

Vol. 46, Issue 4

Salus Populi Suprema Lex Este

May 2009

FROM THE EXECUTIVE DIRECTOR

Global Tempest Remembered

Dear Friends of the PHS Commissioned Corps,



As I begin composing this column in late April, the Senate has just confirmed Kansas Governor Kathleen Sebelius as Health

Jerry Farrell Executive Director

and Human Services Secretary. Sebelius was sworn into her new office late in the evening of April 28th where she now faces the growing concern with an outbreak of swine (or if you prefer, H1N1) flu. Nothing like getting off to a fast start. COA wishes Secretary Sebelius every success as she takes up her critically important new post. We hope she has the wisdom to rely heavily on the experience, expertise, and professionalism of the Surgeon General and Commissioned Corps as she confronts her first crisis as DHHS Secretary.

The outbreak of the flu was first reported in this country during the week of April 20th which riveted the attention of us all. Many of you may recall that in 2006, just three years ago, our Foundation conducted a Public Health Leadership Institute in conjunction with the annual conference in Denver. Part of the Leader-

(See Executive Director, page 19)

Blumenthal Named Health Leader of Year

The Commissioned Officers Association of the U.S. Public Health Service (COA) is pleased to announce Susan J. Blumenthal, M.D., M.P.A., a retired Rear Admiral and Assistant Surgeon General in the U.S. Public Health Service Commissioned Corps, as the recipient of the Association's 2009 Health Leader of the Year Award. The COA Health Leader of the Year Award was established in 1987 to recognize individuals who have made notable contributions to the health of the Nation. Contributions can be in research, administration, service delivery or some other area of public health.

RADM Blumenthal is recognized for her lifetime achievements and leadership in raising national awareness and scientific attention to women's health issues, as well as a range of other critical public health concerns. As the first Deputy Assistant Secretary of Women's Health in the U.S. Department of Health and Human Services (HHS), Admiral Blumenthal stimulated and coordinated women's health issues across federal agencies and pioneered many innovative initiatives including the National Centers of Excellence on Women's Health at universities across the country to serve as models for research, training and care, the National Women's Health Information Center, and the "Missiles to Mammograms" program that transferred imaging technology used for space exploration and intelligence purposes to improve the early detection of breast cancer.

She also served as a White House advisor on health issues, as Senior Global Health Advisor in HHS, as the top medical advisor to the U.S. Secretary of



RADM Susan J. Blumenthal, (Ret.)

Agriculture, as Chief of the Behavioral Medicine and Basic Prevention Research Branch, and Chair of the Health and Behavior Coordinating Committee at the National Institutes of Health.

Additionally, RADM Blumenthal has been an international leader in global health including AIDS, emergency preparedness issues such as bioterrorism and pandemic flu, mental illness, suicide, violence, disease and obesity prevention. She fostered numerous international collaborations on health diplomacy including establishing a Middle East Health Initiative and was the U.S. representative to the World Health Organization's Global Commission on Women's Health. Admiral Blumenthal has been at the forefront of applying information

(See Blumenthal, page 4)

BENEFITS OF YOUR COA MEMBERSHIP

CAPITOL HILL REPRESENTATION

COA legislation on Capitol Hill continually supports all Commissioned Corps officers – active, inactive reserve, and retired.

LOCAL REPRESENTATION

COA branches generate new venues for meeting fellow officers within your local area while providing a forum for the discussion of concerns within the Commissioned Corps.

ANNUAL MEETING

With a mixture of business and pleasure, COA's annual meeting invites colleagues from around the country to gather to discuss new scientific presentations while stimulating open forums about health-related issues.

INSURANCE PROGRAMS

COA enables members to participate in several low-cost insurance programs that may continue after leaving the PHS as long as your membership in COA remains current.

FRONTLINE

COA's newsletter reports on monthly activities and items of interest to COA members about the Corps & COA.

SCHOLARSHIP PROGRAM

COA offers thousands of dollars towards college scholarships for children and spouses of COA members.

PUBLIC HEALTH PUBLICATION DISCOUNTS

COA members receive a 10% discount on subscriptions to *Public Health Reports*, the journal of the Public Health Service; and discounts of up to 50% on selected materials available from the Public Health Foundation. Visit the COA website for more information.

AVIS & BUDGET RENTAL DISCOUNT

Members enjoy discount rates on Avis and Budget rentals through COA's website.

RIBBON

The COA ribbon is authorized to be worn on the PHS uniform by members in good standing when attending COA functions.

LEGISLATIVE UPDATE

<u>PHS & New GI Bill</u> **'Transferability' Still Out of Reach**

Following an energetic campaign by COA, the Veterans Administration issued its final rule on March 31 and declared that USPHS and NOAA are indeed entitled to the benefits of the new GI Bill – or rather, to most of them. Everything except transferability.



Navy Officer Physician Assistant (left) and USPHS CCO Nurse Practitioner, CAPT Maurice Sheehan (right) atop a peak in Afghanistan. The Navy PA qualifies for transferability; our own CAPT Sheehan does not.

The agency is required by law to develop regulations implementing the new GI Bill. The VA had ignored the eligibility issue in the proposed rule published on December 23. But it addressed the issue squarely on March 31. The preamble to the final rule referenced COA comments filed during the rulemaking process, mentioned 60 years of precedent, cited Section 213(d) of Title 42, and discussed a 1985 legal opinion. All of this demonstrated to the agency's satisfaction that PHS and NOAA officers are entitled to all new and expanded benefits in the new GI Bill *except* transferability.

What is 'transferability?'

Transferability refers to the opportunity to choose to transfer one's unused educational benefits to one's spouse or children. Transferability supposedly was conceived not as a broadly accessible entitlement, but as a special tool to be used sparingly to focus on narrow retention and recruitment needs. It was to be applied with laser-like precision. Or so COA was told for nearly a year. That raised the concern that even if PHS officers were able to get themselves included in the transferability provision, it might turn out to be something of a pyrrhic victory.

All that seemed to change on April 29, when the Defense Department issued a press release to explain proposed post-9/11 transferability rules. "In a nutshell," the press release said, "any enlisted or commissioned member of the armed forces serving on active duty...on or after August 1 will be eligible to transfer their benefits as long as they qualify for the Post-9/11 GI Bill in the first place..."

Why is PHS excluded?

The language in the statute gives the transferability tool only to the Secretary of Defense and to the Secretaries of the Army, Navy, Air Force and Homeland Security. It does not mention the Secretary of Health and Human Services; this omission excludes the PHS Commissioned Corps. It does not mention the Secretary of Commerce; this omission excludes the NOAA Corps. Changing that language requires a new law.

Why was the law written that way in the first place? To define as ineligible all personnel in two of the federal uniformed services? COA has never received a cogent explanation from the bill's sponsors or the committee of jurisdiction. COA has been told only that PHS and NOAA are not armed, and armed forces are the focus of entitlement legislation aimed at the nation's military.

This has happened time and again, as we all know. It seems to me to be the result of uninformed habit, along with a failure to think-through the implications of continuing to do things this way.

(See Legislative Update, page 21)

Problems with our Current Commissioned Corps Recruitment, Placement, Mentoring and Retention System!

By RADM Jerrold M. Michael, USPHS, (Ret.)

Fred Hiatt, who is a member of the editorial board of *The Washington Post*, wrote an article in the April 27th editorial section of that paper titled, **600,000 Bad Hires**. The text of his article focuses on government employment practices in general but brings to mind the monumental problems currently faced by the PHS Commissioned Corps in view of the lack of a coherent recruitment, placement, mentoring and retention program as well as an operative Force Management System.

That background data for the article comes from Max Stier, who's <u>Partnership</u> <u>for Public Service</u>, has been tracking the issue of employment in the Federal government. Stier points out that the lack of a workable recruitment and placement process is "in itself an indictment of the government, which does not track the ebb and flow of its workforce."

The article goes on to note that, "The government has no strategy for identifying the talent it will need. Its hiring process is a ghastly and, to most young people, an incomprehensible swamp. It fails to invest in the development of the people it does hire. And it does not measure or reward managers for how well they deal with those who work for them." Stier himself comments that "There are tons of people excited but as things stand there is no way in hell the right people will get into government."

