



# Advocate



Volume 22 • Number 5

September - October 2008

## Footnote.com and the National Archives Launch an Interactive Vietnam War Memorial

Footnote.com and the National Archives and Records Administration have announced the release of an online interactive photo of the Vietnam War Memorial. In addition to releasing this unique version of the Wall, Footnote.com enables visitors to search the Wall for people they know and pay tribute by adding photos, comments and stories of those who lost their lives during the Vietnam conflict.

“The Wall is more than just 58,000 plus names,” explains Richard Schroepfer, a Vietnam War Veteran. “Many of these people were my friends. And now Footnote.com helps me create a remembrance of these fine gentlemen.” View a video of Richard Schroepfer and his experience with the Wall on Footnote.com.


Footnote.com started the project by contracting the expertise of Peter Krogh, a National Geographic photographer, who was given the challenge to photograph the entire wall. Creating this online version of the Wall required almost 1,500 individual photos that were stitched together to create one single image. The process took over five months and resulted in an image that is nearly five gigapixels in size. Despite the immense size, just about anyone can view the image on Footnote.com via an Internet connection.

Footnote.com partnered with the National Archives and Records Administration (NARA) to link the service records and casualty reports to each name on the Wall. “The records of the Vietnam War in the National Archives are essential resources for veterans to revisit their history and establish

their rights,” explains Archivist of the United States Allen Weinstein. “These extensive files are mined by scholars every day as they continue to interpret and understand this pivotal period in American history.” Footnote.com will also be digitizing National Archives photos from the Vietnam War.

Finding someone on the Wall is as simple as typing a name into a search box and letting Footnote.com quickly locate and zoom into the area of the Wall where the individual name can be viewed. Once the name is located, visitors can see the soldier’s service record and view comments, stories and photos that have been contributed by other visitors.

“Footnote.com is about discovering, discussing, and sharing the stories of our past,” says Russell Wilding, CEO of Footnote.com. “We know that there are many untold experiences represented on that Wall, and we hope that this interactive version of the memorial helps those affected by the war by sharing their stories.”

Footnote.com also provides a way for visitors to create a tribute page dedicated to the brave men and women who served in Vietnam, who may not be on the Wall. These pages become a way for veterans, family and friends to share experiences and feelings about this event that has had a great impact on so many. Footnote.com hopes that this interactive Wall becomes a means for healing and paying tribute to those whose sacrifice and service have been under-appreciated for so long. 



## REPORT from the HILL by Chuck Partridge Government Relations

### National Defense Authorization Act for FY2009

As we go to press, the FY 2009 Defense Authorization Bill is still pending. The House completed its version of the bill (HR5658) and the Senate Armed Services Committee has

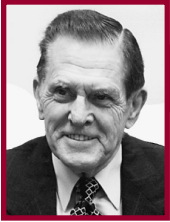
reported out its version of the bill (S3001) but the full Senate has not taken it up. Once the Senate passes its version, the two houses will meet in a joint conference to work out the differences, and then each house will vote on a bill to send to the President for signature.

### Military Pay Raise

Both the House and Senate support a 3.9% military pay raise which provides a one-half percent increase

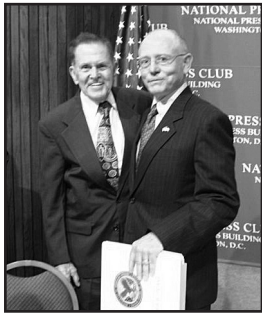
over the private sector Employment Cost Index (ECI). The House would require that military pay be one-half percent higher over the next 5 years to continue the effort to move military pay more in line with the private sector. Although there is no way that military life can be compared to the civilian sector, we support these increases and all of us must work to let our members of Congress know of the hardships and separations inherent in military life.

*continued on page 3*



# PRESIDENT'S COLUMN

## Douglas Russell



Douglas Russell with Dr. James Peake

I recently had the opportunity to attend a luncheon with Veterans Administration Secretary Dr. James Peake. In my opinion we are fortunate to have a man of Dr. Peake's experience and abilities as the head of the VA.

