



# Chattanooga Area Veterans Council

Serving veterans and their organizations of East Tennessee, North Georgia and North Alabama



Photo of Kevin Bate's mural by Lydia Huggins, courtesy WTVC News Channel 9

## Ft Campbell holds Soldiers and Families Appreciation Week

Fort Campbell KY will hold a Soldiers and Families for Life Appreciation Week from 21-24 September 2016. On Friday, 23 September at 1600, there will be a ceremony for the Survivor Outreach Services "Boots on the Ground" display at the 101st Airborne Division (AASLT) Headquarters at 1600. On 24 September there will be two events back-to-back: In the morning there will be a Veteran Benefits Fair from 0800-1200 that will include an opening ceremony with SMA (Ret) Kenneth Preston as guest speaker. This event will include information and seminars on Veteran benefits and also a Health Fair for Veterans (Sponsored by the VA Tennessee Valley Healthcare System. VA ID Card or DD Form 214 with a characterization of service of other than dishonorable required for Health Fair).

Retiree Appreciation will be held Saturday, September 24, 2016, in the afternoon from 1230-1700. Retiree Appreciation will include information on benefits and a Health Fair sponsored by BACH. There will also be several areas to visit using buses including rappelling demonstrations at the Air Assault School, Engagement Skills Trainer, Pratt Museum, Unit Memorials and the 101 CAB Dining Facility for Brunch from 1030-1300. Tell a friend and come out as Fort Campbell honors Veterans, Families and Retirees.

Military Retiree from all Branches of the US Armed Forces are welcome to attend any Retirees Appreciation Day, at any Military Installation. Fort Campbell, KY, Located near Clarksville, TN Saturday, September 24, 2016. Redstone Arsenal, AL, Located near Huntsville, AL, Thursday, September 22 thru Saturday, September 24, 2016.

For more information you may email [usarmy.campbell.imcom-atlantic.mbx.dhr-mpsd-retire@mail.mil](mailto:usarmy.campbell.imcom-atlantic.mbx.dhr-mpsd-retire@mail.mil) Theodore W. Faulkner, Chief, Transition Center/Retirement Services Officer, Fort Campbell, KY, 270-798-5280.

## FIFTY YEARS AGO IN VIETNAM – JUNE, 1966

The political unrest continued across South Vietnam. Several more Buddhist priests immolated themselves in Saigon protesting the Ky regime. In the United States antiwar protesters increased their activities as well. On June 4th a three page anti-war advertisement appeared in the New York Times signed by more than 6400 teachers and professors.

The Central Highlands, in II Corps, masked crucial supply routes carrying munitions and support to the NVA and Viet Cong. GEN Westmoreland, Commander, MACV, aimed to contest any incursions into the area. In the Province of Kontum the enemy had used the monsoon rains as an opportunity to mount a major offensive. Elements of the Army of the Republic of Vietnam (ARVN) 42nd regiment was under siege at Toumorong northeast of Dak To. To relieve the regiment and fight off an estimated regiment sized enemy force, three battalions of the 1st brigade, 101st Airborne Division, a battalion of the 1st Cavalry Division and two Civilian Irregular Defense companies were concentrated near Dak To. Operation Hawthorne, under the command of GEN Willard Pearson of the 101st Airborne, commenced on June 3rd when elements moved north by road toward Toumorong and the 1st Battalion 327 Infantry was deployed by helicopter to blocking positions. By June 6th the besieged garrison was relieved but US forces remained at Tomorong and the surrounding area.

