-mail submissions may be sent to fratoday@fra.org. Please include “Shipmate Forum” in the subject line. FRA reserves the right to select and edit letters for publication. Letters published in *Shipmate Forum* reflect the opinions and views of FRA members. They do not necessarily reflect the official position of FRA as a whole. FRA is not responsible for the accuracy of letter content.

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Grassroots Member Involvement Helps FRA Advocacy



John Davis

AS FRA TODAY GOES to press, the fate of the FY 2013 Defense Authorization bills (H.R. 4310/S. 3254) and separate legislation addressing the impact of sequestration and the so-called “Doc Fix” have yet to be resolved in the “Lame Duck” session of Congress.

The 112th Congress presented numerous challenges to FRA’s legislative efforts and shipmates responded with extraordinary grassroots involvement, more than doubling usage of FRA’s online Action Center at www.fra.org. More than 110,000 messages were sent to Capitol Hill during

the 112th Congress, which ended in December. Shipmates who share their concerns and perspectives with their elected officials enhance the advocacy efforts of the FRA Legislative Team and help advance the Association’s legislative agenda.

Bills that were not passed during the 112th Congress must be re-introduced in the new 113th Congress, which convenes on January 3, 2013. (See the list of FRA’s legislative accomplishments for 2012 on page 14.)

Senate Amends and Passes FY 2013 NDAA

The Senate debated and voted on numerous amendments to the Senate version of the National Defense Authorization Act (NDAA – S. 3254) in early December and then passed the bill in a 98-0 vote in early December.

An amendment to limit pharmacy co-pay increases in 2013 and link future adjustments to retiree cost-of-living increases as an alternative to significantly higher copays proposed by the Department of Defense (DoD) was blocked by Arizona Senator John McCain (Ariz.), who chairs the Senate Armed Services Committee, and Senator Tom Coburn (Okla.). The amendment, sponsored by Senator Jack Reed (R.I.), mirrored a provision in the House-approved version of the NDAA (H.R. 4310) that would authorize lower co-pays funded by savings associated with a multi-year demonstration project that would require TRICARE-for-Life beneficiaries to use the mail-order pharmacy option for at least one year. The battle over pharmacy co-pays shifted to the conference committee that is meeting at press time to resolve differences in the House and Senate versions of the bill.

A concurrent receipt amendment, sponsored by Majority Leader Harry Reid (Nev.), was modified and adopted to only fix the “glitch” that causes certain beneficiaries to get their disability

rating increased while actually reducing their monetary benefits.

Other adopted amendments of importance to FRA members include:

- SA 2969 (Sen. Dean Heller-Nev.) requires DoD to do a report on the future availability of TRICARE Prime throughout the United States.
- SA 3030 (Sen. Frank Lautenberg-N.J.) is a Sense of the Senate stating retiree health care benefits have been earned through twenty or more years of arduous military service.
- SA 3291 (Sen. Mark Pryor-Ark.) requires states to ensure training received by a veteran while on active duty is considered when granting certain certifications and licenses.
- SA 2960 (Sen. Ron Wyden-Ore.) requires DoD to report on efforts to ease re-integration into civilian life for Reserve Component troops after mobilization.
- SA 3099 (Sen. Patty Murray-Wash.) improves DoD suicide prevention programs and expands VA mental health counseling for families of veterans.
- SA 3302 (Sen. Jack Reed-R.I.) strengthens predatory lending protections for active duty service members.

- SA 3158 (Sen. John Cornyn-Texas) requires the VA to provide Congress with a plan to reduce the VA disability claims backlog.
- SA 3058 (Kristin Gillibrand-N.Y.) expands TRICARE coverage for health services for military children with autism.
- SA 3144 (Sen. Jim Webb-Va.) makes it a crime for someone to lie about having served in the military or receiving decorations with the intent of obtaining any tangible benefit or personal gain.
- SA 2948 (Sen. Jim Webb-Va.) extends increased BAH rates until Jan. 1, 2014.
- SA 2949 (Sen. Jim Webb-Va.) extends active duty leave rollover until September 30, 2015.

Many of the 381 floor amendments were not called for a vote. The Senate has already appointed members for the conference committee, which could complete its work as early as next week. FRA is represented on a special letter to conferees from the entire Military Coalition addressing priority issues to be resolved during conference deliberations, which was delivered to Capitol Hill shortly after the Senate vote.

ACTIVE DUTY/RESERVE ISSUES**SASC Approves Military Appointments**

The Senate Armed Services Committee recently voted to favorably report out 285 pending military nominations in the Army, Navy, Air Force and Marine Corps, including the nomination of General Joseph F. Dunford, Jr., USMC to be Commander, International Security Assistance Force and Commander, US Forces Afghanistan. All nominations were immediately reported to the full Senate, since presidential appointments require Senate ratification.

House Passes Two-Year USCG Authorization

The House passed an amended version of the FY 2013 and FY 2014 Coast Guard Authorization Act (H.R. 2838), sponsored by Rep. Frank A. LoBiondo (N.J.), chairman of the House Coast Guard and Maritime Transportation Subcommittee. This bill was initially passed in the House in November 2011 and the Senate adopted a revised version in September 2012. The House amended the bill further in December, passed it by voice vote and sent it back to the Senate for consideration.

The bill improves Coast Guard parity with DoD programs and benefits — a top legislative priority for FRA. The legislation authorizes an end strength of 47,000 active duty personnel, and a budget of \$8.6 billion for FY 2013 and \$8.7 billion for FY 2014. The bill also mandates that the Commandant provide the House and Senate Transportation Committees a report on service member housing no later than 30 days after the enactment of this bill. The legislation also reauthorizes Temporary Early Retirement Authority (TERA) until FY 2018, limiting the number of TERA retirements for commissioned officers to less than 200 and to less than 300 for enlisted members.



U.S. Coast Guard photo by Petty Officer 2nd Class Tim Kulkewski.

The HMS Bounty, a 180-foot sailboat, is shown submerged in the Atlantic Ocean during Hurricane Sandy approximately 90 miles southeast of Hatteras, N.C., Monday, Oct. 29, 2012. Of the 16-person crew, the Coast Guard rescued 14 and recovered a woman. The captain of the vessel was never found.

Big Increase in Action Center Usage

The 112th Congress (2011–2012) was a banner year for shipmates using the FRA Action center (www.fra.org), generating 111,824 messages to elected officials. Since the launch of the program in the 109th Congress (2005–2006), usage of the Action Center has increased by more than 550 percent. This advocacy service allows visitors to send prewritten messages, which can also be edited, to their members of Congress, urging their support or opposition to legislative proposals that impact current and former service personnel. The FRA Legislative Team thanks shipmates for their increased usage of the Action Center, which compliments and enhances FRA's advocacy efforts.

Bills not enacted into law during the 112th Congress must be re-introduced in the 113th Congress, which convenes on January 3, 2013. Visit the FRA Action Center regularly to weigh in on new measures that impact you and your fellow shipmates.

TRICARE in the Philippines

TRICARE Management Activity (TMA) has developed a demonstration program to address the health-care concerns of military retirees who reside in the Philippines, many of whom are FRA shipmates. FRA has been working closely with TMA to share the challenges facing TRICARE beneficiaries and will be tracking this pilot program in the coming months. See page 12 for details.

VETERANS ISSUES**FRA Commemorates 71st Anniversary of Pearl Harbor Attacks**

FRA National President Mark Kilgore was in Hawaii last month to attend events honoring those lost and injured in the attacks on Pearl Harbor. National Vice President Virgil Courneya attended a commemorative event sponsored by FRA Branch 182 at Walter Reed National Military Medical Center in Bethesda, Md., and multiple other FRA branches around the country also hosted events to mark the anniversary.