Former Secretary Anthony Principi was a favorite among veterans groups because it was obvious he truly cared about veterans. When he was, in essence,

fired after President Bush's re-election, there was great unhappiness. His successor, James Nicholson, was always seen by most veterans groups as nothing more than a political appointee whose job was to reign in spending at the VA. As a result, Nicholson's tenure was always controversial and contentious. To be fair to him, several things happened that were not his fault, but he took the

brunt of the criticism anyway.

When it was announced that Dr. Peake would follow Nicholson as head of the VA, veterans and veteran groups alike were delighted because it was hoped and believed he would be a significant improvement.

I believe that the appointment of Dr. Peake was outstanding. He is not only a military retiree, he is a physician who held command positions. In short, he is not only one of us, he is a doctor who cares about his patients.

As in most administrations, he has to battle the bean counters who are more concerned with dollars than with the people they're supposed to serve. But I believe he has been doing a very good job under difficult conditions.

I was pleased to know Dr. Peake during my military career and it was good to see him again. While he has less than six months in office, I expect him to continue to serve with the greatest distinction.

*Douglas Russell*

## VA Announces On-Line Claims Applications

The Department of Veterans Affairs (VA) has announced that on-line applications are now accepted from veterans, survivors and other claimants filing initial applications for disability compensation, pension, education, and vocational rehabilitation and employment benefits without the additional requirement to submit a signed paper copy of the application.

Effective immediately, VA will now process applications received through its on-line application website (VONAPP) without the claimant's signature. The electronic application will be sufficient authentication of the claimant's application for benefits. Normal development procedures and rules of evidence will still apply to all VONAPP applications.

VONAPP is a Web-based system ([www.va.gov/onlineapps.htm](http://www.va.gov/onlineapps.htm)) that benefits both internal and external users. Veterans, survivors and other

claimants seeking compensation, pension, education, or vocational rehabilitation benefits can apply electronically without the constraints of location, postage cost, and time delays in mail delivery.

VONAPP reduces the number of incomplete applications received by VA, decreasing the need for additional development by VA claims processors. The on-line application also provides a link to apply for VA health care benefits and much more.

Over 3.7 million veterans and beneficiaries receive compensation and pension benefits from VA and approximately 523,000 students receive education benefits. Approximately 90,000 disabled veterans participate in VA's Vocational Rehabilitation and Employment program.

For more information about VA benefits, go to VA's website at [www.va.gov](http://www.va.gov) or call toll-free at 1-800-827-1000. 🌿

## House Panel To Consider Several Veterans' Health Bills

A House Veterans Affairs Committee panel recently considered a six-pack of bills to overhaul health care services administered by the Veterans Affairs Department. Topping the list is a measure that would allow 'highly rural' veterans enrolled in the VA's health system to receive covered health services through outside providers. Another measure under consideration would extend mental health benefits to family members of veterans who receive non-service-connected treatment. No funding is set out in the bill to pay for family members' mental health care. A third bill being considered by the panel would prohibit the VA from requiring co-payments for medical treatment from catastrophically disabled veterans. 🌿

# Report from the Hill

*continued from page 1*

## **Survivor Benefit Plan**

Last year retiree widows who forfeited part of their SBP to receive Dependency and Indemnity compensation (DIC) were authorized a stipend of \$50 per month. However, widows of service members who died on active duty were not included. The House has included a provision to correct this.

## **Military Medical**

Both the Senate and the House oppose the DoD proposal to impose huge increases in pharmacy co-pays and TRICARE fees. The House of Representatives has the strongest language which prohibits any increase during the next fiscal year, ending September 30, 2009. AMS strongly objects to imposition of fees, and this fight is not over. Once the door is open to fees then they will be increased every year. The House would also prohibit any further outsourcing of medical positions and would add back nearly 1500 medical positions. AMS has long rejected civilianization of medical positions and believes that the continuing reductions affecting the in-house medical system will result in seriously undermining medical readiness. Both chambers have added provisions to provide incentives to beneficiaries for participating in preventive health measures. The House would authorize chiropractic for active duty military. Several improvements to reserve component medical and dental services have been proposed which AMS supports, including basing the premiums for TRICARE Reserve Select on actual costs rather than the federal civilian health program.