One part of the article that resonates with me is Stier's comment that "There is actually one part of government that invests in its people and values them as a resource. The military does things very differently and very smartly."

The crushing comment in the article is the comment that "No one feels responsible for making things work better. The Office of Personnel Management hasn't gotten the job done and in any case is not the right address. No knowledge organization can let HR own talent."

It will come as no surprise that Stier is quoted as saying that, "The executives in each organization have to take charge. But political appointees spend an average of 18 to 24 months in any given job; they want to get something done on their watch, not fix the culture for the long term."

"There has never been a better time to fix this problem," Stier had noted before the inauguration. He proposed then, that "Obama send a clear message across the government that the hiring process is a high priority – that it is not just a personnel issue but a leadership issue. He should order each agency to review its process, channel resources to the task of hiring and hold managers accountable for getting it right."

There are many priorities facing our Commissioned Corps at this time of potential opportunity. Among those priorities must be an organizational readjustment of our currently disjointed personnel system – placed into strange separate units for no practical reason – some time ago during the last administration.

Along with that priority is the need for the studied development of an operative **Force Management System** that will help us to recruit, place and mentor commissioned officers in a mix and assignment process that will permit us to address rather than await the health problems of tomorrow.

COA Membership – Three Simple Rules

Contributed By CDR Dana Hall and LCDR Jonathan Rash

Here are three simple rules to keep in mind as you move through your PHS career. Following these simple suggestions will really help COA and will benefit you as well.

- 1. When you move, let COA know about your address change and the change in your local branch affiliation.
- 2. When you get a T-grade promotion, let COA know about it.
- 3. Take advantage of payroll deduction for payment of COA dues.

Sounds simple, doesn't it? Most of you do these things anyway, and you are to be commended for this. However, I imagine some of you either let one or more of these rules slip your mind, or you assume these things will happen automatically.

COA has no direct link to any government agency to know when new officers

are commissioned; when existing officers' move, become inactive, retire; or when promotions are made. It's not that COA isn't interested or doesn't have time to deal with it - COA cannot obtain this information directly as a matter of government policy. Only officers themselves can provide this information to COA.

So, what's the big deal? Well, if you consider that A) membership dues are by far the largest source of income for COA, and B) a significant number of Corps members have let their memberships lapse or are underpaying based on T-grade rank, it adds up to real money that COA needs in tight economic times. In the last year, 498 COA members let their membership lapse. Out of them, 310 (63%) are active duty officers. Making conservative assumptions about how many officers

(See Rules, page 4)

COA Joins STOP Obesity Alliance

The Commissioned Officers Association of the USPHS has joined the Strategies to Overcome and Prevent (STOP) Obesity Alliance - a collaboration of consumer, provider, government, labor, business, health insurers and quality-ofcare organizations united to drive innovative and practical strategies that combat obesity. Based at The George Washington University Department of Health Policy, the STOP Obesity Alliance is run by a Steering Committee that includes 17th U.S. Surgeon General Richard H. Carmona, M.D.; American Diabetes Association; the American Heart Association; American Medical Group Association; America's Health Insurance Plans; Canvon Ranch Institute; Centers for Disease Control and Prevention's Division

(Blumenthal, from page 1)

technology to improve health, providing national leadership as one of the first in the government to use the internet for health education, envisioning and establishing several award-winning websites including <u>4woman.gov</u>, <u>safe</u> <u>youth.org</u>, <u>nutrition.gov</u>, <u>globalhealth.gov</u>, and <u>4collegewomen.org</u>. Additionally, she is the author of numerous scientific publications, served as the health columnist for national magazines and as the host and medical director for an award winning television series on health.

Upon her retirement from active duty with the PHS Commissioned Corps after 20 years of service, Admiral Blumenthal was awarded the Distinguished Service Medal of the U.S. Public Health Service "for distinguished and pioneering leadership, groundbreaking contributions, and dedicated public service that has improved the health of women, our Nation, and the world." She has received honorary doctorates for her innovative work in identifying and championing understudied public health problems, and marshaling the resources of the government to address them.

RADM Blumenthal is now Director of the Health and Medicine Program at the

of Nutrition, Physical Activity and Obesity (DNPAO); DMAA: The Care Continuum Alliance; National Business Group on Health, National Quality Forum; Partnership for Prevention; Service Employees International Union; National Business Group on Health; Reality Coalition; and Trust for America's Health.

In its role as an Associate Member, COA will participate in efforts to remove the barriers preventing greater national progress on managing and preventing the obesity epidemic. To view the full press release announcing all of the new Associate Members, please visit <u>http://</u> <u>www.stopobesityalliance.org/newsroom/</u> <u>press-releases/</u>.

Center for the Study of the Presidency and Congress, where she leads its Commission on Charting New Directions in the field. She is also the Senior Policy and Medical Advisor at amfAR, The Foundation for AIDS Research, Chair of the Global Health Program at the Meridian International Center and a Clinical Professor at Georgetown and Tufts Schools of Medicine.

Previous recipients of the Health Leader of the Year Award have included former U.S. Surgeons General Antonia Novello, C. Everett Koop, Richard Carmona, and Acting Surgeon General Kenneth Moritsugu; Senators Bill Frist, John Warner, and Tim Hutchinson; Human Genome pioneer Dr. Francis X. Collins; NIH NIAID Director RADM Anthony Fauci, and many other distinguished public health leaders.

The Health Leader of the Year Award will be presented to RADM Blumenthal at the annual Awards Luncheon of COA on Wednesday, June 3rd, 2009 in Atlanta, GA during the 44th USPHS Scientific and Training Symposium sponsored by the PHS Commissioned Officers Foundation. For more information, visit <u>http://</u> www.phscofevents.org/.

(Rules, from page 3)

intentionally let their membership lapse, COA has lost revenues of \$25,000 or more in just one year based on officers not remembering to update their information or forgetting to pay their dues. Automatic payroll deduction of COA dues would have prevented this from happening.

Similarly, annual dues rates are based on status (active, inactive, retired, etc) and on rank (O-3 and below, O-4 and above). If you never alerted COA to your promotion to O-4, then you are probably paying less than your true annual dues amount. Also, local branch dues are calculated and paid to the local branches based on whatever information COA has on file. If you've moved and haven't updated your local branch affiliation, you may still be paying local branch dues, but probably not for your current local branch.

COA hopes to have its new database fully functional before the end of the year. This database will allow all officers to make updates and changes online. However, until that database is brought online, mail, fax, e-mail, or phone are still the means of communication available. Malissa Spalding is the COA Membership Coordinator – if you think you may need to update your information, her email is mspalding@coausphs.org and her contact info is on the back cover of this issue of Frontline. An even faster way to renew your membership is online at http:// www.coausphs.org/members/members renewal.cfm.

Finally, I would like to add a fourth, not-so-simple, but equally important rule. If you appreciate what Jerry and the COA staff are doing for us on Capitol Hill, if you take pride in what you have gotten to accomplish with your local branch, or if you want to see the Corps grow in importance and in parity with our sister services, you know that COA is central to all of these accomplishments and goals. Whether you are active duty, inactive reserve, or retired, you will always be a part of the PHS Commissioned Corps family. On a similar note, I think that we should add this fourth very important rule: Be a COA member for life.

A Transforming Commissioned Corps: The Officer Profile Initiative

By LT Kate Migliaccio and LCDR Diem-Kieu Ngo

The USPHS Commissioned Corps has taken great strides this year with the launch of the Officer Profile (OP) Initiative in March 2009. This initiative was developed by the Commissioned Corps Transformation Team, with the support of the Office of Commissioned Corps Force Management. Once it is fully implemented as part of Direct Access, the OP will contain important information on an officer's career and professional accomplishments.

Transformation has been a facilitator in mobilizing some aspects of change within the Corps. In the past two decades, the Commissioned Corps has used various tools to assist in force management, to include in-house software applications to various commercial products. The past two Department of Health and Human Services (HHS) Secretaries, with the support of the Commissioned Officers Association (COA), have committed themselves to advancing the Corps and its capabilities to address the health needs of the Nation through Transformation initiatives. In 2006, the Commissioned Corps formed several working groups to develop and implement new strategies to better manage the growing force and address staffing needs across the Federal government. As a result, a series of initiatives will be implemented this year, including the OP Initiative, the Direct Access Human Resources system, and a better defined billet system. These new initiatives will help the Commissioned Corps move one step closer to a billet-based force management system similar to the other uniformed services.