FRA played a significant role in raising funds to construct the USS Arizona Memorial and visitor centers at Pearl Harbor. To learn more, visit <http://www.fra.org/PearlHarbor>

Veterans COLA Bill Becomes Law

The Senate passed the "Veterans Cost-of-Living-Adjustment Act" (H.R. 4114) which authorizes a cost-of-living increase in benefits for veterans with service-related disabilities and their survivors. The House passed the bill, sponsored by Rep. Jon Runyan (N.J.), in early July and President Obama signed the bill into law. The measure authorizes a 1.7-percent increase in benefits for 3.9 million veterans and their families. The change took effect on December 1, 2012, and is reflected in January benefit checks. (Note: The military retiree COLA does not require annual authorizing legislation.)

RETIREE ISSUES**CBO Report: Cut Military Pay and Benefits**

The Congressional Budget Office (CBO) recently released a "Costs of Military Pay and Benefits in the Defense Budget" report that suggests reducing military pay and benefits may be key to cutting total Defense spending. Since DoD has had no difficulty in recruiting and retaining service members in recent years, the report contends the cuts would have little negative impact and, if problems develop, CBO suggests increasing enlistment and re-enlistment bonuses, which would provide additional long-term savings since such bonuses are excluded from retired-pay calculations.

The Administration's long-term plan to reduce annual active duty pay raises beginning in FY 2015 is cited in the publication and, consistent with DoD's budget request for 2013, CBO recommends shifting more health care costs to military retirees and their families. The report further suggests budget savings by replacing the current military retirement benefit with a pre-tax Thrift Savings Plan to, in effect, "civilianize" benefits for future retirees.

The full report is available at www.cbo.gov, along with another recent deficit-reduction report entitled "Choices for Deficit Reduction." There are significant threats to compensation, health care and benefit programs and FRA is closely monitoring the legislative process for threats to pay and other benefits.

DFAS Tax Statements for 2012

The Defense Finance and Accounting Service (DFAS) announced that retiree and annuitants' 2012 tax statements are being sent by mail through January 2013. Most of the 1099-R forms are available earlier via the online myPay pay account management system (<https://mypay.dfas.mil/mypay.aspx>) for retired military members and annuitants.

Bad addresses create significant delays in receiving end-of-year documents and maintaining accurate contact information is important. According to DFAS officials, incorrect address information is the top reason retirees or annuitants don't receive their 1099-Rs.

Individuals without active myPay accounts should call, mail or fax a written request to DFAS-Cleveland, and the processing of a change of address and reissuing a new 1099-R takes at least 30 days. Changes made via myPay accounts take effect in three to five business days, and a copy of their 1099-R can be printed directly from myPay.

For more information, visit the DFAS website at <http://www.dfas.mil/retiredmilitary.html> or call DFAS at 800-321-1080.

How to Outsmart a Millionaire

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I wasn't looking for trouble. I sat in a café, sipping my espresso and enjoying the quiet. Then it got noisy. Mr. Bigshot rolled up in a roaring high-performance Italian sports car, dropping attitude like his \$22,000 watch made it okay for him to be rude. That's when I decided to roll up my sleeves and teach him a lesson.

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TRICARE® Philippine Demonstration Project

Designated Demonstration Areas & Phases

The Philippine Demonstration is designed to offer high-quality health care for eligible TRICARE Standard beneficiaries who live in and receive care in designated demonstration areas of the Philippines.

A phased approach will be used to implement the Philippine Demonstration in the following locations. The initial phase of the demonstration will start on **January 1, 2013**.

Within these designated demonstration areas, TRICARE Standard beneficiaries will be required to see **Approved Demonstration Providers** who have agreed to comply with certain TRICARE requirements and business processes, in order to ensure they receive payment from TRICARE for their health care claims.

The current schedule of Phase I-III dates and locations follows:

Phased-in Approach By Designated Philippine Demonstration Area		
Phase I	January 1, 2013	Metro Manila; Angeles City, Pamanga; and Olangapo City, Zambales* Note: Metro Manila is defined as the metropolitan region encompassing the city of Manila and its surrounding areas in the Philippines. It is composed of 17 cities: the city of Manila, Caloocan, Las Piñas, Makati, Malabon, Mandaluyong, Marikina, Muntinlupa, Navotas, Pasay, Pasig, Parañaque, Quezon City, San Juan, Taguig, Valenzuela, and the Municipality of Pateros. * As of November 13, 2012, Orion, Bataan, has been removed from the Philippine Demonstration.
Phase II	January 1, 2014	General Trias, Cavite; Naic, Cavite; Bacoor, Cavite; Imus, Cavite; and Cavite City, Cavite
Phase III	July 1, 2014	Iloilo City, Iloilo

*Note: Only beneficiaries with physical mailing addresses in one of the designated demonstration areas can participate. **Retired Activities Office and Personal Post Office Boxes are not acceptable.***

The boundaries of each of the defined Phase I-III locations above are determined by the Philippines local government, which includes the barangays as listed on <http://www.dilg.gov.ph/cities.php>

Global 24 Network Services will closely monitor the Philippine Demonstration and keep you informed of implementation updates and enhancements as subsequent phases are implemented.

For Information & Assistance:

International SOS Assistance, Inc., the TRICARE Overseas Program Contractor, and its subcontractor Global 24 Network Services, administer the Philippine Demonstration. Please contact:

- Phone: +632-687-8656
- Toll-Free: +1-800-10-4562324*
- Fax: +632-687-8609
- Email: support@GLOBAL24NS.com

* Note: Toll-free lines only available to callers with PLDT service.
Toll-free lines may not be available for mobile phone carriers overseas.

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2012 FRA Legislative Achievements To Date

FRA MEASURES ITS LEGISLATIVE success during the past year based on the Association's extensive 2012 legislative agenda. The work of our Legislative Team extends well beyond key compensation, health care and benefit programs, and it should be noted that there are yet-to-be resolved bills pending on Capitol Hill at press time, including the FY 2013 Defense Authorization (S. 3254, H.R. 4310) legislation, the impact of sequestration (\$500-\$600 billion automatic spending cuts in Defense over 10 years), and initiatives to reform reimbursement rates for Medicare and TRICARE providers (the so-called "Doc Fix"). Despite this, the Association's Legislative Team can report the following legislative successes during the Second Session of the 112th Congress:

Expand Health Care Options

FRA was effective in stopping the Administration's plan to drastically increase TRICARE Prime enrollment fees and implement new fees for TRICARE Standard and TRICARE-for-Life (TFL) beneficiaries. DoD proposed higher TRICARE Prime enrollment fees for military retirees pegged to annual income (to a maximum of \$2,043 for a family); the establishment of a new enrollment fee for TRICARE Standard and Extra beneficiaries, with gradual increases through FY 2017; and a new tiered enrollment fee for TRICARE-for-Life (TFL) beneficiaries beginning in FY 2013 (also based on beneficiaries' income). These proposals sought to increase fees after FY 2017 based on health care inflation rates and none were included in either version of the FY 2013 NDAA. Another relevant achievement was a House-passed plan authorizing significantly lower pharmacy copays for military retirees than fees proposed by DoD. The plan includes a multi-year demonstration requiring TFL beneficiaries to utilize home delivery for at least one year.

As referenced on page 8, FRA strongly opposes a provision in Senate Defense Authorization bill that would authorize the more-costly DoD pharmacy plan tied to health care inflation. Also noteworthy is the House plan linking future adjustments to the same percentage as cost-of-living adjustment (COLA) increases for military retired pay. Other provisions of the Senate Defense bill are also listed on page 8.