AMS continues to urge Congress to act promptly on the National Defense Authorization Act for FY2009 and support the provisions that we have outlined previously in the *Advocate*. There are many improvements in the bill that will increase military readiness, enhance the living conditions of military personnel and improve national defense.

## **New GI Bill**

The Defense Supplemental appropriation Bill for 2008, to help get the military through the rest of the current fiscal year, passed both houses of Congress with a greatly improved GI Bill. The expanded military educational benefit was introduced by freshman Senator James Webb (D-VA), a highly decorated former Marine, veteran of Viet Nam and a best selling author.

Although opposed by the Defense Department as too expensive and so generous it would encourage service members to leave active duty prematurely, the bill passed with strong bi-partisan support. The Department of Defense

usually opposes such long term benefits. It opposed the Montgomery GI Bill using the same rationale in the 1980's. The bill is far more generous than any military education legislation since the one following World War II.

AMS President Douglas Russell stated, "We thank Congress for this excellent GI Bill. It will encourage high-quality young men and women to serve and many will find the military service appealing and will stay for a career. The flexibility of the program will allow them to use it for furthering their education throughout their career and the option of transferring it to their spouse or children."

The new benefit is entitled: "The Post-9/11 Veterans Education Assistance Act of 2008, and as the name states it is for individuals who have served on active duty on or after September 11, 2001.

The new GI Bill is a vast improvement over the Montgomery GI Bill and is long overdue. DoD's opposition was misplaced and it is probable that the bill will improve recruiting and retention. Today's warriors and veterans deserve no less.

## **Medicare Physician Reimbursement Rates**

Under previously passed legislation, Medicare payments to doctors were supposed to have been automatically reduced by 10.6 % effective July 1, 2008, if Congress had not acted to override it.

However, over the course of the summer, Congress could not agree on what action to take and the White House had threatened to veto any bill that had the override language in it. The deadline of 1 July passed without Congressional agreement or action. To give them time to continue to work toward a compromise, the President halted payment of Medicare/TRICARE bills until 15 July. Fortunately, Congress acted and voted to kill the proposed reduction in fees. Although the President vetoed the bill, both houses acted on the same day to override his veto.

An earlier survey by the American Medical Association showed that 60 % of physicians would reduce the number of new Medicare patients they would accept if the cut took effect. Had Congress failed to act, the situation would have been even worse news for TRICARE patients since TRICARE rates are linked to Medicare fees. With the large number of Medicare patients throughout the country, there is some leverage to encourage doctors to accept them in their practices. However, in some parts of the country, many doctors won't accept TRICARE patients. Cutting the fees would have made it even more difficult for military patients to find doctors who would accept them as patients.

*continued on page 6*

## New Board to Ensure Consistency in Disability Ratings

Former servicemembers who disagree with the disability ratings they received when they were discharged as unfit for military duty can now apply to have those ratings reviewed by a new Physical Disability Board of Review.

The Defense Department recently announced formation of the new board to reassess the accuracy and fairness of disability ratings assigned to discharged troops, Sam Retherford, the Pentagon's deputy director of officer personnel management, told American Forces Press Service.

Several task forces and studies cited inconsistencies in the way the military departments assigned disability ratings for similar conditions, he said. The Army tended to assign the lowest ratings, according to the studies.

"The findings were enough to warrant the creation of a Physical Disability Board of Review," Retherford said.

The new board could potentially affect almost half the 20,000 servicemembers processed through the Disability Evaluation System each year. Of these, about 10 percent have combat- or training-related injuries.

The board would, on request, review the cases involving a combined disability rating of 20 percent or less.

Disability ratings have a significant financial impact, determining if the servicemember qualifies for retired pay

and military benefits such as health care and base privileges for life, or a one-time severance pay with no additional benefits.

Those who receive 30 percent or higher disability ratings -- 1,296 during fiscal 2007 -- are medically retired. In addition, more than 4,200 servicemembers were put on a temporary disability retired list last year, a status they can retain for up to five years.

If the combined rating is 20 percent or lower, troops typically are discharged with severance as unfit for duty, Retherford explained. During fiscal 2007, almost 4,000 servicemembers processed through the Disability Evaluation System were returned to duty.

