From the 1950s through the 1980s, people living or working at the U.S. Marine Corps Base Camp Lejeune, North Carolina, were potentially exposed to drinking water contaminated with industrial solvents, benzene and other chemicals. This chemical exposure may have led to health conditions. These 15 health conditions qualify regarding the contaminants: esophageal cancer, breast cancer, kidney cancer, multiple myeloma, renal toxicity, female infertility, scleroderma, non-Hodgkin’s lymphoma, lung cancer, bladder cancer, leukemia, myelodysplastic syndromes, hepatic steatosis, miscarriage or neurobehavioral effects. You may be eligible for VA health benefits if you served on active duty or resided (family members) at Camp Lejeune for 30 days or more between Aug. 1, 1953, and Dec. 31, 1987. If you are eligible:

- Veterans receive VA health care; care for qualifying health conditions is at no cost (including copayments).
- Family members receive reimbursement for out-of-pocket medical expenses incurred from treatment of qualifying health conditions.

To apply veterans need to gather documents showing they served on active duty at Camp Lejeune. They can use military orders or base housing records. They then need to enroll in VA Health Care. Veterans already enrolled can contact their local VA health care facility at http://www.va.gov/directory/guide/ to sign up for the Camp Lejeune Program and receive VA care. If not yet enrolled, veterans can apply online at http://www.va.gov/healthbenefits/apply call toll-free (877) 222-8387, or visit the nearest Veterans Affairs Office. Family members need to gather documents to show their relationship to a veteran; they can use a marriage license or a birth certificate. They also need to show that they lived at Camp Lejeune. They need the military orders sending their veteran to Camp Lejeune or Camp Lejeune base housing records. Then gather receipts for qualifying expenses. By law, VA may only compensate for eligible out-of-pocket expenses after family members have received payment from all other health plans. Family members may request reimbursement for expenses incurred on or after March 26, 2013, which is the date when Congress began to fund this program. To apply for reimbursement, visit http://www.elfamilymembers.fsc.va.gov or call toll-free (866) 372-1144. For more information, call Brenda Stormer at the Veterans Affairs Office at (724) 465-3815. Source: http://www.publichealth.va.gov/exposures/camp-lejeune/index.asp April 2015 ++
Chemical Exposure in Iraq: Army Denies it Sought to Hide

Mar 31, 2015 | by Bryant Jordan

The Pentagon denies it deliberately tried to hide the fact that U.S. troops were exposed to chemical agents, including mustard and sarin gas, during the Iraq War. The Army on Friday apologized for its failure to properly care for Americans exposed to the chemical agents, promised to provide medical support to those affected and indicated some troops would be eligible for the Purple Heart. But the Army on Monday said there was never any "conspiracy" to play down or conceal the chemical exposures, including from those who experienced them. "We would never have told them they weren't exposed," said Juanita Chang, a spokeswoman for Army Under Secretary Brad Carson. "In this day and age of social media and cell phones and pictures, no way. There no reason we would do that." In October 2014 The New York Times published a lengthy series based on documents acquired through Freedom of Information Act requests and interviews with Iraq War veterans, including 17 who were exposed to chemical agents. The Times said that about 5,000 chemical warheads, shells or aviation bombs were found by U.S. troops following the 2003 invasion. Officer and enlisted personnel interviewed for the story said they were told to keep silent or provide as little information as possible about such exposures, including to sarin. A former company commander told the Times the medical personnel treating his troops seemed bent on disproving their conditions were related to chemical exposure, while a former Army major said he was told to say nothing or dodge questions about finding chemical agents.

An Army sergeant who suffered mustard agent burns in 2007 told the paper he was denied hospital treatment and medical evacuation to the U.S. even after his commander requested it for him. A lieutenant said a "gag order" was imposed on him and his unit after two of his soldiers were exposed to sarin, and they were ordered to tell family members they were exposed to "industrial chemicals." Shortly after the Times story last October, the Defense Department ordered a review of standardized health surveys filled out by service members following deployment. Those surveys turned up 629 instances of troops reporting they may have been exposed to chemical agents, the paper reported in November. DoD also established a hotline at its Army Public Health Command site that soldiers may call if they believe they were exposed, Chang said. The Veterans Affairs Department added a new webpage to its site specific to Iraq and Afghan war chemical weapons exposure, and included the DoD's hotline number. The VA's Office of Public Health also this month briefed representatives of veterans service organizations on the issue. VA spokesman Randy Noller said he said the department does not direct or require its staff to screen Iraq and Afghanistan war veterans for chemical agent exposure, but is offering health evaluations, if requested, under the Gulf War Registry Program set up for veterans of the Persian Gulf War. Noller said that registry includes questions regarding exposure to mustard and nerve agents. The Army issued its apology on the eve of a Newsweek report claiming that some 200,000 American troops were exposed to nerve gas and chemical agents during the Gulf War in 1991. Defense officials denied for years that such exposures happened, with one administration after another coming under fire from veterans' advocates for failing to recognize a link between veterans' health problems and Gulf War service. The DoD and VA's resistance to revealing all it knew about the exposures after 1991 and after 2003 is similar to the silence and stonewalling that greeted Vietnam War veterans when they began suffering the effects of exposure to Agent Orange and other defoliants used to clear jungle and areas around base perimeters. The Times suggested Pentagon secrecy about the weapons and exposures from the latest Iraq War may have been politically motivated. The discovered chemical weapons were in a state of deterioration and dated from the 1980s – when Iraq was considered an ally against Iran – and likely were built using U.S.-supplied ingredients. Article cut to fit page: To see complete article http://www.military.com/daily-news/2015/03/31/army-denies-it-sought-to-hide-troops-chemical-exposure-in-iraq.html
**TBI SLEEP DISORDER**