Protect Personnel Programs

Another success is a 1.7-percent pay raise for active duty and Reserve personnel for FY 2013 that keeps pace with civilian sector pay increases as measured by the Employment Cost Index (ECI), and legislation (S. 3322) that strengthens enforcement provisions for the Servicemembers Civil Relief Act (SCRA) that was approved by the Senate Veterans Affairs Committee.

Other Senate-approved NDAA provisions would require DoD to report on its efforts to ease re-integration into civilian life for Reserve Component troops after mobilization, extend higher BAH rates, allow active duty personnel to rollover unused leave, and improve predatory lending protections.

FRA strongly advocated for enactment of the U.S. Coast Guard Authorization legislation for FY 2013 and 2014, which awaits Senate approval of a recently adopted House amendment.

Veterans' Issues

Achievements in the veterans' arena included the enactment of legislation (H.R. 1627) authorizing the Department of Veterans' Affairs (VA) to provide hospital care and medical services for certain illnesses and conditions for veterans and family members exposed to contaminated water while stationed at Camp Lejeune, N.C., from 1957 to 1987.

Veterans' employment legislation included the VOW to Hire Heroes Act (H.R. 674) that provides job training, mandatory Transition Assistance Program (TAP), and tax credits for employers to hire veterans. (This measure was enacted in November 2011 and the Veterans Retraining Assistance Program, or VRAP, was implemented in July 2012.) Also enacted was the Military Commercial Drivers License Act (S. 3624) that requires the U.S. Department of Transportation to accelerate licensing procedures to assist veterans acquiring commercial driver's licenses.

2013 Senate NDAA amendments also require states to ensure service members' training is taken into consideration when granting certain certifications and licenses, and expand VA mental health counseling for veterans families.

Safeguard Retiree Benefits

Another achievement is a modified amendment to the Senate-approved NDAA, sponsored by Senate Majority Leader Harry Reid (Nev.), that would fix a concurrent-receipt glitch that causes combat-disabled beneficiaries' benefits to be reduced even though their disability rating is increased.

Strong FRA opposition to a BRAC-like commission to cut retirement benefits also helped stop the proposal from being included in the House version of the 2013 NDAA.

The Association is working to ensure that a similar provision is not part of the final 2013 Defense bill since the commission is included in the Senate version of the bill.

The FRA Legislative team is Joe Barnes, National Executive Director; John Davis, Director of Legislative Programs; Bob Washington, Health Care Advisor and Outreach Manager; Chris Slawinski, National Veterans Service Officer and Ed Dockery, Assistant Director of Legislative Programs.

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Penny Collins

Planning for 2013

IN 2012 WE PLANNED a monthly list of topics of interest for the Membership Matters column. They included training, recruiting awards, branch leadership, setting goals and other topics related to recruiting and retaining FRA members. Many shipmates contributed to these articles, sharing their suggestions and insights for improving our organization and strengthening our membership base.

As we learned from these columns, FRA shipmates are participating in some tremendous outreach and community service projects that highlight our organization's great work and project a positive image of the Association to prospective members. We hope you will share your ideas and perspectives on the following topics and we'll do our best to feature as many of your comments as possible in future issues of *FRA Today*. You can send your submissions to: Membership Matters, FRA, 125 N. West Street, Alexandria, VA 22314 or by e-mail to Penny@fra.org.

If sending photos, please e-mail high-resolution (300 dpi or better) jpeg files, which are the best quality for publication.

February

www.fra.org. There is a wealth of information and a variety of resources available at the FRA website. We'd love to hear how shipmates and branches are using the website to advance recruiting and retention efforts, as well as advancing FRA's legislative agenda through use of the FRA Action Center. (The Action Center can be a great recruiting tool, too!)

March

History of the FRA. Shipmates who understand the Association's origins are well-equipped to talk about FRA's mission, goals and objectives with

prospective members. How are you incorporating FRA's legacy of Loyalty, Protection and Service in your recruiting and retention efforts?

April

Ready, Set, Go. As the new membership year begins, branches should set goals for recruiting and retaining members. Who is eligible to join the FRA? What projects and programs have been developed to increase membership? And what are you doing now to position yourself, your shipmates and/or your branch to be competitive for FRA recruiting awards?

May

Bolstering Attendance. Shipmates who are actively engaged in Association events and business are more likely to retain their membership. What does your branch do to attract shipmates to meetings and events? Tell us about your successes and best practices for improving attendance and involvement.

June

Youth Activities. School's out and the young people in your community have time on their hands. Give us your ideas on how to engage and serve the youth in your area — either individually or as part of groups like NJROTC units or Scout troops.

July

Partnering with other organizations. Sometimes projects are too large or too daunting to take on for a small group, but are absolutely manageable with more volunteers. Let us know how partnering with other organizations has helped advance FRA in your community.

August

FRA — the Next Generation. Even if you don't live near a military

installation, there are ways you can support those who are serving our country. How do you relate to the next generation of FRA members? Tell us about ways you connect with today's active duty and Reserve personnel and their families.

September

Leadership Principles. Being a leader requires a variety of skills and attributes: assertiveness, creativity, organizational skills and the ability to motivate others. Share your stories about branch leaders who've led by example, made a positive impact on the Association and how they mentored you and other shipmates.

October

Retaining Current Members. Extensive research shows that improving FRA's retention rate would dramatically strengthen our organization. What tools do you use to retain members and get them more involved in FRA activities?

November

Supporting Veterans: FRA is a congressionally chartered Veterans Service Organization and works to advance legislative initiatives that benefit the veterans' community as a whole. Additionally, many shipmates and branches participate in projects that are making a difference for individual veterans in their towns and cities. Tell us about your efforts.

December

End-of-the-Year Wrap Up. We'll highlight shipmates and branches who've really shined during the year in making the FRA the best it can be!

Penny Collins is FRA's Director of Membership Development and a member of FRA Branch 24 in Annapolis, Md. She can be reached at penny@fra.org.

DIABETES



There is some great news on the health front these days: Heart disease, as well as cancer- and stroke-related deaths, have declined in the past two decades. But one common health concern is on the rise: **Diabetes.**

According to the U.S. Centers for Disease Control and Prevention (CDC), the number of Americans with diabetes has tripled in the past 30 years and there are an estimated 25.8 million Americans who live with diabetes and the associated risk of complications.

Early detection and treatment are critical in managing the disease and can decrease the chance of developing serious health problems. A healthy lifestyle is also helpful in the management of the disease and, in many cases, can prevent or delay the onset of Type 2 diabetes.

Defining Diabetes

Not all types of diabetes are alike, but they all relate to how the body produces and/or uses insulin, the hormone needed to convert sugar, starches and other foods into the energy humans need to function. When the body doesn't produce or use insulin properly, it can result in serious health problems, the most common of which is diabetes — a serious and potentially deadly disease. Without proper treatment and management, it can cause blindness, kidney failure and neuropathy. Diabetes causes more deaths each year than breast cancer and AIDS combined, and two out of three people diagnosed with diabetes die from heart disease or stroke.

The American Diabetes Association (ADA) describes it this way: "When you eat food, the body breaks down all of the sugars and starches into glucose, which is the basic fuel for the cells in the body. Insulin takes the sugar from the blood into the cells. [Without insulin, the glucose] builds up in the blood instead of going to the cells, and it can lead to diabetes [and related] complications."

When glucose builds up, blood glucose (or blood sugar) levels rise and the body's cells become starved of energy they need. High blood glucose damages nerves and blood vessels, which in turn leads to severe health problems, such as heart and kidney disease, stroke, blindness and the need for amputation.

