

from the  
Executive Director



James T. (Jim)  
Currie, Ph.D.,  
Colonel, USA Ret.

### It's All About Respect

When I share some of what we are doing on behalf of the Commissioned Corps, I sometimes hear from officers who wonder why we are devoting any time whatsoever to something as mundane as airline baggage fees. "After all," they say, "the affected officers are reimbursed for these charges when they are traveling on orders."

These questioning members are correct: it is not about the money. It doesn't cost PHS officers any dollars in the long run when American Airlines (AA) or another carrier charges them baggage fees, even though they don't charge, in American's case (from their website), "members of the U.S. armed forces (Navy, Army, Marines, Air Force and Coast Guard) in an active status, (Cadets are included)." It's definitely not about the fees, as more than one of you told a Washington Post columnist early in October. It's about the fact that American Airlines and others are not recognizing your service and your sacrifice. They give free baggage check, for gosh sake, to cadets, presumably

see **EXECUTIVE DIRECTOR** on page 16

## Veterans Day at Arlington National Cemetery 2018



USPHS officers present at Arlington National Cemetery for the Veterans Day ceremony. They are (from left), CAPT Josef Rivero, RADM Rick Childs, CDR Heather Brake, and LT Rachel Forche.

by Col. (ret.) Jim Currie, COA Executive Director

Veterans Day 2018 for COA and the US Public Health Service started early. On a cold and clear Sunday morning, CDR Heather Brake, COA Chair and a veterinary officer assigned to the Centers for Disease Control and Prevention in Atlanta, departed her hotel at 0700 to travel to the National Press Club for the traditional Veterans Day breakfast. This event has been hosted for many years by the President of the United States, with breakfast at the White House. That tradition was broken in both 2017 and 2018 when President Trump chose to spend the day out of the country. Instead, the event was hosted by Secretary of Veterans Affairs Robert Wilkie.

While CDR Brake was dining downtown, other USPHS officers, led by RADM (Dr.) Rick Childs and CAPT Josef Rivero, both of whom are assigned to the National Institutes of Health, were gathering at the Old Post Chapel at Fort Myer, VA. They were joined there by COA Executive Director Col. (ret.) Jim Currie.

CDR Brake and others representing the member organizations of the Veterans Day National Committee were bused from the National Press Club breakfast to Arlington National Cemetery (ANC), where they observed the VA Secretary laying a wreath at the Tomb of the Unknown Soldier. This tomb is one of the most revered sites for members of the uniformed services, as it represents the ultimate sacrifice of those who serve our country in uniform. Information about the tomb and its significance can be found online at [https://en.wikipedia.org/wiki/Tomb\\_of\\_the\\_Unknown\\_Soldier](https://en.wikipedia.org/wiki/Tomb_of_the_Unknown_Soldier) .

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# COA Member Benefits

## Capitol Hill Representation

Efforts on Capitol Hill continually support all Commissioned Corps officers – active duty and retired

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50 percent discount for the online MPH and certificate programs

## Scholarship Program

College scholarships for children and spouses of COA members

## Ribbon

Authorized to be worn on the PHS uniform by members in good standing when attending COA functions



## Legislative Update Keeping a Close Watch on TRICARE

by Judy Rensberger

Over my 14 years with COA, I have noticed that systemic problems with TRICARE tend to show up first in West Virginia. It happened again a few months ago. In September, I heard from CDR Cara Halldin, who works in Morgantown, WV, for NIOSH/CDC. She is a longtime COA member, and she was experiencing extreme frustration with the handling of her family's health care claims. She had begun asking other PHS officers in West Virginia if they had run into annoying, repetitive, and seemingly unsolvable problems with their claims. She wondered if others had experienced the same difficulties with Humana, which is the TRICARE contractor for the Eastern United States. As the situation unfolded, it became clear that the answer was yes.

Although active-duty PHS officers can get help with their own cases from the TRICARE experts at PHS headquarters, trying to untangle claims involving dependent spouses and children is another matter. In those cases, PHS officers are on their own if they cannot get timely help from the TRICARE contractor. (CDR Halldin, who has two very active young sons, had wondered if she was being viewed as a health

insurance "super-user.")

### TRICARE Issues in WV

The TRICARE network in West Virginia is fragile. It depends heavily on the continuing participation and good will of West Virginia University's Health System, including its medical faculty and affiliated physicians and hospitals. The word on the street was that they were not happy, either.

