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# UPPER POTOMAC CHAPTER

Recipient of the 2018 MOAA 5 Star Level of Excellence Award

May 26, 2020

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**Newsletter Editor**

COL Gerard Schumeyer, USA, Ret.

*...from the President*



I am immensely impressed with the empathy, commitment and generosity of our membership.

On 14 April, a few members of the chapter recognized that in many cases the stimulus money we received could be put to much better use to support the less fortunate and those in serious distress in our community because of the COVID-19 pandemic. Your Board of Directors unanimously approved an initiative to solicit our membership to donate some, or all, of the stimulus money they received to the Chapter so we could help veterans or others who are less fortunate and devastated by the COVID-19 pandemic. Just seventeen days later, on 1 May, your chapter had collected \$8,100 and donated \$2,700 to the Maryland Food Bank, \$2,700 to Feeding PA and \$2,700 to The Mountaineer Food Bank: food banks in the

three states we represent. Just two weeks later we had collected an additional \$1,673 that we donated to the MOAA Foundation for their COVID-19 Relief Fund. Our donations average almost \$103 per member, which is an extraordinary performance.

I am very proud of the members of the Upper Potomac Chapter and your efforts to help those less fortunate and suffering because of the COVID-19 pandemic. You should be justly proud of what we have accomplished. The empathy, commitment and generosity of our members bring great credit on our chapter and are in keeping with the highest standards of all seven uniformed services. Well done!!

Regrettably, because of the COVID-19 pandemic and the extreme risk that the virus presents to our age group, we have cancelled the August picnic. The Board will consider our October and

December events at the July meeting and determine if we will hold those events.

Stay safe.  
Never Stop Serving

HMCI

**June Meeting/Luncheon  
and August Picnic are  
Cancelled**

Because of the COVID-19 pandemic and the extreme risk that the virus presents to our age group, we have cancelled our June meeting/luncheon and the August picnic. We will keep you informed regarding future events.

**Memorial Day  
May 25, 2020**



**Recruit a new Member  
In 2020**



**June**

- 3-Stephanie Vaughn
- 9-Dwight Hutchinson
- 13-Bonnie Stubblefield
- 19-Joe Mate
- 25-David Burch
- 26-Bert Thornton
- 28-Susan Konzelman
- 29-Joseph Konzelman
- 29-Robert Reynold

**July**

- 1-Gerry McIlroy
- 3-Marti Langford
- 7-Mac Remsburg
- 8-Roseann Fisher
- 9-Ralph France
- 9-Mike Langford
- 10-Marguerite Kaye
- 10-Jeff Misner
- 15-Bill Benson
- 17-Lynne Sarvaideo
- 22-Hugh McIlroy
- 22-Ron Kelsey
- 29-Caroline King

**MOAA Legislative Action  
Center**

Make sure you visit the MOAA Legislative Action Center at the MOAA web site ([www.moaa.org](http://www.moaa.org)) to keep abreast of important issues. Contact your representative or send an email from the Take Action Center to have your voice heard.



**June**

- 3  
Luke & Barbara Brennecke
- 6  
Don & Cinda Quail
- 10  
Tom & Bobbie Treece
- 11  
Mike & Marti Langford
- 19  
Mac & Peggy Remsburg
- 23  
David & Charlene Denton  
Fred & Sue Thornton

**July**

- 11  
Timothy & Ivonnet Guck
- 13  
Ralph & Carol France
- 14  
Jerry & Mary Lee Schumeyer
- Dave & Lori Burch



**STAY HEALTHY**

## **Chapter COVID-19 Initiative**

Thank you all very much for your outstanding generosity in supporting our COVID-19 Initiative to help needy families. We have received \$9,763 and distributed \$8,100 in donations of \$2,700 each to the Maryland Food Bank, Feeding PA and the Mountaineer Food Bank. The remaining \$1,673 was donated to the MOAA COVID-19 Relief Fund. This would help MOAA with their very important effort in supporting those in need.