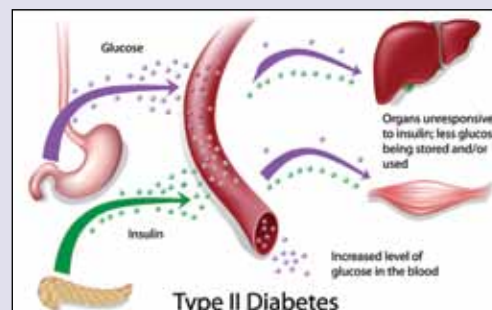
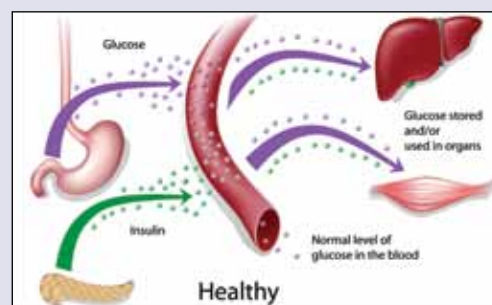
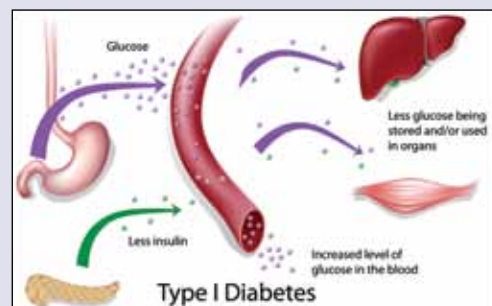
People with diabetes may also be more susceptible to other diseases, depression and a lack of mobility with advancing age.

The most common form of the disease is Type 2 diabetes, which results when the pancreas doesn't produce enough insulin and the cells in the body's muscle, fat and liver don't process the insulin effectively. Millions of Americans are affected by this form of the disease and there are many more who may be unaware they have it. Type 2 diabetes is often undetected and undiagnosed because symptoms, such as blurred vision or cuts and bruises that are slow to heal, seem so harmless.

This article will focus on the prevention and treatment of Type 2 diabetes, but it's important to understand how it differs from the other forms of the disease. Type 1 diabetes, formerly referred to as juvenile-onset diabetes, is an autoimmune disease and results when the insulin-producing cells in the pancreas stop producing insulin. Only about five percent of people with diabetes have this form of the disease, which is manageable with insulin therapy and other treatments. Gestational diabetes occurs during pregnancy and doesn't mean the mother had diabetes before she got pregnant or that she'll have it after giving birth. Women who experience gestational diabetes need to follow their doctor's advice regarding glucose levels during pregnancy to ensure mother and child remain healthy.

Diagnosing Type 2 Diabetes

Because the symptoms aren't painful or may seem rather benign, many people don't know they have diabetes. Symptoms include frequent urination, unusual thirst, extreme hunger, unusual weight loss, extreme fatigue, frequent infections, blurred vision, tingling or numbness in hands or feet, and cuts and bruises that heal slowly.



If you're having any symptoms of diabetes, see your doctor. Diabetes is diagnosed based upon the results of specific blood tests, in conjunction with a physical exam, medical history and the presence/absence of symptoms. While glucose measuring devices, such as at-home finger-stick devices, can offer a quick indication of blood glucose levels, lab analysis is required to obtain an accurate diabetes diagnosis. Elevated glucose levels alone do not necessarily mean the patient has diabetes. High blood sugar can result from some medications (such as steroids and certain diuretics) or can be a temporary problem for someone with an illness, but will return to normal when the illness has been resolved. Elevated glucose can mean prediabetes and action at this point may delay or prevent the onset of Type 2 diabetes.

According to the National Institutes of Health Diabetes Information Clearinghouse (www.diabetes.niddk.nih.gov), prediabetes is a condition in which blood glucose levels are higher than normal, but not high enough to be diagnosed as diabetes. Even prediabetes can cause long-term damage to the body, particularly the heart and circulatory system. Those with prediabetes can significantly reduce their risk of developing diabetes by losing weight and increasing their physical activity.

Why Me?

It is believed that people with diabetes inherit a predisposition to the disease, but genetics aren't the only factor. If a parent or sibling has diabetes, it doesn't guarantee other family members will develop diabetes or prediabetes, but genetics are part of the diabetes dynamic. For example, children are more likely to develop Type 2 diabetes if a parent has it and a child's risk is higher if the parent was diagnosed before age 50. This type of diabetes occurs more frequently in African Americans, American Indians, Alaska natives, Hispanics/Latinos

and some Asian Americans, native Hawaiians and Pacific Islanders than it does in non-Hispanic whites.

Lifestyle also has a significant influence in the development of Type 2 diabetes. It develops most often in middle-aged to older people who are overweight or obese. Once rare in young people, Type 2 is becoming more prevalent among overweight children and teens. The American Diabetes Association estimates that one out of every three children born after 2000 in the United States will be directly affected by diabetes if trends continue.

It is sometimes difficult to determine whether it is a genetic link or a lifestyle factor that leads to the disease because the two are often intertwined. For example, obesity runs in families and families also tend to have similar eating and exercise habits. While we can't change our genetic predispositions, we can influence lifestyle factors that can prevent or delay the onset of Type 2 diabetes. Changes in three specific lifestyle areas can make a big difference in preventing or managing Type 2 diabetes, but they can also pay large dividends for overall good health.

Preventing or Managing the Disease

In many cases, the onset of Type 2 diabetes can be delayed or prevented entirely. The risk of diabetes can be reduced by monitoring diet, increasing physical activity and maintaining a healthy body weight — strategies that are also effective for treating and managing the disease. They're also strategies that can benefit anyone's health and well-being.

Diet

There are many myths about what patients with diabetes can and cannot eat, but the truth is that a healthy diabetes diet is really a healthy way to eat for everyone. People with diabetes don't have to feel deprived. According to the American Diabetes Association (ADA), "a diet that's low in saturated and trans fat, moderate in salt and sugar, and meals based on whole-grain foods, vegetables and fruits" is simply a healthy way to eat.



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80361

Stephanie Dunbar, a registered dietician and ADA's Director of Medical Affairs, clarifies. "Many people believe that just avoiding sugar will be enough to control their diabetes, but that's not true. Because carbohydrates convert to sugar in the body, we recommend monitoring your carbohydrates at each meal. We also suggest saving sweets for special occasions and, if you're going to have that piece of birthday cake, make sure it's a small serving and that you substitute it for another carb serving in your daily diet; not in addition to your usual dose of carbohydrates."

Dunbar also emphasizes that many Americans eat larger portions than recommended and that portion size is key to managing diabetes. "We prefer to use guidelines that include the total grams of carbohydrates and recommend 45 to 60 grams per meal as a starting point. To give you an idea, that would be the equivalent carbohydrates in one apple, one slice of toast and a six-ounce serving of light yogurt at a meal."

ADA also recommends using the "plate method" to establish healthy portions at each meal. "If you fill half your plate with non-starchy vegetables, a quarter of your plate with lean protein, such as chicken; and the remaining quarter with starchy carbohydrates, like brown rice, whole wheat pasta or potatoes, you'll have a pretty balanced meal," says Dunbar. "The depth of these servings should be no higher than the height of your hand if you were to lay it flat on your plate. You should ask your physician about your particular dietary needs, but this is a good rule of thumb."

Exercise

Regular exercise is important for everyone, but it's particularly important to people who have diabetes or prediabetes. Physical activity helps control



the amount of sugar in the blood and increases levels of HDL (good) cholesterol.

Physical activity simply means moving your body in a way that uses energy. You don't have to run a marathon or bench-press your body weight to make a positive impact on your health. Activities like walking, climbing the stairs, dancing or briskly pushing a baby carriage can all lower the risk of Type 2 diabetes, as well as the risk of colon cancer, heart disease and other health problems.

The general recommendation for good physical health is to exercise three times a week for 40 minutes, but that may not be realistic for some people.