West Virginia beneficiaries complained that Humana seemed unable or unwilling to recognize that they had obtained required referrals and pre-authorizations and were using network providers. They said they were improperly billed for point-of-service fees and co-pays. Requests to speak with supervisors were ignored. Promised call-backs never came. Convoluted problems thought to have been addressed and resolved kept resurfacing.

### COA Gets Involved

I shared the West Virginia situation with my fellow health care advocates on the Military Coalition's Health Care Committee and in the TRICARE for Kids Coalition. We compared notes. The problems appeared to be widespread.

Kara Oakley, who heads TRICARE for Kids, arranged a group meeting with

# Chicago COA Pays Tribute to Veterans- "Honoring All Who Served"

by LCDR Uruaku Obasi, MSN/MPH, RN,  
PHNA-BC

In 1938, "Armistice Day" was deemed a legal holiday to commemorate the end of World War I on November 11, 1918. In 1954 the holiday was renamed "Veterans Day" to acknowledge and honor American veterans who have served this country. One hundred years later, On November 11, 2018, twelve officers from the Chicago COA Branch convened on a blustering morning in the City of Aurora (forty-one miles from Chicago proper) to pay tribute to all who served. This marked the first time the Chicago Branch participated in a Veteran's Day Parade. The group of officers marched proudly along the parade route which concluded at the Grand Army of the Republic Memorial Museum, which is listed on the National Register of Historic Places.

The City of Aurora parade line-up included a wide array of veterans' groups, honor guards, Daughters of the American Revolution, Aurora High School Navy JROTC, the Mayor of Aurora, and two Illinois State Representatives (to name a few). Over the years, Chicago COA has cultivated a relationship with our sister



service at the US Navy, Great Lakes. We were honored to be joined by the Great Lakes Naval Marching Band and stepped to the cadence of their music. The COA activity not only elevated esprit de corps for Officers, but broadened awareness of PHS. The event marked a heartfelt moment of pride, fellowship, and tribute to all veterans and active duty service members. On this day, we would like to take the time to say to our fellow officers, "Thank you for your service!"

1. Lin, Ho, "The History of Veterans Day," Military.com, accessed 11/11/2018, [www.military.com/veterans-day/history-of-veterans-day.html](http://www.military.com/veterans-day/history-of-veterans-day.html).



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## VETERANS from page 1

The official ceremony at Arlington National Cemetery started at 1100. After the usual preliminaries, the colors were paraded into the amphitheater at ANC. Most of the colors represented the twenty-five organizations that are Members of the Veterans Day National Committee, such as the VFW, MOAA, and the Fleet Reserve Association. The flag our officers carried was that of the USPHS. The procession entered the amphitheater two-by-two, with PHS officers LTJG Schuyler Price and LCDR Sara Azimi-Bolourian, carrying the US and PHS flags. The Marine Corps Band played the marches of the uniformed services, including the USPHS.

The master of ceremonies then introduced those sitting on the stage, including CDR Brake, in uniform, representing COA and the USPHS. Her name was also printed in the program, with her affiliation as Board Chair of the Commissioned Officers Association of the United States Public Health Service.

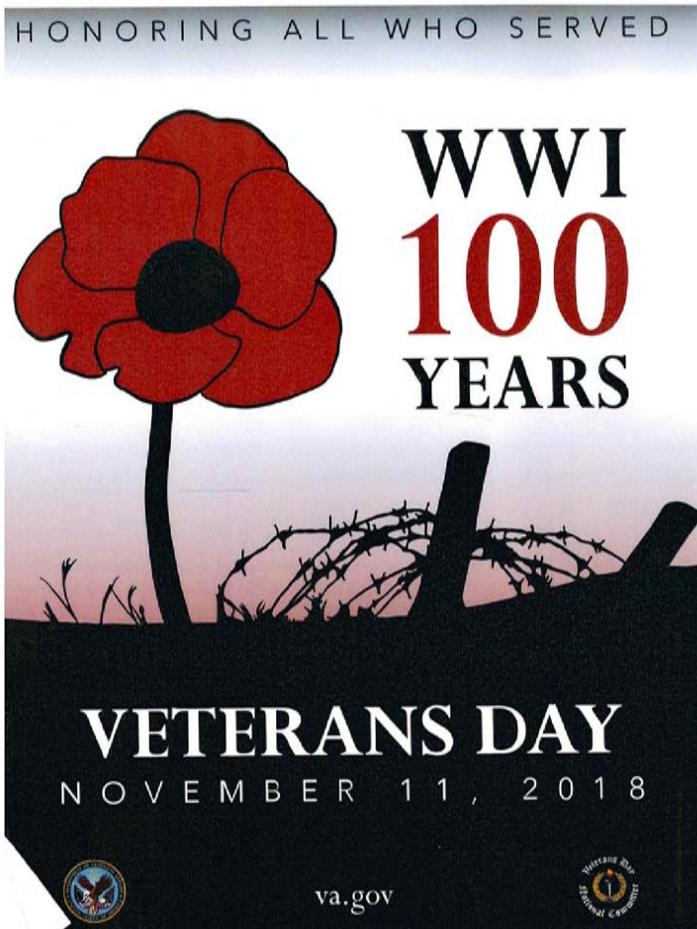
Following brief welcoming remarks from the Executive Director of Arlington National Cemetery, the National Commander of the American G.I. Forum introduced VA Secretary Robert Wilkie, who talked of the sacrifices of those who have served our country in uniform. Secretary Wilkie is himself an Air Force Reserve officer.