## **U.S. Space Force Now Has Official Flag**



The U.S. Space Force now has an official flag. It was presented during a closed-door ceremony on May 15, 2020 in front of President Donald Trump, becoming

the first new service flag in more than 72 years, the White House said. "Space is going to be the future," Trump said during the event, according to pool reports. "We're now the leader in space." Officials in attendance included Gen. John "Jay" Raymond, the new branch's chief of space operations and head of U.S. Space Command, and Chief Master Sgt. Roger Towberman, senior enlisted adviser to the Space Force. Other attendees included Defense Secretary Mark Esper, Air Force Secretary Barbara Barrett, and Chairman of the Joint Chiefs Gen. Mark Milley.

The flag bears the image of the Space Force seal. The North star is uppermost on the design, signifying our core value, our guiding light. "The Delta Wing evokes historic ties to the earliest days of the U.S. Air Force space community and symbolizes change and innovation. Dark and light shades of grey within the delta embody the 24/7 operations of the Space Force, while the placement and upward orientation of the delta reveals the central role of the Space Force in defending the space domain. The delta was used as early as 1942 by the U.S. Army Air Forces and in early Air Force space organization emblems dating back to 1961. Each element of the

design has meaning, according to the Space Force. The globe represents the terrestrial home of the U.S. Space Force and its support to the joint warfighters. The elliptical orbit (around the globe) signifies defense and protection from all adversaries and threats emanating from the space domain. It also represents ongoing interagency cooperation and allied partnerships. The North star also represents security and alludes to a constant presence and vigilance in space now and in the future. Two clusters of small stars represent the space assets developed, maintained, and operated by the U.S. Space Force. The three larger stars symbolize the organize, train, and equip functions of the Space Force.

The Space Force flag was made by artists from the organization within the Defense Logistics Agency that makes all the president's personal flags.

The sixth military service was signed into existence by President Trump on Dec. 20, 2019.

## ROTC and JROTC Awards

The COVID-19 pandemic put a halt to our annual in-person presentation of ROTC and JROTC awards and we had to rely on the postal system to provide awardees with their awards. Here is the report of our efforts.

Hugh McIlroy sent ROTC Awards to two cadets via CPT David Ellington, USA at McDaniel College. The two cadets were:

- Cadet Shannon McCloskey, Mount St. Mary's University, and
- Cadet Alexander Medrano Hood College

Each Cadet received a Certificate of Meritorious Achievement and a check for \$300.

CPT Ellington has not reported how the awards were presented, but he assured Hugh that they would be presented at an appropriate ceremony.

For the JROTC awards, we sent \$100 JROTC MOAA Leadership Awards to four cadets via their program Senior Instructors:

- Cadet Greg Helms, Southern Garrett High School

- Cadet Em Colvin, Martinsburg High School
- Cadet Christopher Pappas, Jefferson High School
- Cadet Victor Suarez, Thomas Johnson High School

## 245 Army Birthday June 14, 1775



## Flag Day June 14, 2020



## Departments of Veterans Affairs Links

Here are the links to the State Veterans Affairs Departments. If interested, you can sign up for their newsletters and announcements. This is

especially important during the COVID-19 pandemic to make sure you are kept current on critical news.

<https://veterans.maryland.gov/>

<https://www.dmva.pa.gov>

<https://veterans.wv.gov/>

## First Day of Summer June 20, 2020



## Chapter Picnic August 15-Cancelled

Our Chapter picnic is cancelled due to the COVID-19 pandemic. We will keep you informed concerning future events. Next newsletter will be published in July.

## 2020 Events/Program Schedule

**June 13** - Maryland Council of Chapters Meeting, via Internet

**June 27**- Membership meeting/luncheon, **CANCELLED**

**July 25**- UPC Board Meeting, 9:30 a.m., via Internet

**August 15**-Annual Picnic, **CANCELLED**

**September 26**- UPC Board Meeting, 9:30 a.m., Ft. Detrick Chapel, Rm 5, Bldg. 1776 Ditto Road, Ft. Detrick

**October 17**- Membership meeting/luncheon, Monocacy Crossing Restaurant, Frederick, MD

**November 21**- UPC Board Meeting, 9:30 a.m., Ft. Detrick Chapel, Rm 5, Bldg. 1776 Ditto Road, Ft. Detrick

**December 19**- Holiday luncheon (Venue to be determined)

Now and Always  
We'll be There.