Kathleen Kinney, also a registered dietician, says, "That should be everyone's goal, but that may not be a realistic starting point and you don't have to get there overnight. It's OK to start out with a three- to five-minute walk to the end of the driveway and build up from there. No step toward good health is too small."

Weight Loss

Regular physical activity and a diet low in fat and calories go a long way toward achieving the third facet of preventing and managing the disease — losing weight, which is a key element in reducing the risk of Type 2 diabetes.



Diabetes and Agent Orange

There is a definite link between Type 2 diabetes and exposure to herbicides used during the Vietnam War. Vietnam veterans with Type 2 diabetes are now eligible for VA disability compensation based on their presumed exposure to Agent Orange and other herbicides. This presumption is available for honorably discharged veterans who served in the Republic of Vietnam (RVN) during the period between January 9, 1962, and May 7, 1975. To qualify for presumption, the veteran has to have served in or visited the RVN; current policy excludes those who served solely off the coast of Vietnam.

FRA is working to reverse the VA's existing policy that prevents so-called blue water military retirees and veterans – those who served off shore in Vietnam – from claiming disability benefits for diseases related to exposure to Agent Orange. A report by the Institute of Medicine (IOM) proves the distillation process used to generate potable water from sea water did not remove Agent Orange from the water; it actually enhanced the effect of the Agent Orange dioxin by a factor of 10.

Revising the VA's Agent Orange policy is a top priority for the Association and is repeatedly addressed in FRA's congressional testimony and in discussions with legislators and their staff. The Association strongly supports legislative efforts that would authorize the VA to presume service-connection for veterans and retirees suffering from ailments related to exposure to Agent Orange if they served in the waters off the coast of or in the skies above Vietnam.

Visit www.fra.org/agentorange to learn more.

When there's an imbalance between the amount of calories taken in and the calories burned, it can lead to obesity, which causes insulin resistance and is common among people with Type 2 diabetes. Although being overweight isn't the only risk factor for developing this type of diabetes, there is an absolute link between obesity and the disease. Research shows that women with a waist size greater than 35 inches and men with a waist larger than 40 inches have an increased risk for Type 2 diabetes.

According to the Centers for Disease Control and Prevention (CDC), more than 35 percent of adults and nearly 17 percent of children ages two to 19 in the U.S. are obese. (Obesity rates have more than doubled for adults and more than tripled for children since 1980.) In recent years, approximately 1.9 million new cases of diabetes have been reported annually, and the CDC's September 2012 report predicts that as the obesity epidemic grows, that

number will skyrocket to as many as 7.9 million new cases each year.

There are many other reasons to maintain a healthy weight. Increased levels of body fat make it difficult for human internal organs to function properly and can create a variety of health problems. In addition to Type 2 diabetes, excess body weight increases the risk for high blood pressure, stroke and heart disease, and has also been linked to sleep apnea (a condition that causes sufferers to periodically stop breathing during sleep), gallstones and liver problems. Carrying more weight also puts increased pressure on bones and joints, which can lead to osteoarthritis and other bone and joint problems. Obesity has even been linked to several types of cancer. In addition to the tremendous toll obesity is taking on our citizens' health, it also impacts our nation's collective bottom line: The CDC report suggests that \$66 billion will be added to cover obesity-related medical

costs, in addition to the \$147 to \$210 billion being spent today.

Medications and Testing

If meal planning, exercise and weight loss aren't enough to control blood glucose levels, medication or insulin may be prescribed.

Oral medications may be the first step for Type 2 patients and work best when coupled with meal planning and exercise. (Diabetes pills are not available



for people with Type 1 diabetes.) Oral medication isn't effective for everyone and, although it often reduces glucose levels, it may not be enough to bring them into the normal range. Diabetes pills are most helpful for patients who have been recently diagnosed or need little to no insulin to control the disease. There are a variety of oral diabetes medications and patients may need to try more than one type, a combination of pills, or pills in combination with insulin therapy.

Insulin injections are required for people with Type 1 diabetes and may be prescribed for Type 2 patients when oral medications alone aren't enough to control blood sugar levels. Approximately 40 percent of those with Type 2 diabetes require insulin injections. There are different types of insulin that vary based on how quickly they work, when they peak, and how long

they last. Doctors prescribe the type and dosage according to the patient's overall health, how high glucose levels are, how long the patient has had the disease and what other medications he/she is taking.

Patients who are taking insulin, as well as those who have a hard time controlling glucose levels or have low glucose levels, should check their levels using a home glucose monitor. The process requires the use of a sterile lancet to make a tiny prick on the fingertip to draw a small drop of blood. (Some meters allow users to get blood from the forearm, thigh or fleshy part of the hand.) The blood is then transferred to a test strip that is inserted into the testing monitor, which displays the patient's blood glucose level.

According to the ADA, normal non-fasting blood glucose (sugar) taken one

to two hours after a meal should be less than 180 mg/dl. The normal range for blood glucose taken before a meal is 70–130mg/dl. It is critical to keep a log of these test results because they can help the patient and doctor better understand how exercise, different foods or a stressful/exciting event affect glucose levels. This information is also vital to making adjustments to the type and dosage of insulin prescribed.

Doctors also use the A1C test to measure patients' average blood glucose control for the past two to three months. This test doesn't replace the daily self-testing, but can provide an overview of how well a patient's diabetes treatment plan is working. The ADA likens the A1C test to a baseball player's season batting average. "It tells you about a person's overall success. Neither a single day's blood test results nor a single game's batting record gives the same big picture." Diabetes patients should have their A1C checked at least twice a year.

Most diabetes patients use a syringe to inject the insulin into their bodies. There are also pre-filled insulin pens, which allow patients to dial a dosage level and inject it much as they would if they were using a syringe. Insulin pumps are another option, delivering rapid-acting insulin continuously using a catheter to keep blood glucose levels stable both day and night. This delivery option was formerly used exclusively by Type 1 patients, but some Type 2 patients are now also using them.

Diabetes Resources

American Diabetes Association

www.diabetes.org · 1-800-DIABETES (1-800-342-2386)

National Diabetes Education Program

www.ndep.nih.gov · 1-888-693-6337

National Diabetes Information Clearinghouse

www.diabetes.niddk.nih.gov · 1-800-860-8747

Department of Veterans Affairs (VA)

www.healthquality.va.gov/Diabetes_Mellitus.asp · 1-877-222-8387

TRICARE

www.tricare.mil

Call the following numbers for customer service in your region:

North Region: Health Net Federal Services: 1-877-874-2273

South Region: Humana Military Healthcare Services: 1-800-444-5445

West Region: TriWest Healthcare Alliance: 1-888-874-9378

TRICARE-for-Life: 1-866-773-0404

US Family Health Plan: 1-800-748-7347



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TRICARE and VA Coverage for Diabetes

Military veterans have access to treatment and management resources through the Department of Veterans Affairs (VA) and those who served a full career in the military also have access to TRICARE medical services that can help diabetes patients.

Nearly one in four veterans enrolled with the VA has diabetes and the VA is currently providing health benefits to approximately 1.45 million veterans with the disease. Even if a veteran doesn't believe his diabetes or other health problems are service-related, all honorably discharged veterans are entitled to a free physical examination and may be eligible for free ongoing treatment at a VA medical facility. (Patients with non-service-related conditions are usually required to make copayments

for medications.) See page 23 for more information about presumed service-connection related to diabetes.

Resources such as insulin, syringes and test strips are covered by VA health programs, and many VA facilities have specific clinics or staff to help diabetes patients. Additionally, the VA's Diabetes Program Office collaborates with the National Prevention Center, Food and Nutrition Services, Podiatry, Eye Care, and the Office of Research and Development to optimize the care of veterans with diabetes.