Of those separated as no longer fit for duty, more than 9,200 received a severance. Another 1,150 did not receive a severance, typically because their disabilities were due to misconduct or pre-service conditions.

Not all were happy with their disability rating findings. About 10 percent appealed their cases.


Now, under the Physical Disability Board of Review, troops will have one additional method of recourse. Retherford said he anticipates the board will review about 900 cases per year, all by request.

Former servicemembers separated from the military after Sept. 11, 2001, must apply to have their case reviewed,

Retherford said. The Defense Department plans to launch an awareness campaign to ensure people who qualify for a records review know about the new board and how to apply.

The Defense Department designated the Air Force to operate and manage the new board, but it will include representatives from each military department. Board members will include line officers as well as medical experts, who will review documentary evidence. No former servicemember will appear in person before the board.

The board can recommend that the appropriate service secretary increase a disability rating, uphold the previous finding, or issue a disability rating when the previous board did not assign one. However, the board cannot recommend a lower rating.

Undersecretary of Defense for Personnel and Readiness David S. C. Chu called the board an important step in ensuring affected servicemembers are treated fairly. "The PDBR has no greater obligation to our wounded, ill and injured servicemembers and former servicemembers than to offer fair and equitable recommendations pertaining to the assignment of disability ratings," he said. 

*From American Forces Press Service  
By Donna Miles*

## TRICARE "Backs" New Surgeries




TRICARE beneficiaries with pain from fractured vertebrae may rest assured that TRICARE "has your back." Percutaneous vertebroplasty and kyphoplasty, two minimally invasive back surgeries, are now covered under TRICARE. Either may replace spinal fusion, an invasive surgical procedure, for treatment of fractured vertebrae. The policy change is retroactive to March 1, 2007.

"Our major concern in approving any procedure for coverage under TRICARE is the safety of our beneficiaries" said Army Major General Elder Granger, deputy director, TRICARE Management Activity. "Both of these surgeries are accepted by the medical community and TRICARE."

Usually occurring in patients with osteoporosis, many vertebral fractures heal on their own with bed rest and anti-inflammatory medication in approximately three months. It is only when pain persists beyond three months that surgery is recommended. The tradition-

al treatment was spinal fusion surgery which requires up to 12 hours in the operating room with days of hospitalization afterward. Percutaneous vertebroplasty and kyphoplasty are outpatient surgeries which have patients back to relative normality in 24 hours. Although minimally invasive, all surgeries come with risk and decisions need to be consulted with a doctor.

Approval must be obtained from a provider for either surgery. Beneficiaries with questions about this procedure and its coverage under TRICARE should contact their primary care manager. 


## VA Vet Centers Coming to 39 Communities

*Peake: Provide counseling for all combat veterans*

Combat veterans will receive readjustment counseling and other assistance in 39 additional communities across the country where the Department of Veterans Affairs (VA) will develop Vet Centers by fall 2009. "Community-based Vet Centers -- already in all 50 states -- are a key component of VA's mental health program," said Dr. James B. Peake, Secretary of Veterans Affairs. "I'm pleased we can expand access to bring services closer to even more veterans, including screening and counseling for post-traumatic stress disorder."

The existing 232 centers conduct community outreach to offer counseling on employment, family issues and education to combat veterans and family members, as well as bereavement counseling for families of service members killed on active duty and counseling for veterans who were sexually harassed on active duty.

Vet Center services are available at no cost to veterans who experienced combat during any war era. They are staffed by small teams of counselors, outreach workers and other specialists, many of whom are combat veterans. The Vet Center program was established in 1979 by Congress, recognizing that many Vietnam veterans were still having readjustment problems. The centers have hired 100 combat veterans who served in Iraq and Afghanistan as outreach specialists, often placing them near military processing stations, to brief servicemen and women leaving the military about VA benefits.

VA's 2009 budget proposal seeks \$20 million more than this year's budget for Vet Centers, to include operating and leasing space for the new centers. Eighteen of the counties that will have new centers already have one or more; the other 21 do not. 