The OP is a collection tool that contains records of officers' additional training, licensure, and accomplishments. Voluntary for now, the Office of the Surgeon General encourages all officers to take advantage of this important tool. The primary goal of the OP is to ensure that the right officer is placed at the right job, right agency, at the right time for a right-sized Commissioned Corps. The OP, when fully implemented, will enable officers to better manage their careers by showcasing all of their training and talents/skills, while facilitating force management within the Corps to meet both HHS response and public health needs by assessing aggregate officer skill sets. The information that is collected from officers by the OP will allow the Office of Commissioned Corps Operations to identify officers for special assignments and deployment opportunities; capture the Corps specialized skills; identify needed skill sets for future preparedness; and address unmet public health needs through improved force management.

The next step for the OP Initiative is to move the data in this collection tool into the Commissioned Corps' new Direct Access Human Resource system, which will be launched in early summer 2009. When Direct Access launches, category-specific licenses and certifications *(See Initiative , page 6)*

We've Come a Long Way, Baby

To get an idea of just how far the science of public health and smoking has come in the last 61 years, read the following article that was in the January 30, 1948 edition of the PHS News, a publication of the Public Health Service.

"PHS HOSPITALS GET FREE CIGARETTES – A national tobacco company, which gives free cigarettes to patients at designated Army, Navy, Veterans, and at Marine and other Public Health Service hospitals every week, ended 1947 with a total of more than 40,000 gifts of cigarettes to PHS medical beneficiaries in [the] past two years.

Names of hospitals where patients are to receive free cigarettes are announced weekly on three radio network shows sponsored by the tobacco concern. Company is continuing the donations in 1948."

Sixteen years later, Surgeon General Luther Terry, a hastily reformed smoker, issued his landmark report, Smoking and Health: Report of the Advisory Committee to the Surgeon General of the United States, on January 11, 1964, which concluded that lung cancer and chronic bronchitis are causally related to cigarette smoking. In October, 1983, the Indian Health Service hospital in Keams Canyon, AZ, led the way by being the first Federal healthcare facility to ban smoking. By May, 1987, under the leadership of Surgeon General Koop, all healthcare facilities in the Department of Health and Human Services were smoke free.

Commissioned Officers Association for the U.S. Public Health Service Announces Discounts through Avis and Budget for COA Members **AV//S. Budget** For more details on how you can save money on your next trip, please visit our website at www.coausphs.org.

Retiree Pay Tax Withholding

By Brian McSheffrey

The recent stimulus plan reduces federal income taxes up to \$400 for working individuals and \$800 for couples via smaller tax withholding from their paychecks. Non-working PHS retirees or survivors are not eligible for the tax reduction yet they are still subject to the reduced withholding in their retired pay or survivor annuities.

The Commissioned Corps Compensation Branch is required to use the new tax withholding tables published by the IRS for retired paychecks or annuities.

To add to the confusion, the stimulus bill also provides a \$250 payment to those drawing Social Security or VA disability compensation. So if a retiree or survivor draws VA disability or Social Security, he/she will get the \$250 payment on top of the reduced income tax withholding. A working retiree who also draws Social Security or VA disability compensation will get the \$250 payment and will also have the additional \$400 (\$800 married filing jointly) withheld from BOTH PHS retired pay AND employer pay.

There will be some rude awakenings next year when retirees or survivors discover they have been "under-withheld" and owe an unexpectedly large tax bill on their 2009 taxes. Check out some examples and how you can protect yourself.

Retirees should check with their tax preparer/accountant or can submit a W-4 to the Compensation Branch to modify their withholding to make their necessary adjustment to their retired pay or annuity to avoid a bigger 2009 tax bill.

- Non-working PHS retiree with Social Security or VA disability compensation
 - Will end up having \$400/\$800 (singe/ married) less withheld from their retirement checks this year, but will still owe that money when they file taxes next year.
 - SOLUTION: After the Compensation Branch executes the new withholding, retirees in this category can

submit a new W-4 to the Compensation Branch to adjust the withholding amount.

- Working PHS retirees who DO NOT receive Social Security or VA disability compensation
 - Will have \$400/\$800 less withheld from BOTH their PHS retired pay AND from their employer's pay – a total of \$800/\$1,600 less withheld, which means they will have to pay \$400/\$800 of that back when they file their 2009 taxes next year (you can only get the tax credit once).
 - SOLUTION: People who don't want that to happen can submit the required W-4 to EITHER the Compensation Branch or their employer to adjust the withholding amount.
- Working PHS retirees who DO receive Social Security or VA disability compensation
 - Will get the \$250 payment soon and will ALSO have \$400/\$800 less withheld from BOTH their PHS retired pay AND from their employer's pay — a total of \$800/\$1,600 less withheld. BUT the total tax credit they can qualify for will be \$400/\$800. That means they'll end up having to pay back \$650 (single) or \$1,050 (joint filer) of that money when they file their 2009 taxes next year.
 - SOLUTION: If they don't want that to happen, they should ask the Compensation Branch and/or their employer to increase their withholding an extra \$100-\$180/month for the rest of the year so they come out even.

If you have any questions, we recommend you check with your accountant, financial planner or tax preparer.

(Initiative, from page 5)

will be automatically transferred into Direct Access as well. With the centralization of officers' information in one powerful, searchable database, officer data will be automatically aggregated into an eResume for each officer. The eResume will provide the Corps with a "picture" of the whole officer.

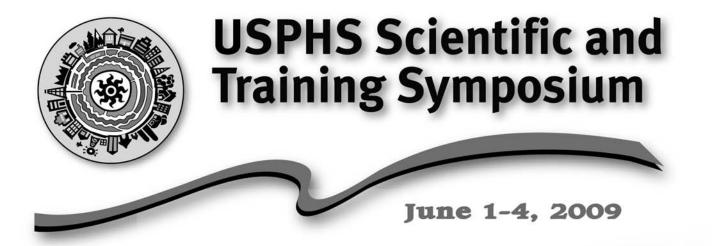
In addition, the coupling of the OP with the implementation of transformed billets later this year, each officer and the Commissioned Corps as a whole will benefit from expanding job/billet opportunities and enhanced recruitment programs. Furthermore, it will also enable the Corps to offer career development tracks in support of the public health needs of the country. These merged systems will become the billet-based force management system for which the Office of the Surgeon General, among many others, have long advocated.

The OP has been highly successful and attractive to PHS officers. Since the middle of March, close to 400 PHS officers have entered their information. We have seen an increase from 200 to 400 entries in the past month.

The OP interface is accessible through the Commissioned Corps Management Information System (CCMIS) website (https://dcp.psc.gov/cclogin/ccmislogin. aspx) for Corps officers to enter and update their profile. The OP will be implemented in phases. The first phase of the OP is to collect basic information about degrees and certifications. For more information on the OP, including instructions on how to register your information, please access the Officer Profile Initiative page at <u>http://usphs.gov/transformation/ op_faq.aspx</u>.

Since the inception of the Commissioned Corps in 1798, much advancement has taken place to promote, protect, and advance the health of the Nation. The Corps has moved from a small group of officers to a strong force of over 6200 officers today. Corps Transformation is well underway, with many great programs and initiatives in the pipeline that will undoubtedly build a stronger Corps.

Both MOAA and the compensation branch contributed information to this article.