But on June 7th at 0215 a NVA battalion attacked the positions of the US battalions. The initial assault was beaten back but the NVA made two further assaults which continued until 0900 when they were forced back by air and artillery support. That morning another battalion was committed to the battle and the 2/502nd was inserted by helicopter. A large pitched battle ensued for the next two days. Company C, 2/205th was trapped in a bowl area by NVA on three sides in close contact and threatening to overrun their position. When US air support arrived overhead, the company commander, CAPT Bill Carpenter, radioed the forward air controller to "Lay it right on us...they are overrunning us, we might as well take some of them too." The two orbiting F-4C's dropped napalm which hit inside and outside the company perimeter. Further strikes were then called in just outside their positions and the company was relieved by Company A, 1/327th. For the next two days the US units attempted to withdraw from contact but the NVA but their "hugging" tactics reduced the effectiveness of air and artillery support. On the afternoon of the 11th the companies were finally extracted back to Dak To. Bombing of the area by B-52's commenced the morning of the 12th and after 423 tons of bombs were dropped, US troops were quickly lifted back into the bombed area to kill and capture enemy soldiers. This was very successful and the enemy fled the area. Operation Hawthorne had a heavy toll with US casualties of 48 killed and 239 wounded but hundreds of enemy killed. In late June the North Vietnamese 324B Division crossed the DMZ into South Vietnam. Their objective was to "liberate" the Northern provinces. Captured Enemy soldiers revealed the positions of the various battalions of the NVA division. MGEN Wood Kyle, CG of the 3rd Marine Division, recommended that the US launch an operation to drive back the NVA. This operation was approved by GEN Westmoreland approved the operation and planning for Operation Hastings was begun. It was to be a combined force operation with US Marines and forces of the 1st ARVN Division and an airborne task force.

During June four men from four different Divisions performed acts of valor for which they were awarded the Medal of Honor. On June 16th Gunnery Sergeant Jamie E. Howard, USMC, from Burlington, Iowa was serving with Company C, 1st Reconnaissance Battalion, 1st Marine Division. His 19 man platoon was on an observation post deep in enemy territory when a superior Viet Cong force launched a nighttime attack on their positions. He rallied his small force and over a period of 20 hours directed the defense despite being seriously wounded by grenade fragments so that he could not walk. The platoon lost 5 men and every other man was wounded but his actions were largely responsible for saving his force.

Capt Ronald Eric Ray, USA, was serving as a platoon leader in Company A, 2nd Battalion, 35th Infantry of the 25th Division. CAPT Ray was from Atlanta, GA. On June 19th in the La Drang Valley his company came under heavy enemy fire. He directed a reaction force which rescued the balance of his company. Despite being seriously wounded he personally eliminated enemy machine gun positions and attacking enemy positions. When the enemy force was driven back he refused medial aide and evacuation until he was assured his platoon was no longer in danger and the wounded were evacuated ahead of him.

Sergeant Donald Russell Long, USA, from Blackfork, Ohio was serving in Troup C, 1st Squadron, 4th Cavalry, 1st Infantry Division. On June 20th Sgt Long's Troop on a reconnaissance mission came under intense enemy fire. He lead his men in counter attacks, carried wounded for evacuation, distributed ammo and directed the defense of their position. When a grenade was thrown into their midst, Sgt Long dove on it and by absorbing the blast, which killed him, he saved the men in his squad.

Sergeant Charles B. Morris, USA, was serving with Company A, 2nd Battalion (Airborne) of the 503rd Infantry of the 173rd Airborne Division on June 29th. Sgt Morris was from Roanoke, VA. On a reconnaissance mission, his company came under attack. Despite being wounded four times he continued to direct his troops to defeat the Viet Cong force. His platoon captured enemy documents which revealed a much larger attack was planned on their forces which was thwarted.

Compiled by RADM Noah Long, CEC, USN (ret) from information in

1. Web Site of the Vietnam War Commemoration
2. Vietnam, the Naval Story by Frank Uhlig, Jr.
3. Vietnam War Medal of Honor by David Rose
4. Web Site: [en:Wikipedia.org/wiki/Operation\\_Hawthorne](http://en.Wikipedia.org/wiki/Operation_Hawthorne)
5. Web Site: [historyplace.com/unitedstates.vietnam](http://historyplace.com/unitedstates.vietnam)

# Sailor of the Year awardee built veterans support chapter from ground up

David Larter, *Navy Times* 11:53 a.m. EDT July 5, 2016

NAVAL STATION NORFOLK, Virginia – Over his 10 years in the service, Hospital Corpsman 1st Class Samuel Johnson has deployed four times to Iraq and Afghanistan. It was after a difficult deployment to Afghanistan in 2012 that he realized he was having trouble. “I have a good group of friends and I’m really close to my family,” Johnson recalled in an interview. “And when I got back from deployment I just wasn’t reestablishing the relationships I had. I was withdrawing and wasn’t being the healthiest person on earth. So I began to seek a change.” He got involved in an organization that brings veterans and civilians together for sports and social gatherings that work as a support group, friend circle and a way to keep fit. Within two years, he led the group from almost non-existent in the military-laden Hampton Roads region to its status as one of the most vibrant group for young veterans. For his enthusiastic leadership and impact in the lives of fellow vets, Johnson was picked as the 2016 Navy Times Sailor of the Year.