New research shows a close link between concussions and sleep disorders. A recent study by the Defense and Veterans Brain Injury Center (DVBIC) shows that sleep disturbances are common after a person sustains a mild traumatic brain injury (MTBI), commonly known as a concussion. Insomnia is the most common sleep disorder experienced by people who get a concussion, with prevalence rates ranging between 20 and 90 percent. People who have suffered a concussion also have a hard time establishing a consistent pattern of sleep. Another issue may be frequent or loud snoring during sleep. The research shows people who experience such symptoms should avoid caffeinated food or drinks, such as chocolate, energy drinks and sodas for at least six hours before bedtime. Other measures or “stimulus controls” include sleeping in a quiet, dark place that is cool and comfortable. It is the importance of keeping a regular sleep schedule. “Go to bed at the same time every day, and get up at the same time, regardless of how much sleep you get.” Taking a short-term sleep medication may also be necessary to reduce or eliminate these symptoms. The National Center for Telehealth and Technology smart phone apps like CBT-I (Cognitive Behavioral Therapy for Insomnia) Coach and interactive websites, such as afterdeployment.org, provide educational tools to help patients manage symptoms. [Source: NAUS Weekly Watchdog | March 27, 2015 ++]

**TOMAH REDUCES URGENT CARE HOURS**

Effective April 27, 2015, the Tomah VA Medical Center’s Urgent Care Clinic hours are Monday thru Friday from 7 a.m. to 9 p.m. On weekends and holidays, hours are 7 a.m. to 3:30 p.m.

**WHY ISN’T THE URGENT CARE CLINIC OPEN 24 HOURS?**

This temporary change in operating hours is being implemented in an effort to best serve our Veterans during a shortage in staff at the Tomah VA Medical Center. We estimate these reduced hours will be in effect for approximately three months.

**WHAT DO I DO IF I NEED CARE AFTER HOURS?**

If you are experiencing life-threatening symptoms, you are urged to call 911 or go to the nearest emergency room for care. If you have a condition that cannot wait for a Primary Care appointment, please call the Veterans Integrated Services Network (VISN) 12 nurse triage line at (800) 872-8662.

**WHAT IS THE DIFFERENCE BETWEEN URGENT CARE AND EMERGENCY CARE?**

The Urgent Care Clinic sees patients who believe their condition is not life-threatening or have an illness or injury that requires attention in a doctor’s office setting, such as cold and flu symptoms, high/low blood pressure, high/low blood sugar, and stitches. Urgent care is not intended to be a substitute for true emergency room care, nor for an ongoing relationship with a primary care provider.

**DOES VA PRE-AUTHORIZE EMERGENCY ROOM CARE IN THE COMMUNITY?**

The authority for VA to pay for emergency room care is not pre-authorized in advance. All decisions by VA regarding coverage and payment of emergency room care are based on federal law, which directs the VA in how it reimburses for emergency room care. Emergency room care will be considered by the VA for payment only after a review of medical documentation and eligibility for care occurs.

The VA should be notified when a Veteran presents for emergency room care. Although this does not guarantee any type of pre-authorization for payment, it will ensure the Veteran’s care is considered for payment. There must first be an official determination that the care was emergent in nature and VA facilities were not feasibly available. These determinations are made after care is delivered, not before care is delivered.

The Non-VA Medical Care office respectfully works with Veterans regarding payment request process to resolve questions about their benefits and coverage for emergency room care and treatment.

**SENT OUT BY THE TOMAH MEDICAL CENTER TO ALL CVSO OFFICES**
OMAHA NEBRASKA HOSTS NATIONAL VETS GOLDEN AGE GAMES

PATRIOTS OF THE PLAINS

August 8-12, 2015

Online registration for Golden Games must be completed by May 14, 2015.