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Fabric/Style: Constructed from 6.1-ounce heavyweight 100% cotton; taped shoulder to shoulder, coverseamed neck, double-needle hem. USPHS on chest. Adult Sizes: S-2XL Colors: Navy (left) and Athletic Heather Grey (right)





Sport-Tek® - Jersey Knit Short. T110 Fabric/Style: 6.8 ounce, 100% cotton jersey knit; elastic waist with drawstring. No pockets. USPHS logo on left leg. Adult Sizes: S-2XL Color: Navy



Sport-Tek® - 1/4 Zip Pullover Anorak. JP73

Fabric/Style: 100% nylon shell with lightweight flannel upper body lining/hood, nylon-lined sleeves/lower body for easy on/off; locker loop, elastic cuffs, drawstring hood and bottom hem with cord locks, a front muff pocket with zippered pound. 3.5" USPHS logo on left chest. Adult Sizes: S-2XL Color: Navy



Sport-Tek® - Nylon Pant. JP74

Fabric/Style: 100% nylon outer with poly/cotton jersey lining from the knees to waist, nylon lines the lower leg for easy on/off; triple-needle stitching in the waistband with drawstring, extended leg zipper and elastic cuffs, side-seam pockets, back zippered pocket. Adult Sizes: S-2XL Color: Navy

The order form can be found at the COA Evergreen website: <u>www.coa-evergreen.org</u>, select "Product," and then "Order Form."

For questions, contact CAPT Marjie Witman at mwitmanphs@yahoo.com or CAPT John Leffel at john_leffel@partner.nps.gov.

2009 COF Scholarship Program in Full Swing

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) is sponsoring the COF Scholarship Program to assist dependent children or dependent spouses of active duty, retired, or deceased officers of the USPHS Commissioned Corps, who are members of COA.

COF is firmly committed to encouraging the pursuit of higher education and is pleased to provide this opportunity for financial assistance in the form of scholarships for those eligible persons.

Scholarship Amounts

The scholarship awards range from \$250 to \$2000 depending on the applicant's qualifications.

Applicants to the PHS Commissioned Officers Foundation Scholarship Program must fulfill the following requirements:

- 1. Dependent children or dependent spouses of active duty, retired, or deceased officers of the USPHS Commissioned Corps, who are members, in good standing, of COA as of the applicant deadline date of June 1, 2009.
- 2. High School seniors/graduates who plan to enroll or students already enrolled in a full-time undergraduate or graduate course of study at an accredited two or four-year college, university, or vocational-technical school.
- 3. Recipients must enroll in a course of study no later than Fall 2009.

Scholarship recipients will be evaluated on the following standards; (in no particular order)

- The basis of the applicant's academic record.
- The applicant's school counselor's recommendation.
- The illustration of leadership and participation in school and community activities.
- Applicant's completed essay.

COF Scholarship payments are made in one installment. Check payments are mailed to the recipient's home address. The application is available on the COF web site (<u>www.phscof.org</u>), by writing to the COF, 8201 Corporate Drive, Suite

200, Landover, MD 20785, or e-mail to Brian McSheffrey at bmcsheffrey@ coausphs.org.

Online Leadership Training Offered by JEMSI

The Commissioned Officers Foundation Education Committee announces the availability of online leadership training offered by the Joint Medical Executive Skills Institute (JEMSI). JEMSI was established in 1992 primarily to meet the needs of military officer clinicians who were taking on leadership positions in the military health care system. The target audience is DOD and other government agencies. The courses are available online, free of charge and consist of 40 core competencies in seven major categories. Six competencies have direct application to civilian health system professions:

- Leadership and Organizational Management – strategic planning, organizational design, decision-making
- Health Law/Policy public law, medical liability
- Health Resources Allocation financial management, human resource management, information management & technology
- Ethics in the Health Care Environment – ethical decisionmaking; personal & professional ethics; organizational ethics

• Individual and Organizational Behavior – group dynamics, conflict management, public & media relations

• Performance Measurements and Improvement – Integrated health care delivery systems, quality management, patient safety.

The modules are developed through a contract for content development with Georgetown University Department of Health Service Administration in the School of Nursing and Health Studies.

JEMSI has also added filters that will define a specific subset of modules for a group. For example you can search by "junior grade officers" and it will produce a set of modules specific to that cohort. Or you can go in and ask for modules specific to "leadership" and it will pull out all of those modules in a set that will relate to the topic of leadership.

You can access JEMSI through the following websites: <u>http://jmesi.army.mil/</u> or <u>http://jmesi.army.mil/courses/home pages/pages/login.asp</u>.

A special thank you to RADM Richard Walling, (Ret.) and CAPT Bruce Chelikowsky, (Ret.) for their work on JEMSI.

WELCOME NEW COA MEMBERS

LT Osvaldo Baez, New England LT Tina R. Bhavsar, Atlanta LT Lynn M. Braddock, Unaffiliated LT Julie Chodacki, Unaffiliated LT Edwin V. DeGuzman, SoCal LTJG Dave G. Erezo, Unaffiliated LTJG Kathleen V. Ferguson, Florida LT Theodore O. Garnett, District of Columbia CAPT Raymond F. Jarris, Jr., Evergreen LTJG Matthew C. Johns, District of Columbia LT Anthony L. Johnson, Central Texas LT Julian P. Jolly, Atlanta

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PHS Commissioned Officers Foundation for the Advancement of Public Health Acknowledges...

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The COF Dependent Scholarship Program Needs Your Support!!

t is that time of the year again that the Commissioned Officers Foundation is asking for your support of this valuable program. Last year the Atlanta Branch, Bemidji Branch, Fort Duchesne Branch, Rio Grande Branch, and Oklahoma Branch, as well as the OBC Class 004, and the Ronald Lessing Memorial came through with COF scholarship donations. This year, the Bemidji and Little Colorado River Branches has already donated towards the 2009 COF Scholarship Fund.

Here are the details of donating in the form of a COF Scholarship:

- The minimum donation for a scholarship is \$250.
- Branch's that donate can name the scholarship as they choose. Most branches simply name the scholarship after their

particular branch to gain the much deserved recognition.

- Branches that donate may choose one representative from their branch to serve on the Scholarship Awards Committee.
- Individuals that would like to donate are highly encouraged as well. Again, they may name the scholarship as they wish.
- Individuals that donate may serve on the Scholarship Awards Committee.

This is an opportunity for Branches, PAC/PAGs to participate in this worthwhile program. This can also be a meaningful gift for a retirement ceremony or a remembrance in lieu of flowers for a departed officer/loved one. If you would like to donate or discuss this option any further, please contact Brian McSheffrey at 301-731-9080 or bmcsheffrey@coausphs.org. CAPT Dennis A. Philipp, (Ret.) CAPT Linda M. Pottern, (Ret.) CAPT Gary K. Radtke, (Ret.) CAPT Joseph K. Reed, Jr., (Ret.) LCDR Morrisa B. Rice CAPT Mark J. Rosenberg, (Ret.) CAPT Virginia K. Saba, (Ret.) **CAPT Eleanor B. Schron** CAPT David C. Schrupp, (Ret.) CAPT Harold G. Scott, (Ret.) CAPT Dale E. Smith, (Ret.) **CAPT Charlotte A. Spires** LT Martin Stephens CDR David W. Teborek, (Ret.) RADM John G. Todd, (Ret.) CAPT Willis A. Trawick, (Ret.) CAPT Dale H. Treusdell, (Ret.) CAPT John A. Vaillancourt, (Ret.) CAPT Joel J. Vernick, (Ret.) CAPT John H. Waite, (Ret.) CAPT Tonie M. Waller, (Ret.) **CDR Charles M. Weber** CAPT Paul P. Weinstein, (Ret.) CAPT Richard W. Whitney, (Ret.) CAPT John C. Yashuk, (Ret.) CAPT Robert N. Zimmerman, (Ret.)

* In Memory of CAPT Irving Herbert Schlafman, (Ret.)

Retiree Breakfast Set!

The Annual Retiree Breakfast will be held at 7:15 a.m., Thursday, June 4th at the Atlanta Marriott Marquis Hotel. This breakfast will be in conjunction with the 44th annual Public Health Service Scientific and Training Symposium, June 1st – 4th 2009 in Atlanta, GA.

Hosted by the PHS Commissioned Officers Foundation, the annual retiree breakfast has become one of the highlights of the Symposium. Admiral Steven Galson, U.S. Surgeon General (Acting) will be the featured speaker. This affair is free and open to all retired USPHS Commissioned Officers and guests.

We invite you to renew old acquaintances, make new friends, and learn about the vitality of the Corps today and future plans for enhancing that strength. Please note you will have to register separately for the rest of the symposium agenda.

If you do plan to attend the Retiree Breakfast, please reserve your seat with Brian McSheffrey via e-mail at bmcsheffrey@coausphs.org or Julia Veeder at jveeder@coausphs.org or by phone at 1-866-366-9593.