### Communities Receiving New VA Vet Centers are:

|  |   |                         |  |
|--|---|-------------------------|--|
| Alabama – Madison  | Florida – Broward, Palm Beach, Pasco, Pinellas, Polk, Volusia | Oakland                 | Pennsylvania – Bucks, Montgomery       |
| Arizona – Maricopa   | Georgia – Cobb  | Minnesota – Hennepin    | Texas – Bexar, Dallas, Harris, Tarrant |
| California – Kern, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego | Illinois – Cook, DuPage                                       | Missouri – Greene       | Virginia – Virginia Beach              |
| Connecticut – Fairfield  | Maryland – Anne Arundel, Baltimore, Prince George's           | North Carolina – Onslow | Washington – King                      |
|  | Michigan – Macomb,  | New Jersey – Ocean      | Wisconsin -- Brown                     |
|  |   | Nevada – Clark          |  |
|  |   | Oklahoma – Comanche     |  |


## Chairman Urges Reduction In Backlog Of Veterans Disability Claims, Notes Progress

U.S. Senator Daniel K. Akaka (D-HI), Chairman of the Veterans' Affairs Committee, held an oversight hearing recently on the undue delay of veterans disability claims processing. This was the fourth in a series of hearings Chairman Akaka has held this year to review veterans' disability benefits. At the hearing, Akaka sought input from VA and other witnesses on what improvements should be made to compliment the historic increase in staffing at the Veterans Benefits Administration (VBA) made by Congress during the last several years.

"I know there is no silver bullet that will solve the claims processing problems that exist at VBA, but we owe it to veterans to make certain that everything that can be done is being done to improve the situation.

The number of veterans filing disability claims is increasing. As more war wounded return from Iraq and Afghanistan, and veterans who have conditions made worse by their advancing age turn to VA for increased ratings, we can anticipate that the number of claims received by VA will continue to increase. VA should make necessary technological, process and staffing improvements to expedite overall efficiency," said Akaka.

In his testimony, VA Acting Under Secretary for Benefits Patrick Dunne highlighted the fact that VA has reduced the backlog of disability claims to 390,000, and reduced average processing times from 183 days to 182. Dunne also reported that VA is processing more claims that they are receiving, despite a 5 percent increase in new claims since last year.

Senator Akaka added, "While I appreciate that the average processing time is decreasing rather than increasing, 182 days is still a far cry from VA's goal of 125 days. VA must work harder to reach their strategic goal." 

### Good News!

The Atlanta Journal-Constitution reported that recent studies suggest that a brief daily nap can compensate for lost sleep, improve alertness and possibly provide some health benefits of nighttime snoozing. One such study, which was published in May by the University of California at San Diego and the Veterans Affairs San Diego Healthcare System, found that napping worked better than caffeine at restoring alertness and memory after sleep deprivation."

## Benefit Offers AMS Members Discount On Auto & Home Insurance

The American Military Society's Group Savings Plus® partnership with Liberty Mutual, the eighth-largest auto and home insurer in the U.S., may save members up to 10 percent on their auto insurance and 5 percent on their home insurance\*. That can be hundreds of dollars back in your pocket. Plus Liberty Mutual offers their customers who have both auto and home policies an attractive added multi-policy discount.