Athletes must enter at least four, but no more that 6 events.

www.veteransgoldenagegames.va.gov  For Rules of the games and medical clearance forms

6  Age Classifications 55-59, 60-64, 65-69, 70-74, 80-84, and 85+

You MUST receive health care from the US Department of Veterans Affairs.

Wheelchair athletes will have a separate division in the following events: bowling, horse shoes, nine ball, shuffleboard, and table tennis.

SPORTING COMPETITION FOR VETERANS AGED 55 OR OLDER

Military/Veterans Family Day-Milwaukee County Zoo

Sunday, July 5, 2015

9am-5pm

Free admission and free parking only

Veterans Benefit Expo-US Bank Gathering Place 9am-4pm

Ticket distribution-Tuesday, May 26-Thurs., July 2

To obtain your ticket call Waushara County Veterans Services (920) 787-0446 on or after May 26th.

A limited number of free wheelchairs will be provided for the day inside the US Bank Gathering Place-Young Marines table. Additional wheelchairs and motorized carts are available for a charge at the Zoo.
Could Veterans Have Concussion –Related CTE?

After his last tour in Iraq, it took master gunner Shane Garcie about six weeks to notice he'd changed. "Your brain is throwing parties because you're home, you're alive," says Garcie. "So, it doesn't settle in right away. Now he's not sure what bothers him most: the fogginess of his brain, the anger that can erupt from nowhere or the deep, dark depressions he can't shake off. "One minute I'm in a good happy mood, everything is cool; the next minute I'm depressed," Garcie told CNN chief medical correspondent Dr. Sanjay Gupta. "I don't want to be around anybody, I want to isolate. Some days, I don't want to get out of bed." "We could walk around this town and everybody, 90% of these people, would say, 'Hey, Shane, hey,' " Garcie says about his hometown of Natchitoches, Louisiana. "But it's not Shane. It looks like me, it walks like me, it talks like me, but it's not me because of the damage." Since 1984, Green Beret Tommy Shoemaker has served in many war theaters -- Kuwait, Iraq, Afghanistan, Somalia, Bosnia -- and is still an Army reservist. He came home from Iraq to Monroe, Louisiana, in late 2006 with a bum leg and a disabled brain. "I carry note cards and a pen with me everywhere I go, and when I'm talking to somebody, I write it down," Shoemaker told Gupta. "Because if I don't, I won't remember. I mean memory was not a problem for me, I could remember anything. And now I have to write everything down." But it's the mood swings he can't control that do the most harm. "I've always been really easy-going. Everything rolled off my back, no problems," says Shoemaker in his Southern drawl. "But now that's not so. I mean, I'll get mad over something as simple as a banana peel in the front yard or my wife saying the wrong thing to me, and is it really anything? No, but at that moment, it hits me and I just do things that I would've never done before. I yell, I scream, I holler, and that's just never been my manner. I'm sad for my kids and my wife to have to live with that." Dr. Julian Bailes, co-director of the NorthShore Neurological Institute in Evanston, Illinois, is pointing at the angry red and vivid yellow blooms on the PET scan of a living brain. "Compared to normal controls, you see abnormal binding in the areas under the surface of the brain and deeper in the brain, showing abnormal accumulations of tau protein," he explains. All are signs of CTE, or chronic traumatic encephalopathy, a crippling neurological disorder caused by repeated blows to the head. Characterized by deep depression, failing memory and anger that lurks just under the surface, CTE is a form of dementia that first came to light in the boxing world. "Punch drunk" was the term most often used for former pugilists, such as Muhammad Ali, who developed brain damage after a lifetime of hard knocks. Today it's called dementia pugilistica and is considered a variant of CTE. CTE is the disease many believe played a role in the deaths of former NFL players like Ray Easterling, Junior Seau, Shane Dronett and Dave Duerson. They all shot themselves. Duerson left a note asking that his brain be studied. The science of CTE is in its infancy. A band of researchers around the country has been racing to catalog as much information as possible, to answer the questions: Is CTE distinct enough to be diagnosed? Is it a "new" neurodegenerative disease? At this time, there is no cure for CTE. There are no real treatments, either. All that can be done is to treat the symptoms. This Article has been cut to fit page. To see entire article please go to: http://www.cnn.com/2015/04/06/health/cte-blast-variant/
NO FEE PASSPORT

You Are Eligible for a No-Fee Passport Book Only If:

- You are an officer or employee of the U.S. Government, traveling abroad for the U.S. Government.
- You are the dependent of someone traveling abroad for the U.S. Government, and will accompany them on their assignment.
- You are exempt by law from payment of the passport fee if: You have a letter from the American Battle Monuments Commission stating that you are traveling overseas in honor of a deceased family member in the U.S. Armed Forces.