CAPT Laurence D. Reed, Acting Editor

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Public Health Reports

LCDR Shane Hoffmann Receives 2009 Valued Partner for Engineering Excellence

USDA Rural Development Presents Award at the 2009 Water and Environmental Programs Conference

The U.S. Department of Agriculture (USDA) Rural Development Wisconsin Acting State Director, Lori Wells, announced March 11, 2009, the 2009 Valued Partner Award for Engineering Excellence to LCDR Shane Hoffmann, Professional Engineer (P.E) for Indian Health Service (IHS), Division of Sanitation Facilities Construction located in Rhinelander, WI. LCDR Shane Hoffmann is an active duty United States Public Health Service Commissioned Corps Officer with the IHS, which is part of the U.S. Department of Health and Human Services.

This honor recognizes individual Professional Engineers that demonstrate integrity and dedication in assisting rural communities financed with the USDA Rural Development Water and Environmental Program funding.

Mark Brodziski, USDA Rural Development Business & Community Programs Director, presented the award to Hoffmann, on behalf of Wells, at the 2009 USDA Rural Development Water and Environmental Programs Engineers' conference held in Plover, WI.

"Hoffmann has demonstrated a deeprooted conviction in assisting Wisconsin's tribal communities through the technical and bureaucratic processes including planning, designing, permitting, financing, and constructing of water and wastewater systems," said Wells, "The purpose of the Rural Development Water and Environmental Program is to provide loan and grant funding for water and waste water utility projects serving the most financially needy rural communities."

The 2009 USDA Rural Development Water and Environmental Programs Engineers' conference was hosted by USDA Rural Development State Engineer, Angela Hanz, P.E. This biennial meeting gathered approximately 80 engineers, consulting engineers' staff, and USDA Rural Development representatives statewide. The objective of the conference was



(Left to Right) Mark Brodziski and LCDR Shane Hoffman

to discuss USDA Rural Development programs and funding issues relating to the engineers and their clients that are applying for funding for water and wastewater utility projects.

Hoffmann attended Michigan Technological University and graduated in 1996 with a B.S. in Civil Engineering. After school, Hoffmann was hired with the Indian Health Service (IHS), Division of Sanitation Facilities Construction and stationed in Bemidji, MN. Hoffmann worked in Bemidji until February of 1999 when he took a position with IHS in Anchorage, AK and was assigned to the Alaska Native Tribal Health Consortium. He obtained his license as a Registered Professional Engineer in the State of Alaska in 2005. In July, 2005, Hoffmann moved back to Wisconsin for a Senior Field Engineer position in the

Rhinelander District Office of the Indian Health Service.

Hoffmann is responsible for planning and designing projects and assisting in development of funding applications as well as construction management for many Rural Development financed projects; most recently the replacement of the Lac du Flambeau Pumphouse, the Lac du Flambeau Downtown Water and Sewer improvements, the Stockbridge-Munsee South Central Water System and Sewer Expansion, the Stockbridge-Munsee Water Intertie and the Sokaogon Chippewa Wastewater Collection System and Wastewater Treatment Facility.

Brodziski said, "During these hard economic times, the need for rural communities to utilize their community and financial resources to their fullest *(See Hoffman, page 14)*

USPHS Volunteer in Support of the 2009 Girl Scouts Thinking Day

Each year on February 22, Girl Guides and Girl Scouts all over the world celebrate World Thinking Day. In 2009, the World Thinking Day Theme was "Stop the Spread of AIDS, Malaria and Other Diseases." In support of this theme, six USPHS volunteers participated in the Girl Scouts Service Unit 31-5 Thinking Day 2009, taking place at Shady Grove Middle School in MD, on February 21, 2009. Approximately 70 Girl Scout members, aged from 5-12, along with their parents participated in the event. The six USPHS officers presented a PowerPoint presentation on Healthy Eating/Obesity and a poster presentation on prevention of the West Nile Virus from mosquito bites to the group. There were also educational flyers provided for the children and parents. The event raised the awareness of the US Public Health Service presence in the community, and both education presentations were very well received by parents and children.

(Hoffman, from page 13)

advantage has elevated. Through the assistance he provides to tribal communities, Mr. Hoffmann has demonstrated a longterm professional and personal commitment to the future of rural communities in Wisconsin. Rural Development is pleased and proud of our relationship with Shane Hoffmann and the Indian Health Service."

USDA Rural Development's mission is to deliver programs in a way that will support increasing economic opportunity and improve the quality of life of rural residents. As the lead federal agency for rural development needs, last year USDA Rural Development administers over \$540 million dollars this past year to rural Wisconsin communities. Funds are used to finance and foster growth in homeownership, business development, and critical community and technological infrastructures. Further information on Rural Development programs is available at a local USDA Rural Development office or by visiting USDA's web site at http://www. rurdev.usda.gov/wi.



(Left to Right) CAPT Sharon Gershon, LCDR Hyon-Zu Lee, CDR John Quinn, LCDR Anna Park-Hong, CDR Ruby Wu, LCDR Christina Lee, and LCDR Jeff Tworzyanski

IN MEMORIAM

CAPT Charles J. Donnelly, USPHS, (Ret.)



Captain Charles J. Donnelly, USPHS, (Ret.), 88, of Silver Spring, MD, and a COA life member, passed away on April 11, 2009 of pneu-

monia.

CAPT Donnelly was born in Glasgow, Scotland, and moved with his family to Ann Arbor, MI, when he was four. He received a bachelor's degree in zoology in 1942, a dental degree in 1945 and a master's degree in public health in 1948, all from the University of Michigan. From 1945 to 1957, he served in the Navy Reserve Dental Corps. He moved to Rockville, MD in 1956.

CAPT Donnelly worked at the

National Institute of Health from 1956 to 1973. While at NIH, he worked for what is now known as the National Institute of Dental and Craniofacial Research, first as an investigator and later as chief of research grants, chief of dental caries and hard tissues, and chief of epidemiology. For his last assignment, he was the acting chief of caries prevention and research.

After he retired from the Public Health Service in 1973, he taught at the University of Maryland dental school, and from 1974 to 1984 was a professor at what is now the Johns Hopkins Bloomberg School of Public Health.

During his career, he worked as a researcher for the World Health Organization in Poland and also conducted scientific research for NIH in Papua New Guinea, Colombia and Venezuela.

He was a diplomate of the American Public Health Association and the American Board of Dental Public Health.

Survivors include his wife of 60 years, Gloria Gray Donnelly of Rockville; six children, a sister, six grandchildren, and a great-grand-daughter.

Commissioned Corps Team Deploys Aboard USNS Comfort

Health Diplomacy Weekly Update 2009, Week #3: April 16-22

n support of U.S. Government Health Diplomacy initiatives, the USPHS Commissioned Corps continues to participate with the U.S. Navy on shipbased missions designed to increase the operational capacity of U.S. government personnel to deliver humanitarian assistance, perform public health assessments, conduct public health infrastructure repairs and provide health care training of indigenous health care workers.

A PHS Commissioned Corps team deployed on the Navy hospital ship USNS Comfort (T-AH-20) for Operation Continuing Promise 2009 – a global health diplomacy mission with planned operations in the Caribbean, Latin America, the Pacific Rim and Pacific Islands during the spring, summer and fall of 2009. The USPHS Officer-in-Charge (OIC) is CAPT Arturo Bravo.

The ship departed Haiti on April 20th and arrived in the Dominican Republic



LT Timothy McCreary, USPHS Physician Assistant, examines the throat of a young Haitian girl

on April 21st. Members of USPHS Team 1 provided care in eight diverse medical sites, presented to USNS Comfort crew on Force Protection and Blood Borne Pathogen, sprayed uniforms with Permethrin to allow staff to continue their missions in an austere ashore environment, and provided education to over 200 Haitian participants and 1,000 contact hours on health promotion and wellness topics. They also participated in a Community Relations Project with 30 other *USNS Comfort* personnel, painting the courtyard wall at the pharmacy and the courtyard wall in front of the Radiology building.

While in Haiti, the primary care, dental, pharmacy, preventive medicine and veterinarian teams helped in Cité Soleil, Killick and Cazales, towns in or near Port-au-Prince, the capital of Haiti.