‘Because of the team’... While Johnson was seeking a way to reengage with life back in the states, he came across [Team Red, White & Blue](#), a non-profit that builds a community among veterans and civilians through sports and social events. “I saw this guy running a 5K holding an American flag,” Johnson recalled. “I thought ‘Man, that must be the craziest guy in the world, it creates so much drag.’ But then I thought, ‘Man, that’s cool.’ Then I found out he was doing it for Team Red, White & Blue so I looked into it.” Johnson read every word on their website. He knew he wanted to get involved. To his surprise, he found that the group didn’t have a big chapter in the Hampton Roads area. So he set to work. Johnson took charge of the chapter, donning the trademark red shirts with the slogan, “Enriching veterans’ lives” on the back, and took his small group to local events and 5K races around Hampton Roads. And as people came up to them and word spread, Johnson’s chapter grew. And it grew. Today the Hampton Roads chapter he leads has more than 1,200 members, a mix of post-9/11 veterans, troops, vets from other eras and civilians who want to be involved. Johnson says he puts between 35 and 45 hours a week into Team Red, White & Blue, practically a full-time job. The winners of our 16th annual [Military Times Service Members of the Year](#) awards did not seek honors for the outstanding work they performed on the job and in their communities. That is what makes this award so special: They were nominated by peers and commanders inspired by serving alongside troops who truly went above and beyond the call of duty. In shining a spotlight on the 2016 Service Members of the Year, we salute all who have volunteered to serve their nation in uniform.

This year’s winners will be honored July 14 at a Capitol Hill gala with members of Congress and other VIPs. At the Hampton Roads Team RWB Chapter, Johnson organizes everything from fun runs on Wednesday nights — which are followed by snacks and drinks — to CrossFit workouts and even a triathlon team. At a recent fun-run, one team member put it succinctly: “Without Sam, none of this would be happening.” Johnson’s contribution to Team Red, White & Blue was recently recognized by Volunteer Hampton Roads, which honored him with their Volunteer Achievement Award in April. For his part, Johnson credits the growth of his chapter to his volunteers and team members.

HM1 Samuel Johnson, who’s assigned to Navy Environmental and Preventative Medicine Unit 2, has spent as much as 35 hours a week volunteering with Team Red, White & Blue. “I was embarrassed,” Johnson said. “The one thing I wanted to stress was that everything that has happened with the organization, it’s because of the team. It’s not just me.” But while Johnson pours his time and energy into Team Red, White & Blue off duty, on duty he’s a rock star. Johnson’s shipmates at Navy Environmental and Preventative Medicine Unit 2 say he is the go-to guy when something needs to get done right and that his work ethic inspires those around him. That applies to his everyday duties and to his work as the command fitness leader. “People want to emulate him,” said Chief Hospital Corpsman Thomas DeWitt, one of Johnson’s supervisors. A Tennessee native, Johnson grew up looking up to his mother, a nurse practitioner. Johnson was inspired to pursue medicine during the visits to his mother’s work. He’s made two deployments each to Iraq and Afghanistan, including one tour with the Army as an individual augmentee, Johnson said. A colleague at his command, HM1 Michael Bigelow, said Johnson is thorough and gets the job done right. When asked whether Johnson was the right person to be selected as 2016 Navy Times Service Member of the Year, Bigelow was unequivocal. “I’ve served in the Navy 13 years, I’ve never met anyone more deserving.”

HM1 Samuel Johnson is the Grandson of Brainard Cooper, Chattanooga resident and Navy League member.

## TRICARE Optional/Non-Optional Hospital Transfers

A new pilot program will give some TRICARE users who are admitted to a civilian hospital through the emergency room the option to transfer to a Military Treatment Facility. Active-duty patients, meanwhile, may be ordered to make the switch. The program, announced on 29 JUN, will start 25 JUL and run for up to two years in at 11 Army, Air Force and Navy locations nationwide. Officials want the moves to save both the TRICARE system and beneficiaries money by switching patients out of higher-cost civilian care and into the military system, according to policy documents.