Military retirees may also have access to TRICARE-provided programs and treatment. In addition to education for self-monitoring blood glucose, diet and exercise, TRICARE covers insulin products, blood and urine glucose and ketone test strips, diabetic syringes, needles and lancets through the program's pharmacy benefit. (Regular prescription copays will apply.) Home glucose monitors are also provided as

part of the TRICARE medical benefit, and insulin infusion pumps may be covered for some diabetes patients. It is also important for TRICARE-for-Life beneficiaries to understand that Medicare does not cover insulin or syringes; TRICARE is the primary payer for these diabetic supplies.

Management Makes a Difference

Those who have diabetes have a 60- to 70-percent chance of suffering from mild to severe nerve damage and a more than 65-percent chance of dying from heart disease or stroke. Living with diabetes increases the rate of amputation, kidney failure and adult blindness.

But these serious and potentially deadly effects of diabetes can be mitigated with proper management of the disease. A 1993 NIH study conclusively proved that intense glucose control significantly delayed the onset and progression of diabetes-related complications such as eye, kidney and nerve diseases. The study also demonstrated that any sustained reduction in blood glucose helps, even if the patient has a history of poor control.

Keeping blood glucose levels as close to a normal range as possible is a critical goal for all diabetes patients, particularly Type 2 patients. And it's an achievable goal through proper diet, exercise, weight loss and medication.



Lauren Armstrong is the Contributing Editor and Member of the FRA Auxiliary. She can be reached at lauren@fra.org.



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Post 9/11 Veterans Educational Assistance Improvements Act of 2011: How the Law Affects Chapter 31 Benefits

THE DEPARTMENT OF VETERANS Affairs Vocational Rehabilitation and Employment (VR&E) program helps service-disabled Veterans succeed in meaningful careers through individualized services including college and other training programs. For those currently unable to return to work, VR&E also provides services to assist Veterans to live as independently as possible in their homes and communities.

The President signed the Post-9/11 Veterans Educational Assistance Improvements Act into law Jan. 4, 2011. Effective Aug. 1, 2011, service-disabled Veterans using the VR&E program who are eligible for Post-9/11 GI Bill benefits may now receive a monthly allowance that is equal to or greater than the housing allowance granted under the Post-9/11 GI Bill. For most Post-9/11 Veterans, the new monthly allowance is significantly higher than the regular Chapter 31 allowance that other Veterans in VR&E will continue to receive.

The new Post-9/11 rate for VR&E is based on the basic allowance for housing for a military member with dependents in pay grade E-5 in the zip code where the school or other training facility is located. The rate is determined by logging on to <https://www.defensetravel.dod.mil/site/bahCalc.cfm>, entering the school's zip code for "Duty Zip Code", selecting pay grade "E-5", and clicking "Calculate". The rate listed for an E-5 with dependents is the new monthly Post-9/11 subsistence allowance for full-time training under Chapter 31.

Additionally, VA may no longer pay Veterans receiving VR&E or education benefits for the intervals between school terms. For example, if the Fall 2012 semester ends Dec. 20,

2012 and the Spring 2013 semester starts Jan. 15, 2013, a Veteran enrolled in each of those terms will be paid only for the fall and spring semesters. The Veteran will not be paid from Dec. 21 to Jan. 14. This will enable Veterans to conserve their entitlement and use more of their educational and VR&E benefits directly for training purposes.

Service-disabled Veterans using Post-9/11 GI Bill benefits may also be eligible for VR&E benefits and should take a closer look at what VR&E has to offer. Besides tuition, fees, books, supplies, and the monthly allowance, VR&E also provides ongoing case management, employment assistance, and referrals for VA medical treatment and services. VR&E has Vocational Rehabilitation Counselors stationed at fifty-six regional offices throughout the country to help Veterans achieve education and employment goals.

The VOW to Hire Heroes Act of 2011 also expanded certain VR&E benefits. Veterans who previously completed a program under Chapter 31 and have exhausted state unemployment benefits may qualify for an additional 12 month VR&E program. The law also expanded VR&E's special employer incentive program which encourages private sector employers to hire or train Chapter 31 participants. VA can reimburse an employer for up to half of the Veteran's salary for the first six months. For more information on VA benefits related to the Vow to Hire Heroes Act go to <http://www.benefits.va.gov/VOW/>

VA has a jobs portal located at www.VetSuccess.gov where Veterans can post resumes, apply for jobs, and learn useful tips about writing resumes and preparing for job interviews. There are more than 4,000 registered employers who are specifically interested

in hiring Veterans. VA encourages all Veterans looking for employment to create an account and post their resume.

TO APPLY OR OBTAIN MORE INFORMATION ABOUT VR&E BENEFITS:

- Call 1-800-827-1000.
- Go to www.va.gov and complete an online application (VONAPP).
- Complete VA Form 28-1900, Disabled Veterans Application for Vocational Rehabilitation (<http://www.vba.va.gov/pubs/forms/vba-28-1900-are.pdf>) and submit it to the VA regional office in your state. If there is more than one regional office in your state, send it to the office in your state that is closest to you. A Regional Office listing can be found at <http://www.vba.va.gov/bln/21/ro/rocontacts.htm>, or
- Visit www.vetsuccess.gov and <http://www.vba.va.gov/bln/vre/index.htm>.

Farewell to USS *Enterprise*

AFTER A 51-YEAR CAREER of distinguished service, the USS *Enterprise* (CVN-65) was inactivated on December 1, 2012. The ceremony took place at Naval Station Norfolk (Va.) and was attended by a variety of Navy dignitaries, former crew members, shipbuilders and their families. The “Big E” left the Navy in style ... as a vessel of her stature should.

Enterprise set herself apart from the very beginning as the first and only carrier in her class, and the largest ship in the world at the time she was built. As the first nuclear-powered aircraft carrier, she set speed records and was able to stay at sea without ever having to refuel. She could also carry twice as much aircraft fuel and ordnance as her predecessors, which added to her war-fighting capabilities. She served in every major conflict since her involvement in the Cuban Missile Crisis and deployed 25 times over the course of her distinguished career. Designed for a 25-year service life, *Enterprise* was upgraded to more than double that expectation and was the oldest active duty warship at the time of her inactivation. She is one of the most decorated ships in the U.S. Navy and is one of only four aircraft carriers in naval history to record 400,000 arrested aircraft landings.

Decommissioning such a behemoth is no small task and the December inactivation ceremony was just the first step in a three-year process that will cost tens of millions of dollars. *Enterprise* will be towed to Newport News, Va., where her nuclear fuel and much of her equipment will be removed. She'll then be towed to Puget Sound, Wash., where her eight nuclear reactors will be removed. (She's too large to fit through the Panama Canal, so her journey will take her around Cape Horn.) Removing the huge reactors is an arduous task that will require workers to cut through the flight deck and



U.S. Navy photo by Mass Communication Specialist 3rd Class Daniel Mesheh

probably the hull, essentially destroying the ship and making her unfit for future service or even as a floating museum. Once the reactors are removed, *Enterprise* will be officially decommissioned and, sadly, become 90,000 tons of scrap metal.

Her inactivation reduced the number of carriers in the U.S. fleet to 10 until 2015, when the USS *Gerald R. Ford* will be commissioned. (See October 2010 *FRA Today* feature on the *Ford*, at www.fra.org/publications.) And although this is the eighth Navy vessel to carry the name, Navy Secretary Ray Mabus assured those attending the ceremony that she wouldn't be the last carrier named USS *Enterprise*. As part of the inactivation ceremony, the crew presented a 200-pound time capsule to Admiral Jonathan Greenert, Chief of Naval Operations, for safekeeping until the collection of letters, insignia and other memorabilia can be given to the commanding officer of the next USS *Enterprise*. The legacy will, indeed, endure.