The primary care team saw and treated mixed pediatric and adult patients at the Killick site, triaged patients in the casualty receiving area aboard the ship, preparing them for surgery, and provided sick-call coverage aboard ship.

The dental team saw patients at Cité Soleil Site, performed restorations, cleanings and extractions, instructed and *(See USNS Comfort, page 16)*



Notice to Indian Health Service Retired Engineers and Environmental Health Officers

Retired PHS Officers who served in the IHS Environmental Health Program are planning another reunion to be held in March of 2010 in Laughlin, NV. The planned meeting date is the 9th of March, with arrival on the 8th and departure on the 10th. The reunion will once again be held at the Tropicana (formerly the Ramada Express) where the 2007 reunion was held. One focus of the meeting will be to preserve the legacy and accomplishments of those who have served with IHS as an engineer or sanitarian. Officers with personal photos or video tapes of past projects, presentations, workshops, etc. are encouraged to bring those along to the meeting or send them to CAPT Bruce Etchison, (Ret.) for scanning or copying and possible incorporation into a documentary video. CAPT Alan Dellapenna, Gold Book Project Coordinator, is also planning to attend to present an update on the Office of Environmental Health history.

We are close to a year out in planning for this reunion and would like to reach as many retired IHS Engineer/EHO officers



2007 Reunion Attendees

as possible so they may plan accordingly to attend. For more information or to suggest additional agenda items please contact CAPT Etchison at the following address or e-mail.

Bruce M. Etchison, R.S., MPH, Sr. Institutional Environmental Health Consultant Alaska Native Tribal Health Consortium, Division of Environmental Health and Engineering 1901 Bragaw St., Suite 200, Anchorage, AK 99508 Phone: (907) 729-3575, Fax: (907) 729-4090, E-mail: bmetchison@anthc.org Website: www.dehe.org

(USNS Comfort, from page 15)

performed oral hygiene instruction to patients while in the dental waiting area, gave fluoride varnish applications and oral hygiene instructions to patients during treatment, and participated in field unit dental equipment trainings.

The pharmacy team worked at the Cité Soleil, Killick and Cazales sites, filling and dispensing prescriptions for patients and maintained the inventories for the various sites, and while in transit to the Dominican Republic the team prepacked unit dose medication and medication packs.

The preventive medicine team checked for free chlorine residual in the tap water in restrooms at the Medical School and the Nursing School and found "trace" at both locations; 0.1 - 0.2 mg/l. The team collected samples for



LCDR Bryan Buss, USPHS Veterinarian, vaccinates a cow

coliform bacteria analysis, made positive contacts with the Sanitation Director and the General Services Director, collected photos, notes, discussed detail of current operation and past practice, including non-functioning water treatment and wastewater treatment, non-functioning wells (there were at least three), unsecured storage of solid and biohazard waste, and non-functioning incinerators, and conducted initial site assessment in the Dominican Republic and provided recommendations to Preventive Medicine leadership staff.

The veterinarian team supplied the host nation veterinarians with presentations in French (Avian influenza; Teschen disease of swine (enterovirus encephalomyelitis); Brucellosis; Heartwater; Viral encephalitides; Exotic Newcastle disease), provided the host nation veterinarians with disease-specific technical presentations on 40 animal diseases of importance and 43 general audience presentations on zoonotic diseases, and the team performed 191 procedures (including a variety of surgical procedures), and provided services for 11 different domestic and food animal species.

BRANCH NEWS

Atlanta Branch Recognized for Cleanup

The Georgia Department of Transportation (GDOT) recognized the Atlanta Branch of the Commissioned Officers Association (ACOA) with a Certificate of Appreciation for its long-time partnership in keeping Atlanta's Ponce de Leon Avenue clean of litter. It is ACOA's first recognition from GDOT. The award was accepted by LCDR Anna Satcher-Johnson (ACOA



(L) LCDR Anna Satcher-Johnson accepts GA Department of Transportation Award for Atlanta Branch for Road Cleanup recognition from (R) CAPT Lester Sharpton, (Ret.)

Community Service Co-Chair) from CAPT Lester Sharpton (Ret) on behalf of GDOT in a ceremony at the CDC campus in Chamblee, GA, during the ACOA's December meeting.

The road cleanup is ACOA's longest continuing community service project dating back to the 1990's. Over the years, the project has involved hundreds of volunteer active duty and retired commissioned officers, co-workers and family members contributing thousands of man-hours, almost always on weekends.

ACOA cleans the roadway every threemonths on both sides of a one-mile stretch of one of the busiest entry points to Atlanta on multi-lane Ponce de Leon Avenue. It includes four US Highways (23, 29, 78 & 278) and two-state roads (8 & 10). It lies in the City of Atlanta, DeKalb County and includes the siding along four of Atlanta's oldest parks (Springdale, Virginia, Oak Grove & Shadyside Parks). The setting was used in the 1989 motion picture, "Driving Miss Daisy," starring Morgan Freeman.

GDOT maintains signs near Briarcliff

and Clifton Road intersections, which provide high profile recognition for the COA that is seen by thousands of motorist, cyclist and pedestrians every day.



Atlanta COA Roadside Cleanup Sign Near Clifton Road on Ponce de Leon Avenue

Tucson Area COA Had a Busy Year in 2008

By LT Trista Eggers

The Commissioned Officers Association Tucson Branch had a very busy year in 2008. The first half of the year was devoted to supporting COA National in preparing for the USPHS Scientific and Training Symposium at the Tucson Convention Center on June 9 - 12. As the host branch, we were responsible for stuffing the registration bags, moderating presentations, planning the Surgeon General's 5K Run/Walk, arranging the Thursday evening dinner entertainment and staffing our booth in the exhibition hall. We had a raffle for 11 different prizes and raised \$350 for the Tohono O'odham Boys & Girls Club.

In August we hosted our 3rd annual Promotion Ceremony at the Veteran's building on Sells, Arizona. RADM Vincent

(See Tucson, page 18)



CDR Bradley Bishop, CAPT Lisa Tonrey, LCDR Judy Nelson, CDR Kara Levri, LT LaTorie Jones, LCDR Maya Thompson, CAPT Scott Hamstra, Mrs. Hamstra; Back Row: CAPT Lori Enever, CAPT Michael Flood, LCDR Ron Bachorski, CAPT Nick Quaglietta, CDR Don Williams, RADM Robert Harry, (Ret.)

Atlanta Branch Exhibits Superior Community Service

By LCDR Edward Weiss and LCDR Anna Satcher

n 2008, over 150 Atlanta-area USPHS Commissioned Corps officers gave back to the community through participation in numerous ACOA-sponsored community service activities. Atlanta COA has engaged regularly in community service for years, and 2008 was no exception. Every third Saturday ACOA coordinates volunteers to serve at the Jean R. Amos USO Center at Hartsfield-Jackson International Airport, the world's busiest airport. During 2008, Atlanta-area officers assisted the USO in providing snacks and service to thousands of the men and women of the Uniformed Services. In addition, ACOA staffed the USO for 24 hours during the third weekend of December, providing service to military personnel who were returning home for the holidays. Atlanta COA takes great pride in sharing camaraderie and providing community service to those who serve in the uniformed service. Another popular Atlanta COA-sponsored community activity in 2008 was the quarterly roadside cleanups that were conducted as part of the Georgia Adopt-a-Highway program. Officers and their family and friends helped keep a 1-mile stretch of roadway clean, and Atlanta COA received a Certificate of Appreciation from the Department of Transportation for its efforts. In October 2008, Atlanta COA organized for the third consecutive year a build with the Atlanta affiliate of Habitat for Humanity. Officers who volunteered helped to provide the opportunity of homeownership to a lowincome family in need.

In 2008, Atlanta COA community

(Tucson, from page 17)

Berkley from the Phoenix Area IHS was the guest speaker and a potluck lunch was also provided.