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## **TRICARE Drops Telehealth Copays, Adds Phone Call Coverage in Emergency Measure**

Tricare will now cover telephone services for some medical appointments and will eliminate copayments for beneficiaries who use telehealth services in place of an in-person visit to the doctor during the COVID-19 pandemic. The Defense Department's health program will cover audio-only remote services for office visits "when appropriate" and will not require copays for telemedicine. The coverage will extend through the end or suspension of the national emergency as declared by President Donald Trump, according to the ruling. The ruling eliminates cost-sharing, including co-pays and deductibles, for in-network telehealth services for both Tricare Prime and Tricare Select beneficiaries in all geographic locations.

It also lifts Tricare's prohibition on medical services via telephone, allowing physicians or other providers to evaluate a patient's symptoms by phone. While the ruling is clear that appointments via telehealth -- with audio and video capability -- are preferred, phone calls are acceptable for those who may not have access to high-speed internet or a computer with Wi-Fi access. The service applies to any illness or injury covered by Tricare, including COVID-19, but calls must be considered medically necessary and conducted by a network Tricare provider within the scope of his or her professional license. To be eligible for reimbursement for a telephone consult, providers should determine that a phone call is "appropriate for accomplishing the clinical goals of the encounter" and must document it, according to the ruling. Any visit requiring a physical exam would not be appropriate for a phone consultation and would not be covered, Tricare officials added. @ MOAA 2020

## **VA Coronavirus Chatbot**

*An interactive digital tool to quickly answer your top questions*

The VA understands that you need answers as soon as possible during the coronavirus pandemic. That's why they developed an interactive **VA coronavirus chatbot** at <https://www.va.gov/coronavirus-chatbot/> to provide precise and timely information throughout this time.

### **What does the coronavirus chatbot do?**

VA created this chatbot, in partnership with Veterans, to respond to the rapidly increasing volume of information requests. The chatbot directs you to information and services, often without requiring a phone call. It has three main features:

- **Basic symptom checking:** Access to a coronavirus symptom self-checker tool, aligned with the latest CDC guidance
- **Veteran-focused FAQs:** Information about how you can access VA health care and other benefits and services during this time
- **Need-specific contact information:** Clear direction to help you connect quickly with someone to talk more about your specific needs

### **How can it help me?**

If you want to know how COVID-19 is impacting your VA health care and benefits, the coronavirus chatbot will quickly answer some of the most common questions. We want to improve your experience while relieving pressure on our contact centers and making sure our staff can help calls with urgent health care needs as quickly as possible. © VA.gov 2020

## **VA's 3-Part Plan to Resume Full Services for Veterans**

As the number of active COVID-19 cases among its patients began to decline, the Department of Veterans Affairs announced a three-part plan for resuming operations at its facilities in the coming months. The effort will largely depend on local COVID-19 conditions, including a declining number of patients with symptoms, a reduction in those testing positive and widespread availability of testing. While the VA's Central Office has drafted a tiered plan for operations, decisions will be made at the local level and may not be in line with other state or federal reopening goals, VA officials said.

The first phase will largely consist of assessments by VA facilities to determine the risks and impact of increasing operations, such as non-emergency procedures like clinical visits and lab tests and admissions to spinal cord injury units. Officials will also explore the capacity for community health care providers to resume seeing veteran patients. In this phase, the Veterans Benefits Administration will increase virtual hearings and formulate plans to resume face-to-face compensation and pension exams, while the National Cemetery Administration will prepare for resuming memorial services and burials that will be held later.