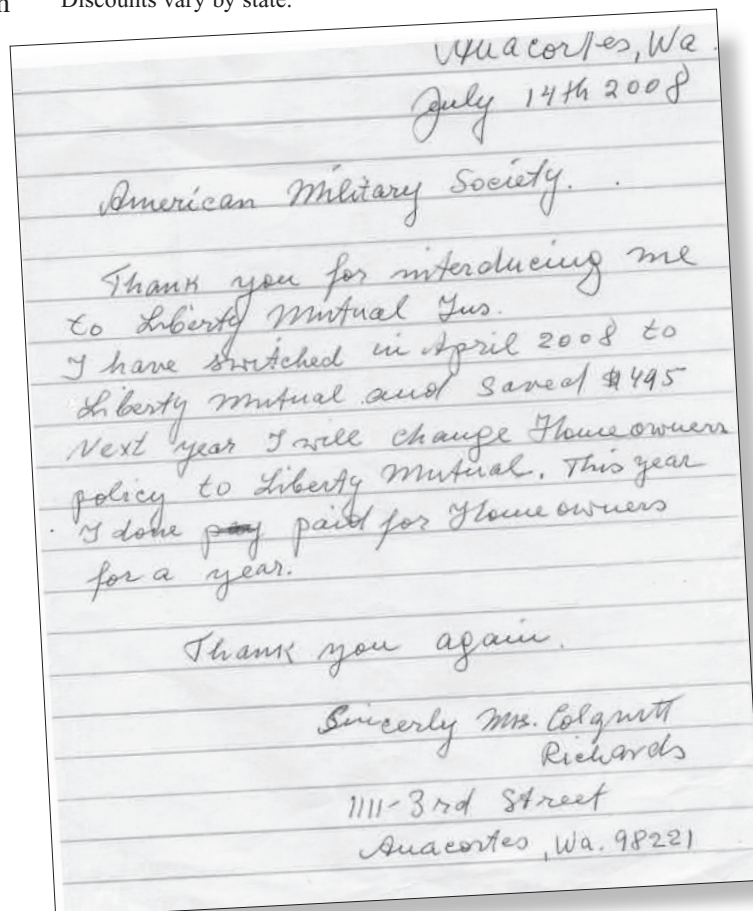
"Who doesn't love to save money? And, forward-thinking groups are enriching their benefits with an array of voluntary affinity programs," says Sherri Lagana, Liberty Mutual director of partnership marketing. "AMS is providing a benefit that is relevant to virtually 100 percent of its members – almost everyone needs insurance for their car and home."

In addition to discounts, Group Savings Plus® offers AMS members:

- Convenient payment by automatic checking account deduction or direct billing to your home
- 24-hour emergency roadside assistance
- 24-hour homeowner emergency repair service
- 24-hour toll-free claims service
- The freedom to purchase insurance the way you want: directly from a local sales representative at more than 400 offices countrywide, through licensed counselors at a toll-free telesales center, or online.
- Outstanding customer service from a local office or regional call centers.

To find out how much you can save, call (800) 524-9400 or visit [www.libertymutual.com/lm/ams](http://www.libertymutual.com/lm/ams) for an immediate, no-obligation quote. ✦

\* Discounts vary by state.



## Report from the Hill

*continued from page 3*

### TRICARE Benefit Restrictions

Last year Congress enacted legislation to prevent employers from offering financial or other incentives to Military retirees in second careers to use their TRICARE benefit. The prohibition took effect on January 1, 2008. Congress recognized that there may be circumstances it had not anticipated and gave authority to the Secretary of Defense to make exceptions. Unfortunately, the proposed rule that DoD developed exceeds what is necessary to insure that improper incentives are not provided by employers and unfairly discriminates against military retirees who have an earned, promised health care benefit.

Military retired veterans, who have earned the TRICARE benefit through their military service, often prefer to use this military health benefit rather than choose another option. Often they choose TRICARE Standard which is less expensive to the government than TRICARE Prime. Those who choose TRICARE Standard often use a supplement to cover the gaps, co-pays and deductibles. In the past they could have their employer pay the premiums, or deduct the premiums from their pay on a pre-tax basis. This provided them with a good health benefit and saved the government some 25% of what TRICARE Prime would cost. As a result of the law prohibiting the employer from helping pay the cost of the supplement, many

retirees are switching to TRICARE Prime which costs the retiree less and the government more. Those who keep TRICARE Standard lose the tax benefit of having their premiums deducted from their pay on a pretax basis by the employer. The increased cost to the government is certainly a case of unintended consequences and AMS is working to have the rule changed. If you are one of the retirees caught in this trap, let us know and we will keep you informed of the status of the action. We may have to go back to Congress. It is a disgrace to place restrictions on retirees using an earned, promised benefit. It not only hurts military retirees and their families but Reserve and National Guard members as well. ✦

# American Military Society Membership Application Form

P.O. Box 90740 • Washington, D.C. 20090-0740 • 1(800) 808-4517

**Yes,** I want to join in support of a strong national defense and take advantage of the great benefits AMS offers. I also understand that I am joining an organization that fights for the compensation, benefits, and entitlements of all military personnel of the uniformed services.