In October, several of our members ran in the 8K and helped man water stations for the University of Arizona Jim Click Run 'n Roll. This event benefits the Adaptive Athletics Program and the Disability Resource Center at the U of A by providing adaptive equipment, travel costs and scholarships.

service activities were expanded to include several new projects as well. Twice during the year, Atlanta COA organized a volunteer event at the Café' 458 weekend brunch. Café 458 offers a full scale brunch to Atlanta residents and visitors every Sunday. All proceeds from the Sunday brunch benefit the Samaritan House of Atlanta, which is an organization devoted to transforming lives by helping homeless men and women gain personalized self-sufficiency through employment readiness and life-stabilization programs. Officers who volunteered for this activity had the opportunity to assist as kitchen help, servers, hosts, food runners, and dishwashers and helped to make the Café 458 weekend brunch a success. Atlanta COA also organized a community service activity with Project Open Hand, a volunteer-driven nonprofit organization that provides healthy meals, dietary counseling, and nutrition education to its client population. At this community service event, officers delivered meals to homebound seniors and other Atlanta residents with chronic, critical, or terminal illnesses. In addition, Atlanta COA provided an opportunity for local officers to work alongside local residents in a low-income neighborhood to grow their own food and beautify the area by assisting with a community garden supported by the Atlanta Food Bank, a neighborhood initiated, implemented, and maintained garden to help people in lowincome areas grow their own food and beautify the area. Finally, Atlanta COA coordinated a community service event at Chil-

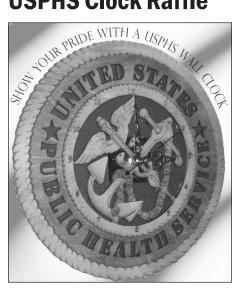
Our branch activity for November was sponsoring a meal for the Tucson Ronald McDonald House. We provided sandwiches, soup and beverages for the families of critically ill children staying at University Medical Center.

In December, we held a clothing drive for the Tohono O'odham Kom Ckud Ki domestic violence shelter. Tucson COA asked all staff throughout Tucson Area to donate clothing and diapers for women and children and we succeeded in doubling our original goal.

dren's Healthcare of Atlanta at Egleston. At this activity officers helped bring a summer camp experience to patients and families through fun activities such as sports and arts and crafts.

Despite offering a number of community service opportunities, often twice as many officers as could be accommodated would sign-up to volunteer for an event the day a project was announced. This demonstrates the strong service-oriented nature of the Atlanta COA members. During 2009, Atlanta COA plans to develop new projects to serve senior citizens and plans to coordinate a volunteer activity with the Junior Officer Advisory Group.

USPHS Clock Raffle



The HS ITPAG is raffling a custom made, wooden, USPHS wall clock. The proceeds will be going to purchase the IT -Of the Year Award. Prices are \$3.00/1 ticket and \$5.00/2 tickets. The drawing will be either before the 2009 Scientific and Training Symposium or at the event, depending upon the staffing at the HSO Booth.

Raffle tickets can be purchased by mailing a check made payable to COF to: LCDR Glenn Janzen, MIS Room 132, 522 Minnesota Avenue, Bemidji, MN 56601. Include a phone number and e-mail address for ticket confirmation. Send questions to, glenn.janzen@ihs.gov.

(Executive Director, from p. 1)

ship Institute was devoted to a tabletop exercise named *Global Tempest* borrowed from the National Defense University (NDU).

Global Tempest modeled an avian flu (H5N1) pandemic that began with an outbreak of 25 cases in Southeast Asia first reported on March 7 of our exercise year. The "game" script described the avian flu as "resembles 1918 Spanish flu." The exercise scenario had the first case reported in the U.S. on April 19th, 47 days after the first case in SE Asia. Things went downhill fast from there.

The *Global Tempest* scenario was based on historical data and computer modeling – so let me be clear that it was entirely theoretical, based on some data and plenty of assumptions. It is not my intention here to be alarmist or melodramatic, but merely to point out that we – especially you – the nation's public health leadership – should not be surprised at the situation in which we now find ourselves. Our exercise in Denver was certainly not the only time *Global Tempest* had been played. I recall observing it at NDU here in Washington some months earlier at which many of the participants were Members of Congress and other senior government officials – including the U.S. Surgeon General.

The public health community, led by the Surgeon General, has planned and trained for such an outbreak. My hope now is that all that planning and preparing is not forgotten when most needed. But as all good operational planners know, the plan is only good until the first shot is fired, or in this case, until the first case is confirmed. That's when the need for identifiable, visible, credible, confidence building, professional leadership kicks in. Now is when we need the Surgeon General and his "army."

I am pleased to see so many Corps officers receive recognition in the media for their efforts to identify and contain the H1N1 outbreak. The expertise and professional leadership of these officers is clear to me. I hope this fact is not lost on the key political appointees in the Obama Administration. There is nothing as confidence building among the general public as seeing and hearing uniformed PHS officers addressing this public health issue.

There is no shortage of lessons learned out there from previous crises. One such having to do with how the nation responded to a swine flu outbreak in 1976 has just been re-released. The 1978 work is titled "The Swine Flu Affair - Decision-Making on a Slippery Disease" by Richard E. Neustadt. Professor of Government. John F. Kennedy School of Government, Harvard University; and Harvey V. Fineberg, M.D., Assistant Professor of Health Services, School of Public Health, Harvard University. This is a report prepared at the request of then HEW Secretary Joseph Califano on the decisionmaking process surrounding a swine flu immunization program that overlapped the Ford and Carter Administrations. In response to the current outbreak. Professor Neustadt has released an electronic version dedicated in memory of his co-author, Dr. Fineberg.

"The Swine Flu Affair" is an interesting (See **Executive Director**, page 20)

PHS BALL CAPS



(Executive Director, from p. 19)

and informative read and can be downloaded at no cost from the Institute of Medicine website at <u>www.iom.edu/swine</u> <u>fluaffair</u>. In their introduction, the authors write:

Decision-making for the swine flu program had seven leading features. To simplify somewhat, they are:

- Overconfidence by specialists in theories spun from meagre evidence.
- Conviction fueled by a conjunction of some preexisting personal agendas.
- Zeal by health professionals to make their lay superiors do right.
- Premature commitment to deciding more than had to be decided.
- Failure to address uncertainties in such a way as to prepare for reconsideration.
- Insufficient questioning of scientific logic and of implementation prospects.
- Insensitivity to media relations and the long-term credibility of institutions.

One startling (to me) fact was that the

story told by Neustadt and Fineberg took place during another period when the nation did not have a presidentially nominated and senate confirmed Surgeon General. Wasn't it Churchill who said "Those who fail to learn from history are doomed to repeat it?"

A lesson to be learned from the current situation is the urgent need to field a standing cadre of public health emergency responders – the Health and Medical Response (HAMR) teams who are not tied to individual community health needs in the event of a pandemic.

My sense is that as a nation and a public health community, we have come a long way since 1978 – in some respects. And the Administration's response to the current situation is getting good reviews. I hope the efforts in place now successfully contain the disease and this all fades away soon. But if it does not, the time will come when we need the Surgeon General to communicate with the general public. Ultimately, responses to crises almost always succeed or fail on the last of the Neustadt-Fineberg observations above, which can be summed up in one word – communications.

Two final thoughts. **If you haven't** registered for the June conference, it's still not too late. We'll be in Atlanta – home of CDC – where the lessons about how we defeated the 2009 swine/H1N1 flu outbreak will be ripe for retelling. See you there!

And lastly, please vote for the COA Board of Directors. At least once a year, every COA member gets a chance to vote their share of COA stock by casting a ballot for the Association's leadership. Please get involved and cast your vote today. Visit the COA website to vote (www.coausphs.org) or see the ballot in the April *Frontline* (also available online). On to Atlanta!

Yours Aye!

Jerry

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(Legislative Update, from page 2)

Separating the armed from the unarmed yields absurdities like these: A PHS dentist who has spent nearly 20 years detailed to the U.S. Coast Guard is ineligible for this benefit, while his non-PHS colleagues in the USCG are eligible. A PHS physician detailed to the USCG for most of his career is also ineligible from the get-go, while the rescue swimmers and EMTs with whom he shares those harrowing helicopter rides are eligible. COA has learned there are approximately 100 PHS officers in this situation; 64 are physicians, most of the rest are dentists, and a few are physician assistants. All are detailed to the USCG long-term "on

chronic deployment status," as one put it.