For more information on the USS *Enterprise*, visit www.Enterprise.navy.mil.

The aircraft carrier USS *Enterprise* (CVN 65) is underway in the Strait of Gibraltar.

NRRA Naval Reserve Recruiter Association

April 18–21, 2013, Valley Forge, Pa.
Contact John Sperling, 215-368-7135,
john_sperling@comcast.net

Patrol Squadron 4 (VP- 4)

September 4–8, 2013, Seattle, Wash.
Contact Larry Hames, 21015 124th Ave
E, Graham, WA 98338, 503-688-9804,
database@VP4Association.com

SE Regional Submarine Convention

April 7–11, 2013, Charleston, S.C.
Contact Thom Beach, 843-761-7134,
thombeach@yahoo.com

USS Bordelon (DD/DDR-881)

September 4–8, 2013, Milwaukee,
Wisc. Contact Sebastian Riccobono,
1213 Glenview Ave., Wauwatosa, WI
53213, 414-852-2103,
sriccobono@sbcglobal.net

USS Gregory (DD-802)

September 29–October 3, 2013,
Portland, Ore. Contact Ronald Ludolph,
19837 N. Shadow Mtn. Dr., Surprise,
AZ 85374, 623-214-6732,
rondot83@gmail.com

USS Mauna Kea (AE-22)

October 3–6, 2013, Seattle, Wash.
Contact James Cummings, P. O. Box
99178, Lakewood, WA 98496-0178,
253-279-9737, dadeeo2me@hotmail.com

USS Nathan Hale (SSBN-623)

September 19–22, 2013, Branson, Mo.
Contact Ed Stank, 101 Speer St, Goose
Creek, SC 29445, 843-569-6012,
stanke@bellsouth.net

USS San Marcos (LSD-25)

May 16–19, 2013, Nashville, Tenn.
Contact Patrick Finnerty, 2112 Mystic
Cove Dr., Virginia Beach, VA 23455,
757-214-3814, eirepat1@cox.net

USS San Pablo (AVP/AGS-30)

May 2–4, 2013, Pittsburgh, Pa. Contact
Stuart Norris, 1463 Ayrault Road,
Fairport, NY 14450, 585-223-2713,
stuenormus@msn.com

USS Wright (AV-1/AZ-1/AG-79/CVL-49/CC-2)

September 12–16, 2013, Nashville,
Tenn. Contact Ray Sheridan, 2518
Smoldering Wood Dr., Arlington, TX
76016, 817-457-0730,
ray.sheridan@juno.com



VP-69

September 27–28, 2013, WA. Contact
Daryl Phillippi, VP-69, PO Box 82351
Portland, OR 97282, 503-238-6020,
darl_p@juno.com

Members can post reunions online at www.fra.org,
submit to reunions@fra.org or mail to: FRA Reunions,
125 N. West St., Alexandria, VA 22314.

FRA Headquarters Can Help with Your Reunion

ANNOUNCING YOUR REUNION IN *FRA Today* is a great way to let shipmates know when and where the crew is going to muster. In addition to the Reunions listing published here each month, reunion notices are also posted online at www.fra.org.

Shipmates can post their reunion by logging in at www.fra.org and visiting the Reunions page, calling Teresa Wiener at 1-800-372-1924 (extension 108), e-mailing their reunion details to Teresa@fra.org, or by sending a letter with the particulars to FRA Reunions, 125 N. West St., Alexandria, VA 22314. (FRA membership entitles shipmates to publish one reunion notice per year at no charge. Additional reunions can be posted for a \$35 fee, and non-members may also promote reunions at that rate.)

As part of FRA's outreach and education programs, Headquarters can also provide speakers and informational literature at no charge to Navy, Marine Corps and Coast Guard reunion groups. Bob Washington, FRA's Outreach Manager, will be happy to coordinate a speaker who can educate reunion attendees about legislative issues that affect military retirees and veterans, and help them understand how to best utilize their military and veterans' benefits.

Reunions are also a great place to showcase the benefits of FRA membership and invite new members to become a part of FRA's important work. Encouraging others to become FRA shipmates not only strengthens the Association and its legislative advocacy efforts, it also helps you earn recognition as an FRA recruiter. FRA National Headquarters can supply copies of *FRA Today*, literature about our legislative advocacy efforts, tabletop displays and other promotional materials for your reunion or other events.



The Reunions page on www.fra.org is one of several ways to post your reunion.

To request a speaker, literature or more information, contact Bob at bobw@fra.org or 1-800-372-1924 (extension 113).

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NAME	BRANCH	NAME	BRANCH
Adams, Cynthia K, JOCS, USN	MAL	Humphrey, Charles R, YN1, USN	181
Agustin, Noel, EM2, USN	103	Hundley, Durward, SKCS, USN	386
Arbogast, James B, LCDR, USN	282		
Austin, Raymond E, SKC, USN	018	Johnson, Charles E, CPO, USN	090
		Jones, John B, PNC, USN	018
Babula, James J, PO1, USN	MAL		
Barker, Percy W, YN1, USN	034	Kendall, William B, ETC, USN	053
Blevins, Archie D, ENC, USN	MAL	Kirchgessner, Edwin P,	
Bohrman, William J, TMC, USN	014	TMC(SS), USN	018
Boutwell, Guy, AE3, USN	MAL	Kizzire, Maxie S, EN1, USN	MAL
Briody, George T, AMS1, USN	051		
Brown, Robert T, CPO, USN	175	Laforce, John, POCS, USN	MAL
		Landroche, Sherburne W, CSC,	
		USN	289
Campbell, James P, BM1, USN	MAL	Lane, Robert W, LCDR, USN	067
Christman, Norman K, RMC, USN	MAL	Leggett, Noah C, SN, USN	204
PENA, Clark, James E, YNCS,		Luedtke, Howard, ICC, USN	117
USN	181		
Cook, F E, MSGT, USMC	057	PRPNE, Mahler, Gottfried E,	
Cox, Bill W, ADRC, USN	022	QMC(AN), USCG	071
Crowell, Huelin, GMCS, USN	MAL	McDow, Don W, PNCM, USN	094
		McGrath, Lawrence J, AMHC,	
Damon, John M, AECS, USN	126	USN	022
Dauch, Arnold A, EMC, USN	MAL	Modrell, Robert L., EM4, USN	170
Davies, Elliot M, AGCM, USN	170	Mooney, J, SKCM, USN	MAL
Dawson, Victor, MN1, USN	MAL	Morris, Mackey R, ADRC, USN	050
Dewey, John E, EMC, USN	289	Moulthrop, Thomas T, HMC, USN	MAL
		Mowatt, Mike W., SGT, USMC	170
Eaton, Samuel H, BMC, USN	005	Mullen, Donald L, MCPO, USN	204
Eney, Neilson E, LT, USN	MAL		
Epperson, Hercle, ADJC, USN	MAL	Nease, George L, POC, USN	MAL
Gailey, James R, QMCS, USN	160	O'Connell, Thomas J, AOC, USN	091
Ganson, John N, RM1, USN	MAL		
Gardner, Stanley J, SKC, USN	124	Patti, Louis A, ADJC, USN	210
Glimm, Gordon, DKC, USN	276	Phelps, Wayne, LCDR, USN	117
Gomez, Jorge R, YNC, USN	241	Price, Alfred H, YNC, USN	203
Gorman, Eugene J, CWO2, USN	099	Prime, Michael F, MA1, USN	099
		Prochaska, Arthur F, ENCM, USN	012
Haley, Thomas, CAPT, USN	MAL		
Hanson, James D, BMC, USN	070	Ramey, Kelly R, SH2, USN	MAL
Harling, Alan E, ADCS, USN	099	Ritchie, Howard W, SKC, USN	290
Harmon, Carl W, PO1, USCG	040	Rodgers, Paul J, AECS, USN	091
Hart, David R, MSGT, USMC	077	Roy, Roland A, RDCM, USN	136
Harvey, Bobby E, GMMC, USN	040	Ruvio, Joseph, BTC, USN	201
Hawley, Bobby D, BT1, USN	037		
PRPNE, Heyman, Samuel,		Sanders, Emory F, MMCM, USN	005
YNCS, USN	226	Sanderson, Norman C, SMAJ,	
Hobaugh, Jerry L, YNCS, USN	MAL	USMC	038
Hopfensperger, Donald, SKCS,		Sawley, Elbert W, BMCS(DV), USN	126
USN	014		