Users who qualify for MTF care, including TRICARE for Life beneficiaries, will be offered a move to a military facility via an ambulance, the policy states -- but only if doctors both at the civilian hospital and the military facility agree that they are stable enough to move and if the latter has space. If the patient is an active-duty service member, he or she can be ordered to swap, while non-active duty patients will not be forced into moving, the documents state.

While the pilot program seeks to save money, the policy also acknowledges the savings could be offset by the cost of moving patients from a civilian facility to the hospital via ambulance. Even so, big savings could be in store for TRICARE users who typically foot a cost share for visiting a civilian facility, such as TRICARE Standard users or TRICARE Reserve Select members. And although they will likely have to pay a cost share for any ambulance transport to the MTF, doing so is likely to be less than the cost share for any extended hospitalization, according to the documents. Although many MTFs currently have patient transfer agreements with local civilian hospitals, the formal pilot program allows TRICARE's regional contractors to take a larger role in arranging the transfers, TRICARE officials said. The pilot was started at the request of the military services, they said. "The pilot project enables DoD to evaluate the operational and financial changes necessary to further the Military Health System's goals of supporting medical readiness, enhancing MTF provider proficiency and graduate medical education programs, saving taxpayer dollars, reducing beneficiary costs and enhancing beneficiary satisfaction," Kevin Dwyer, a TRICARE spokesman, said in a statement.

The program will start 25 JUL 2016. Participating locations include Madigan Army Medical Center, Tacoma, Washington; Naval Hospital Bremerton, Washington; Womack Army Medical Center, Fort Bragg, North Carolina; San Antonio Medical Center, San Antonio, Texas; Navy Hospital Jacksonville, Florida; Naval Medical Center Portsmouth, Virginia; Joint Base Langley-Eustis, Virginia; David Grant Medical Center, Travis Air Force Base, California; Mike O'Callaghan Federal Medical Center, Nellis Air Force Base, Nevada; Wright-Patterson Air Force Base, Ohio; Eglin Air Force Base, Florida; and Walter Reed National Medical Center, Bethesda, Maryland. [Source: Military.com | Amy Bushatz | June 28, 2016]

## VA Cancer Treatment Update

The Department of Veterans Affairs could turn its entire medical system into a nationwide center for excellence for cancer treatment in the next few months. That's the upshot of VA's role within the White House's "moonshot" to eliminate cancer, a \$1 billion attempt to bring about a decade's worth of medical advances in half that time. While other agencies will focus on research and clinical trials, VA doctors will be putting those advances to work as soon as this fall, in hopes of saving more veterans' lives. Dr. David Shulkin, VA's undersecretary for health said "It's going to result in different treatment options and better decisions, and making sure every veteran is getting world-class cancer care." Dr. Shulkin says VA officials will team with the National Cancer Institute, the Prostate Cancer Foundation and a host of federal agencies to support a series of new innovations through the system. But the partnership drawing the most attention is one with IBM's supercomputer Watson, whose genomics technology program will be made available to VA hospitals and doctors looking to pinpoint the best treatment options for veterans battling cancer. "What you'll begin to start seeing is at your VA hospitals, you'll now have access to the most advanced type of cancer diagnostics anywhere in the world," Shulkin said. "IBM isn't doing this with any other system on this scale."

Department officials hopes to help at least 10,000 veterans with the targeted cancer therapies in the next few years. For some with the illness, individualized treatments could be compiled and processed by the supercomputer within a day of the diagnosis. "And almost every month, there is new discovery in this area," Shulkin said. "So this is not only helping the patients we'll see this year, but setting up VA to be the kind of system we all hope it should be for years to come." Those types of offerings should be available to veterans starting this fall. Shulkin said "This is one of our critical areas of focus," "This is taking what we know is the most advanced, very best way to practice, and really making sure we're getting that to as many veterans as possible as quickly as possible." More information on the presidential cancer initiative is available on the White House website <https://www.whitehouse.gov/the-press-office/2016/06/28/fact-sheet-cancer-moonshot-summit-vice-president-biden-announces-new>

[Source: Military Times | Leo Shane | July 4, 2016]

## VA Claims Backlog Update

Predicted: Zero | Actual: 70,000

More than 70,000 veteran's disability claims are currently backlogged in Veterans Affairs processing centers, seven months after department officials missed their public goal of getting the number down to zero. VA Acting Under Secretary for Benefits Thomas Murphy said that figure includes a substantial number of claims left open longer than four months intentionally to ensure veterans are receiving all of the payouts they deserve. But he acknowledged his agency needs to drive that number down further. "This is still a continuous improvement process for us," he said. "We are not satisfied with the number now, and we won't be satisfied until we are much closer to zero."