Other examples include PHS officers detailed to the Army in Iraq, Afghanistan, and numerous hotspots across Africa, where they serve side-by-side with their armed colleagues, often in areas of active military operations. But like the USCG health professionals, they cannot be considered for this particular benefit.

Why Can't VA fix this?

On the matter of transferability, VA defers. This is what the agency said in its final rule: "While VA is responsible for administering payment of transferred benefits, the Department of Defense is responsible for determining eligibility or transfer

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of entitlement to dependents.

"Specifically, the statute provides that the Secretary of Defense may authorize the Secretary of the Army, Secretary of the Navy, Secretary of the Air Force and the Secretary of Homeland Security (with respect to the Coast Guard when it is not operating as a service in the Navy) to determine if individuals serving in the Armed Forces in their respective departments are eligible to transfer entitlement to dependents.

"As VA has no authority to determine eligibility for transfer of entitlement of educational assistance under the Post-9/11 GI Bill, individuals inquiring about eligibility for transfer of entitlement should contact DoD for information."

Next Steps?

New legislation means finding Congressional champions in both chambers to introduce bills, recruit co-sponsors, and either wait out the committee process or find a way to attach the new bill to higherpriority legislation that is moving quickly. That is a very tall order for any advocacy organization, but especially so for one as small as COA. At the moment, there is no

(See Legislative Update, page 22)

COA Position

No matter how narrowly or broadly construed or defined, transferability should include PHS and NOAA officers to the same extent that it includes Armed Forces personnel. Title 42 Sec. 213 (d) says PHS officers are entitled to <u>all</u> GI Bill benefits, not just some of them, or even most of them.

For more information: 42 U.S.C. 213(d) Public Law 110-252, Title V – Veterans Educational Assistance. Section 3319. Department of Veterans Affairs. 38 C.F.R. Part 21. Post-9/11 GI Bill; Final Rule http://www.coausphs.org http://www.defenselink.mil/news/ newsarticle.aspx?id=54127

Physician PAC Membership—Call for Nominations

The Physician Professional Advisory Committee (PPAC) is seeking motivated Commissioned Corps and civil service physicians who are interested in serving as members on this advisory panel. PPAC membership is open to **all physicians** who are employed in the Department of Health and Human Services' Operating Divisions (OPDIVs), as well as Commissioned Corps officers in the medical category detailed to other governmental or private entities.

The mission of the PPAC is to provide advice and consultation to the Surgeon General on issues related to the professional practice and the personnel activities of the Medical Category. Additionally, the PPAC seeks to represent a cross section of the activities and interests of all DHHS physicians. The PPAC currently meets every other month. Travel is not required for membership, and conference calling capability is available for all meetings. Regular attendance at meetings is required, and PPAC members are expected to actively participate in the activities of at least one subcommittee during the 3 year term of service.

At least five full-voting membership positions will be available as of January 1, 2010. The PPAC will recommend successful candidates to the Surgeon General for a 3-year appointment, with the concurrence of the line supervisors and OPDIV representatives. Commissioned Corps officers or civil service physicians who are interested are encouraged to selfnominate.

The candidate must submit a CV, a nomination statement (see below), and a letter from his/her supervisor which demonstrates supervisor support for the nomination.

The **nomination statement** should be no more than 400 words and should respond to the following questions:

1. Please describe your understanding of the challenges and opportunities facing the Medical Category and highlight any particular interests or concerns that motivate you to become a voting PPAC member. What contributions would you like to make during your term as a voting member? What particular committee(s) interest you and why?

- 2. What skills, attributes, experiences, talents and qualities would you bring to PPAC service? How could those benefit the PPAC?
- 3. Please write about your current/past PPAC participation and accomplishments. Specifically describe your roles and impact on any PPAC committees (and have the relevant committee chair[s] concur by email to the membership subcommittee chair). Cite the dates of PPAC meetings that you attended in the 12 months prior to the nomination date. If you have been an affiliate member, state the dates of your affiliate membership.

(Legislative Update, from page 21)

such legislation out there, and none in the pipeline.

Even before one talks about support in Congress, however, there needs to be active support from the Department of Health and Human Services, beginning with the Office of the Surgeon General (OSG) and the new Assistant Secretary of Health (ASH). The Department needs to *ask* Congress for this tool, so the task at hand is to find out if they want it. Funding would come from the VA budget, not from 4. Briefly mention other activities that demonstrate your officer ship and commitment to the Commissioned Corps.

These documents should be sent as a Word attachment to an e-mail message by August 15, 2009 to the following address: CDR Sheryl Lyss, Chair, PPAC Membership Subcommittee, E-mail: slyss@cdc. gov, Phone: (404) 498-6384.

For more information about the PPAC and for additional information regarding requirements for and selection of voting membership, please visit the website at <u>http://usphs-ppac.org/</u>.

the Department's budget. Farrell has written to the Acting ASH and Surgeon General inquiring about DHHS interest and support.

One thing is clear: parity under the new GI Bill is the top legislative priority of COA members. And parity with regard to transferability is what they want most of all. PHS officers want to be able to transfer their educational benefits to their immediate family members, just like their armed counterparts will now be able to do.

—Judy Rensberger

Tell Us Your Story

Excluding PHS officers from the transferability provision of the new GI Bill makes no sense. We want to make that clear. To do that, we need your help. If you want to win the right to transfer your unused educational benefits to your children, then share your story.

We want to hear from PHS officers detailed to any one of the five Armed Services, including all of you serving in the U.S. Coast Guard. We want to hear from PHS officers who have served in Iraq, Afghanistan, or any other area of armed conflict; this includes areas of civil unrest in Africa and elsewhere. We want to hear from PHS officers deployed on short notice to respond to natural disasters and acts of terrorism. In particular, we want to hear from all of you who were involved in rescue efforts on September 11, 2001. All accounts must be true and verifiable. Please e-mail me at jrensberger@ <u>coausphs.org</u> and put **GI Bill Parity** in the subject line.

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Health Services PAC Seeks New Members

he Health Services Professional Advisory Committee (HSPAC) is seeking members for a 3-year term beginning January 1, 2010. The HSPAC provides advice to the Surgeon General (SG) and the Health Services Chief Professional Officer (CPO) on professional and personnel issues related to the Health Services category. Selections are based on the nominee's commitment to Public Health Service activities and specified criteria in the HSPAC Charter (e.g., organizational, discipline, gender, minority representation), are made by the HSPAC and approved by the SG. HSPAC members are expected to obtain the necessary agency support to attend six scheduled meetings per year. Members stationed outside of the Washington, DC area, may participate in up to five of these meetings via teleconference. A member is required to participate in one HSPAC meeting in person in Maryland or DC. Attending the COF Symposium can be substituted to meet the requirement of participating in one meeting in person. A self-nomination form (which includes a space for supervisory approval) can be found on the HSPAC Web page at: http://www.usphs-hso.org/pac/subcommittees/membership/pac_nomination. shtml. Please complete the self-nomination

Please complete the self-nomination form and send it along with current curriculum vitae (including a summary sheet) and a cover letter describing how your specific experience and expertise will benefit the HSPAC. Retired HSO working in a civil service capacity are encouraged to apply. The completed package must be submitted via e-mail (email is preferred; submit a scanned file of the signature page), mail, or fax by **June 30, 2009**, to:

CDR Sianat Kamal, Chair, Membership Subcommittee, HSPAC Bureau of Primary Health Care, Health Resources and Services Administration 5600 Fishers Lane, Room 16C-05, Rockville, MD 20857 Phone: (301) 594-4069, Fax: (301) 594-4989, Email: skamal@hrsa.gov The *COA Frontline* (ISSN 10937161) is published monthly except a combined issue January/February and July/August by the Commissioned Officers Association of the United States Public Health Service, 8201 Corporate Drive, Suite 200, Landover, MD 20785, (301) 731-9080; Toll-free (866) 366-9593; FAX: (301) 731-9084; Periodicals Postage Paid at Hyattsville, MD and additional mailing offices.

POSTMASTER: Send address changes to *COA Frontline* c/o Commissioned Officers Association, 8201 Corporate Drive, Suite 200, Landover, MD 20785.

A report of timely information concerning activities of the Commissioned Corps of the U.S. Public Health Service. Distributed exclusively to Association members.

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