Name: \_\_\_\_\_ Rank: \_\_\_\_\_ Branch of Service: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Active Duty     National Guard     Reserve     Retired     Honorably Separated

1 Year (\$20)     2 Year (\$40)     3 Year (\$60)     Lifetime Membership (\$300)\*

Make your check payable to: *American Military Society*

Visa     Mastercard

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*\* Lifetime Membership may be paid in 10 quarterly payments – 1st payment of \$30 is enclosed.*

Signature: \_\_\_\_\_

## The AMS Advocate

is published bi-monthly by the  
**American Military Society:**

1 (800) 379-6128

**CSM Douglas Russell**  
*US Army Retired*  
*President*

**Membership:**

1 (800) 808-4517

**Insurance Coverage/Billing:**

1 (800) 808-4515

**Insurance Claims:**

1 (800) 808-4516

**Material may be quoted  
or reprinted in part or whole  
as long as proper credit  
is given to AMS.**

Membership in the American Military Society is open to all members from all branches of the armed forces, both officers and enlisted personnel, including Active Duty, Reserve, National Guard, Retired and Veterans, as well as spouses and widows of the uniformed services family. Any individual who supports the aims and purposes of AMS is eligible for Associate Membership. Any business entity, local government, or civic group that supports the aims, objectives, and purposes of AMS is eligible for sustaining membership.

## AMS Benefits and Services

For information about any of these programs, call our Customer Service Representatives,  
**Toll-Free at 1 (800) 808-4514**

**TRICARE Supplement Plans:** Acceptance guaranteed for comprehensive benefits that not only pay your DRG cost-shares, but also pay 100% of your out-of-pocket share of eligible excess expenses. Benefits include a unique premium-paying "Survivors' Benefit" and deep discounts on all your dental, vision, and hearing care.

**Medicare Supplement Plans:** Your choice of coverages when you are eligible for Medicare. Benefits increase automatically with any increase in federal deductibles. Call (800) 247-1771 to request an information kit.

**Cancer Protector Plan:** Guaranteed acceptance, regardless of age, for Members who have lived 10 years or more cancer-free.

**Dental Insurance Program:** Low cost comprehensive coverage that allows you to use your own dentist while covering preventive care and more than 150 treatments and procedures.

**Long-term Care Insurance:** Comprehensive protection that protects your hard-earned assets from the high cost of long-term care. Affordable group rates and discounts for married couples.

### LIFE INSURANCE

For information about AMS sponsored Life Insurance, call **Toll-Free at 1 (800) 808-4517**

**Term Life Insurance:** Our AMS sponsored term life insurance portfolio offers extremely competitive 10, 15 and 20-year guaranteed level premiums.

**Variable Universal Life:** Designed for the investment savvy, this product allows you to build cash value through a broad array of investment portfolios while providing the strength of permanent life insurance. It offers flexibility to anticipate future changes in your life - all inside a financial product that has unique tax advantages.

**Disability Income Insurance:** Protects your most valuable asset - your income.

**Variable Annuities:** Provides you an attractive way to create a personalized retirement income strategy with market-based investment options, while providing extra protection for your financial future.

**Auto/Homeowner's Insurance, call (800) 524-9400, Client #3825**

**AMS Credit Card (Visa), call 1 (800) 808-4517**



**American Military Society**  
P.O. Box 90740  
Washington, D.C. 20090-0740

Address Service Requested

Non-Profit Org.  
US Postage  
**PAID**  
American  
Military Society



# Advocate



IN THIS ISSUE

**President's Column**..... page 2

**VA Announces On-Line Claims Applications** ..... page 2

**House Panel To Consider Several Veterans' Health Bills** ..... page 2

**New Board to Ensure Consistency in Disability Ratings** ..... page 4

**TRICARE "Backs" New Surgeries**..... page 4

**VA Vet Centers Coming to 39 Communities**..... page 5

**Chairman Urges Reduction In Backlog Of Veterans Disability Claims,  
Notes Progress** ..... page 5

**Benefit Offers AMS Members Discount On Auto & Home Insurance**..... page 6



Make sure you don't miss a single issue of the *Advocate*.

Send change of address information to: **Membership Department**

**American Military Society**

**P.O. Box 90740**

**Washington, D.C. 20090-0740**