Roughly one in five benefits claims submitted to the Veterans Benefits Administration ends up taking longer than four months to process, the department's long-held promise for processing the cases. That does not include appeals cases, which follow a different process and often take years to resolve. That ratio and the total number of backlogged cases have remained steady since last fall, when department officials announced they would not reach the goal of zeroing out the backlog by the end of 2015. The goal of eliminating the backlog was announced by President Barack Obama and VA leaders in 2009, part of an ambitious push for service improvements. As recently as three years ago, the backlog total topped 610,000 cases, causing an outcry from veterans and lawmakers frustrated with waits in some instances topping a year. New electronic records systems and mandatory overtime for claims processors drew down the backlog by almost 90 percent over two years, but pulling it down even further has proven difficult. Murphy said three years of mandatory overtime for processors ended in December, although voluntary overtime hours are still being used to keep daily workloads at between 4,500 and 5,200 cases a day. The department also recently launched a new national work queue which allows employees across the country to help regional offices seeing spikes in filings, electronically moving that extra work across state lines to more quickly process the case load. But department officials expect another record-breaking year for case filings in fiscal 2016, adding to the workload despite the processing improvements. "That's the new norm for us," Murphy said. "We're dealing with a volume and complexity of cases that's growing every year."

In the late 1990s, most veterans applying for claims received a disability rating around 30 percent. Today that number is close to 50 percent, reflecting the expanding list of illnesses and injuries eligible for compensation. The number of veterans receiving some form of disability compensation from VA rose from 2.3 million in 2001 to around 4.2 million last year. At least part of the remaining backlog is attributable to cases where veterans update their claim late in the process with new medical information or conditions, requiring extra processing time. Murphy could not give a specific breakdown, but said he believes a substantial amount of the roughly 70,000 remaining cases fall into that category of veterans who need more than 125 days to have their cases properly handled. Still, he said, "our challenge is to identify why some other [cases] do not finish in 125 days, and how do we address that." [Source: Military Times | Leo Shane | July 10, 2016]

## TRICARE Fraud Suspicion - How to Report It

Fraud against TRICARE beneficiaries is in the news. Protecting your personal information is vital to your privacy, and prevents abuse of taxpayer funds. Be safe; don't share your military ID or other personal or family information with an unknown person.

Fraudsters often target TRICARE beneficiaries, including active duty service members. Examples include fake surveys used to collect personal information or offering gift cards to get your information, then billing TRICARE for services you didn't need or never received. If you think you are the victim of TRICARE related fraud, you can report it to the Defense Health Agency. Use their fraud and abuse report submission form at <http://www.health.mil/reportfraud>

You can also report cases where you think someone is trying to defraud TRICARE. For example, if your TRICARE explanation of benefits shows a bill for something you didn't get, tell your TRICARE Regional Contractor. Their contact information is available at <http://www.tricare.mil/About/Regions>.

TRICARE doesn't contact you asking for personal information, such as your military ID number or Social Security number. Only provide that information to a trusted entity, like your doctor, a claims processor, or your TRICARE regional contractor. Be wary of an unknown person offering a gift or reward in exchange for providing a health service. They may be trying to get your information to commit fraud.

For more information about fraud, visit [www.health.mil/fraud](http://www.health.mil/fraud). [Source: Health.mil | July 1, 2016 ]

## VA Conducts Nation's Largest Analysis of Veteran Suicide

The Department of Veterans Affairs (VA) has undertaken the most comprehensive analysis of Veteran suicide rates in the U.S., examining over 55 million Veteran records from 1979 to 2014 from every state in the nation. The effort extends VA's knowledge from the previous report issued in 2010, which examined three million Veteran records from 20 states were available. Based on the data from 2010, VA estimated the number of Veteran deaths by suicide averaged 22 per day. The current analysis indicates that in 2014, an average of 20 Veterans a day died from suicide.

Chattanooga Area Veterans Council

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Check out our website at [www.chattareaveterans.com](http://www.chattareaveterans.com)

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