Letter Authorizing Fee-free Passports: Request a fee-free passport letter for overseas travel to a grave or memorialization site if you are an immediate family member. Visit our contact page to make this request or call 703-696-6900 for more information

Contact page for American Battle Monuments Commission http://www.abmc.gov/contact-us

You may also write or call: American Battle Monument Commission Courthouse Plaza II Suite 500 2300 Clarendon BLVD Arlington VA 22201 703-696-6900

POW-MIA/DNA

DNA Samples Needed for MIA Identifications There are 83,000 missing and unaccounted for Americans from World War II forward, yet many families of the missing have yet to provide a family reference sample to assist in DNA identifications. Currently, 89 percent of Korean War families have provided samples, as well as 83 percent of Cold War families and 81 percent of Vietnam War families, but only 4 percent of WWII families have. The government last year identified 107 MIAs, but more could have been identified—and faster—if more family reference samples were on file. Please forward the following service casualty office contact information to MIA families in your hometown, as well as to local newspapers:

- Army: 800-892-2490
- Marine Corps: 800-847-1597
- Navy: 800-443-9298
- Air Force: 800-531-5501
- State Department: 202-485-6106

For more information, go to: http://www.dpaa.mil/Resources/FAQs.aspx. [Source: VFW Action Corps Weekly | April 10, 2015 ++]

Nominate Vet Advocates

The County Veterans Service Officers (CVSO) Association of Wisconsin is accepting nominations for its’ Veterans Advocacy Award. Nominees for the award need not be a veteran. However, they must provide, or have provided outstanding service to veterans and their families and have demonstrated a high degree of compassion for their constituents. Nominations are limited to three pages, including a narrative of not more than the two double spaced pages, and an identification page. The identification page will include the nominee’s name, address, telephone number and occupation, as well as the name address and telephone number of the individual submitting the nomination. Anyone may submit a nomination. Deadline for submitting nominations is August 1, 2015, and nominations should be sent to:

CVSO Association of Wisconsin Attn: Bill Rosenau 230 W. Park St., P.O. Box 159 Wautoma, WI 54982 920-787-0446

WAUSHARA COUNTY VETERANS SERVICES IS CLOSED JUNE 1ST- JUNE 5TH For Training CALL AHEAD FOR APPOINTMENTS 920-787-0446 NORMAL OFFICE HOURS WILL RESUME JUNE 8TH.
Lawsuit Would Force Appeal Decisions

A Vietnam veteran long denied his own post-military benefits is suing the Veterans Affairs Department to speed up the disability compensation appeals process, a move that could potentially affect thousands of cases stuck in administrative limbo. On April 6, Marine Corps veteran Conley Monk Jr. filed suit in the U.S. Court of Appeals for Veterans Claims asking for the department to "promptly" rule on appeals pending for more than one year when the case involves a veteran facing medical or financial hardship. Even as VA officials have made substantial progress in recent years on drawing down the backlog of first-time disability Conley Monk Jr benefits cases, the growing backlog of appeals cases has alarmed veterans' advocates. About 290,000 veterans have appeals pending in the system. Many of those cases have lingered for multiple years, leaving some veterans waiting with none or only a fraction of the benefits they are owed. VA officials have said administrative moves alone to certify and transfer appeals entail an average wait of nearly two years. The lawsuit — separate from one filed by Monk last year seeking a review of post-traumatic stress disorder cases for veterans who received other-than-honorable discharges — calls delays in the appeals system "pervasive and unlawful" and worthy of court intervention. William Hudson, a law intern at the Yale Law School Veterans Legal Services Clinic and

Surviving Spouse Website

The Department of Veteran Affairs has created a new internet website for surviving spouses and dependents of military personnel who died on active duty and for survivors and dependents of veterans who died after leaving the service. The site is organized into two broad categories—death in service and death after service. It provides visitors with information and about a wide range of benefits for surviving spouse, dependent children, and dependent parents of deceased veterans and active duty personnel. The site also has information from, and links to, other federal agencies and organizations that offer benefits and services to survivors and dependents. Several options also apply to surviving retirees participating in the Survivor Benefit Plan (SBP), where the spouse is lost through death, divorce or annulment, and the retiree later remarries. Unless the former spouse coverage elected as part of the divorce, retirees who remarry have two choices. They can: Resume the prior level of coverage; Elect not to resume spouse SBP coverage, (this election is irrevocable), this election will not affect child coverage; or if the original election was for reduced coverage, the retiree may request the base amount be increased. There is also a link to frequently asked questions, and answer most questions. For more specific questions the site tells how to contact the VA directly. The new website can be found at http://www.vba.va.gov/survivors

Source: 131st Bomb Wing RAO newsletter | March 2015 ++

Article cut to fit page…….
Interested in forming a PTSD support group? Jennifer Grubba of the Madison Vet Center (608)264-5342 would like to help form a group for Veterans with PTSD in Waushara County. The group would most likely meet in Waushara County. Please call her if you are interested in being part of a support group. And willing to join with other veterans in support of each other. No cost!!!