NAME	BRANCH
Slaughter, Raymond D, OSCM,	MAL
USN	
Snow, Warren A, AGC, USN	047
Spencer, Bertram P, ENC, USN	070
Standage, Duane F, CPO, USN	MAL
Stayt, Arthur W, BUCS, USN	MAL
Streiff, Edward J, CDR, USN	024
Taras, John, ADC, USN	226
Taylor, Rex C, CWO, USN	MAL
Therrell, Jerome, CTRC, USN	MAL
Townsley, Robert H, LCDR, USN	061
Trimble, Chuck, CWO4, USN	282
Urbas, Edmund M, EMC, USN	288
Vaughn, Norman D, SGT, USMC	059
Vosseler, Warren P, CAPT, USN	024
Walker, Mathew, BM2, USN	290
Wagh, Robert E, BTC, USN	104
Wells, Donald B, MSC, USN	250
West, Wendell H, RM1, USN	170
West, Frederick E, RM1, USN	204
Whitaker, Darrell, USN	MAL
Williams, Irvin D, DSCS, USN	136
Wilson, Barry A, TMCM(SS), USN	269
Witten, John W, LCDR, USN	177
Wurth, Thomas D, MSC, USN	186
Young, Hilliard L, BT2, USN	MAL

Names in **red** indicate 50 year continuous members.
 Names in **bold** indicate past national officers.

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BRANCH 11 FORT WORTH, TEXAS

Then-National President Jeff Gilmartin and then-RPSC Arthur McAvoy visited NAS Fort Worth, where they met with the commanding and executive officers, the Command Master Chief and members of the administrative department to discuss FRA's mission. Shown (l to r, front row) are CMDCM/Shipmate Ellen Zubke and PO2/Shipmate Ora Sorrell, (back row) PO1 Nathaniel Ndikum, Chief-Select/Shipmate Alfred Hilbun, McAvoy, Gilmartin, PO3 Jarrett English and PO3 Justin Hamilton.



BRANCH 201 AUSTIN, TEXAS

PRPSC Russ Miller (right) escorted Bert Hutto, a P-47 Pilot who flew 47 missions before being shot down during WWII, on an Honor Flight to Washington, D.C. A veteran of the U.S. Army Air Corps, Hutto spent the last two months of the war in a German prison camp, and flew 47 missions before being shot down.



BRANCH 124 LAKEHURST, N.J.

Branch VP Ed Rutzler (far left) and Branch President Bill Anthony (far right) congratulated branch members (l to r) Owen Heller (40 years) and George Weiss (20 years) for their long-standing involvement with the FRA.



BRANCH 229 NEWBURGH, N.Y.

Shipmates man a recruitment table at "A Salute to Veterans" in Montgomery, N.Y. Pictured (l to r) Branch Secretary-Treasurer Norm Sivertseen, 1st Vice President Joe Schneider and Shipmate Jack Green.



MEMBER-AT-LARGE KERRVILLE, TEXAS

Shipmate Robert Tagge proudly pins 2nd Lieutenant bars on his granddaughter Susan Vanden Dries, moments after her graduation from the U.S. Air Force Academy. Tagge's other grandchildren, Ellen Walker (left) and William Vanden Dries (behind Tagge), also participated in the ceremony.



BRANCH 162 NEW ORLEANS, LA.

PRPSC Dave Field observes as former Marine Corps Sergeant, now LtGen, Steven Hummer fills out his FRA membership application. Hummer is the commanding general of Marine Forces Reserve and Marine Forces North, and was the guest speaker at the branch's Memorial Day ceremonies.



BRANCH 376 MADISON, WISC.

(L to R) Branch Secretary John "Paul" Triglath, President Cecil E. Pittack, Master-at-Arms Walter I. Atkinson, Chaplain John Hanna, outgoing President and installing officer William C. Rose and 1st Vice President Jerome T. Boyer pose following their installation ceremony.



BRANCH 118 CAPE CORAL, FLA.

Hope Hospice Honor Guard volunteers from the branch visit Alfred "Jim" Kaiser, a Navy veteran who crewed aboard USS Montpelier (CL-57) during WWII.



BRANCH 70 POWAY, CALIF.

Shipmates PNP Dick Smith (left) and Branch President Lou Irvin pose in front of the City of Poway sign welcoming motorists to Poway. Working with City Councilman and Shipmate Jim Cunningham, the branch applied for and was granted approval to add their logo to the board in one of the highest traffic areas entering the city.

BRANCH 63 LEWISTON, IDAHO

Shipmate Johnie Brown proudly displays his gold medal for bowling in the Senior Games for the 70-to-80 age bracket.



To submit a photo for *News From the Branches*, please e-mail a photo as an attachment in jpeg format to FRAToday@fra.org or mail a high-quality photograph to *FRA Today*, 125 N. West Street, Alexandria, VA 22314. Please include a brief description of the photograph and include the names of those pictured. Laser prints and scanned copies of photographs cannot be accepted.

A Message from the Southwest Regional President

THE SOUTHWEST REGION CONSISTS of 13 units, and the most important issues in each of them are Americanism and Patriotism. Our members have been very active in each community in many different ways. To show the real meaning of Americanism and Patriotism by all members, they take part in Veterans Day Ceremonies, either in the color guard or by placing a wreath at local memorials. Also, there is a lot of support by our members for our Memorial Day Ceremony at Glen Abbey Memorial Park, called the "Avenue of Flags at Glen Abbey." Many of our members have a flag dedicated to their loved ones. When the name of each of our fallen heroes is called, the Boy Scouts present the flag. After the last name is called, all of the flags are raised in unison. It is a very touching ceremony, with the formation of planes flying over.

Some of our units visit wounded warriors at the Naval Hospital and provide cookies and punch, which is a real treat for them. We have provided a lot of support for them by having raffles, auctions, and maybe even an extra dinner or two to help raise money. We have a member who enjoys making items to raffle off. Some of our units provide food for military families at Thanksgiving and Christmas through the Armed Forces YMCA, and they have the option to choose the families in need.

Our units also make Christmas stockings to send to the troops by way of the USS Midway and neck pillows for the troops that are deploying to Iraq and Afghanistan. Several of the units collect clothing for homeless veterans in July for the "Stand Down," which is held every year for three days. That is when they are provided with food, clothing, haircuts, and medical and dental services. Many of our unit members volunteer their help at that time.

The members of the Southwest Region are all very loyal to the military, because that is what we are all about. God bless America and the military for what they do for us, and thanks to all of the members of each unit for their Loyalty, Protection and Service.



SALLI LEARY-ESPINOZA
Regional President Southwest



Did you know that discounted subscriptions to *FRA Today* magazine are available for members of the LA FRA?

A subscription to *FRA Today* is \$35 for non-members, but LA FRA members can enjoy all the magazine's great features for substantially less.

- All Auxiliary members can purchase an annual subscription for \$10.
- Widows of FRA shipmates are eligible for a further discount and pay only \$7 per year.
- Widows of FRA Life Members receive *FRA Today* at no charge.

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