Phase 2 will include expanding non-emergency procedures and medical visits to hospitals and clinics; reopening the department's Fisher Houses; resuming memorial services and burials with military honors, with limited attendance based on local conditions; and in-person services at VBA regional offices, by appointment.

The final phase will build on the others: resuming visitor access to all VA health facilities, including nursing homes, expanding services at VHA and VBA locations, and resuming all other normal operations.

## **What Will Civilian Health Care Cuts Mean for TRICARE Beneficiaries?**

As dire economic news continues from all sectors, it is not surprising that private health systems are feeling the strain – layoffs and closures could affect patient care well after the focus shifts away from COVID-19 response. One report puts job losses in this sector at nearly 800,000 by June. It is a sobering statistic for all patients, but especially for those in the military community whose access to nearby Military Health System (MHS) facilities was already slated for cuts. And it is one reason behind the issue at the heart of MOAA's ongoing Virtual Storming the Hill advocacy effort.

MHS reforms stemming from the FY 2017 National Defense Authorization Act (NDAA) announced prior to the COVID-19 outbreak would remove military retirees and family members of those currently serving from the patient rolls of dozens of military treatment facilities (MTFs). The moves could affect about 200,000 beneficiaries. DoD's plan for these individuals is a simple one: They would turn to private-sector providers in their region for their medical care.

Even before the COVID-19 pandemic, MOAA expressed concern that the private sector may not be able to provide timely, top-notch care to these beneficiaries, and had sought more details on DoD's analysis of care options in areas where MTF access would be limited. Lawmakers shared similar concerns during a March hearing. While DoD has paused MHS reforms during the pandemic, signs and a congressional mandate point to the plans restarting after the outbreak subsides. This policy poses such potential danger to the military health care benefit that asking Congress to update the MHS reform strategy because conditions have changed is the singular focus of MOAA's Virtual Storm efforts. From the outset, MOAA recognized not all efforts to reform military medicine were off the mark – some effort needed to be focused on eliminating redundancies and improve patient care, and standardization between military services was a goal most people could get behind.

Currently, MOAA is not advocating for a plan based solely on creating and resourcing a capability to match the demand we see today, especially since this demand may not be experienced again in decades. Rather, MOAA supports a whole-of-government plan that can leverage our varied talents today and surge if and when needed.

It is intuitive these reforms must take new data points into account. One key data point is the weakened state of private sector care in the wake of this pandemic, and what that could mean for about 200,000 TRICARE users seeking new providers in regions where medical offices may be operating at limited capacity ... or worse.

Thousands of supporters have used MOAA's Legislative Action Center to ask their lawmakers to preserve the military health care benefit. This Virtual Storm sends a clear message to our leaders, but MOAA members and others can emphasize the importance of this issue by reaching out in other ways. Along with letter-writing options, MOAA's Legislative Action Center provides a walk-through on calling your lawmaker. Supporters who use the Legislative Action Center will get:

- Easy access to phone numbers for all their representatives.
- Talking points to engage staffers, or the lawmakers themselves, on what they can do to stop medical billet reductions and military treatment facility (MTF) reorganization.
- A brief feedback section to inform MOAA of your interaction.

Why take the extra time? Re-evaluating military medical reforms in the wake of the COVID-19 pandemic will strengthen your earned benefit and ensure continued access to high-quality care for you and your family. Without action from Congress, these reforms – based on outdated and incomplete analyses – could weaken a system already stressed by pandemic response efforts. @MOAA, 2020

### **MOAA Urges Congress to Temporarily Waive TRICARE Mail Order Copays**

With additional legislation to address the coronavirus pandemic potentially in the works, MOAA is urging congressional leaders to temporarily waive TRICARE mail order pharmacy copays. TRICARE pharmacy copays were set into law with the FY 2018 National Defense Authorization Act. For calendar year 2020, the mail order copay for a 90-day supply of medications is \$10 for generics, \$29 for brand name, and \$60 for non-formulary drugs. Many military families — particularly those with special needs, wounded warriors, and Medicare-eligible retirees and their spouses — take multiple maintenance medications each day.

Even with the COVID-19 national emergency, the Defense Health Agency (DHA) does not have the authority to modify TRICARE pharmacy copays, so MOAA is advocating for a legislative fix. Military families appreciate the option of getting medications at no cost from pharmacies at military treatment facilities (MTFs), since TRICARE mail order copays can quickly add up. The TRICARE pharmacy copay structure creates a strong incentive for patients to visit the MTF pharmacy, increasing risk of exposure to COVID-19. Eliminating mail order copays reduces the financial incentive to use MTF pharmacies and encourages social distancing during the coronavirus pandemic, a precaution that is strongly recommended by the Centers for Disease Control and Prevention. A copay waiver is particularly important since some installations have instituted temporary access restrictions while others have put limitations on pharmacy access intended to protect both patients and health care teams, with more restrictions likely should conditions worsen. MOAA seeks to ensure impacted families do not face sudden, unexpected out-of-pocket costs related to medication copays. Ask your lawmakers to waive mail order copays during the pandemic. @ MOAA 2020



## **MOAA Heads to the Supreme Court to Protect Servicemembers and Their Families**

MOAA has partnered with immigrant advocacy groups and other military and veteran organizations to champion a major immigration issue pending before the Supreme Court that may impact servicemembers and their families. MOAA, along with seven other groups and individuals, signed on to an amicus brief which accompanied a petition for the Supreme Court to hear the case of *Jiahao Kuang v. Department of Defense*. Plaintiffs in the case are challenging a DoD policy that prevents legal permanent residents (LPRs) from entering basic training until their background checks are completed. While the 2017 policy has been replaced with a temporary alternative, DoD reserves the right to reinstate it – and unfairly delay the military careers of LPR enlistees. These delays and other internal DoD policies have discouraged LPRs from joining the military.

“Civilian [green card holder] applications are processed more quickly and less likely to be denied” than those choosing the military route, MOAA Life Member and immigration expert Lt. Col. Margaret Stock, USAR (Ret), stated in congressional testimony. “Immigration lawyers are now advising LPRs not to join the military because it will make their naturalization process more difficult.”

Immigrants have fought for the United States since the Revolutionary War. In recognition for honorable service, the federal government has long offered expedited naturalization to immigrants who served in the military and codified promises of naturalization in law through the Immigration and Naturalization Act. The military has helped break societal barriers on issues of race and immigration status. But it has not been free of race- and immigration status-based discriminatory practices, despite laws in place to provide a path to citizenship. This amicus brief – a document presented to the court by parties not directly involved in the case to provide insight and expertise – intends to highlight the negative impact discriminatory practices have historically had on military recruitment, diversity, morale, and innovation. @ MOAA 2020

## **Coronavirus (COVID-19) Resources**

- [Coronavirus.gov](https://www.coronavirus.gov) https://www.coronavirus.gov
- [Centers for Disease Control and Prevention Coronavirus Website](https://www.cdc.gov/coronavirus2019-ncov//index.html) https://www.cdc.gov/coronavirus2019-ncov//index.html
- [CDC Advice for Higher-Risk Individuals](https://www.cdc.gov/coronavirus/2019-ncov/) https://www.cdc.gov/coronavirus/2019-ncov/
- [VA Coronavirus Website](https://www.publichealth.va.gov/n-coronavirus/) https://www.publichealth.va.gov/n-coronavirus/
- [TRICARE Coronavirus Information](https://www.tricare.mil/coronavirus) https://www.tricare.mil/coronavirus
- [DoD Coronavirus Response Website](https://www.defense.gov/Explore/Spotlight/Coronavirus/) https://www.defense.gov/Explore/Spotlight/Coronavirus/
- [Health.mil Coronavirus Information](https://health.mil/Military-Health-Topics/Combat-Support/Public-Health/Coronavirus) https://health.mil/Military-Health-Topics/Combat-Support/Public-Health/Coronavirus