The ceremony concluded with the retiring of the colors, after which the PHS contingent proceeded to the area where the wreaths were lined up. As on this past Memorial Day, COA procured the wreath for the event. Led by RADM Childs and CDR Brake, with CAPT Josef Rivero and LT Rachel Forche (the most junior PHS officer present at ANC that day) also participating. The four PHS officers, accompanied by a representative from the VFW, marched to a position in front of one of the Tomb guards. They did a smart right face and presented



USPHS officers present at Arlington National Cemetery for the Veterans Day ceremony included RADM Richard Childs, CAPT Josef Rivero, CDR Julie Erb-Alvarez, CDR Heather Brake, CDR Patricio G. Garcia, LCDR Brian Czarnecki, LCDR Ick-Ho Kim, LCDR Sara Azimi-Bolourian, LT Andrew P. Brown, LT Jodi Blake, LT Rachel Forche, and LTJG Schuyler Price. Other officers who participated in planning for the event included CDR Indira Wallace Harris, LCDR Iman Martin, and LCDR Elizabeth Cohen.

the wreath of blue and gold flowers that had a ribbon reading "U.S. Public Health Service" stretched across it. Another right face, and the PHS contingent marched off the walkway leading to the Tomb. This concluded the Veterans Day ceremony for 2018. It was probably a once-in-a-lifetime experience for both the flag bearers and the wreath presenters, and it only happened because COA became an Associate Member of the Veterans Day National Committee in 2016 and moved to full Member status on the VDNC in 2017.



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# The State of Play

by John McElligott, COA Staff

You're right. This information should really be coming from HHS but, from what we can tell, the Department is not sharing much about the future direction of its uniformed service. COA tries to fill that void. Many personnel policies have been released over the past year. COA staff get many comments and questions from our members asking us to make sense of it all.

Here is my take on the current state of play and where the Commissioned Corps is heading in the near term.

Today's Commissioned Corps has no line item funding and no force management system like its sister services. Response teams receive no training and supervisors at duty stations can veto an officer's opportunity to deploy to emergencies. There is no Reserve Corps to backfill positions of officers who take leave or deploy. The year 2019 is right around the corner but the information technology used in Commissioned Corps Headquarters is more like turn of the century. An understaffed and overworked team cannot fill the needs of the service.

The American public is not aware of the uniformed service, its capabilities, or value to the country. Few on Capitol Hill, save a few congressional staff and Members, know much either.

Active duty members are routinely disrespected by private companies. Even one sister service doesn't require its members to salute members of the USPHS Commissioned Corps.

You're probably aware of the recommendations published by the Office of Management and Budget. COA opposes a forced reduction in force and shifting of retirement costs to the agencies which employ active duty members. We support the creation of a Reserve Corps.

So, where is the service heading? Unless something changes, the Commissioned Corps is trending toward a smaller and more clinical uniformed service. Nonexistent active recruitment efforts will continue. As far as we can tell, the passive hiring that does exist will be limited to filling vacancies in only the Indian Health Service and Bureau of Prisons. No applicants will be allowed to convert from civil service to wearing a uniform. Tighter weight standards will be here to stay. Anyone deploying as a clinician must perform clinical hours each year to maintain some level of proficiency. Where officers get clinical rights is up to them to figure

out. Officers paid through the Health Professions Special Pays program will see the payment levels rise and fall based on the recruitment and retention needs of the service and in step with special pays offered by sister services.

Outcomes from the quantitative and qualitative external reviews of the Commissioned Corps may provide data and analysis helpful to securing a stronger service. HHS leadership may provide the political cover needed. COA is crossing our fingers.

Here is our wish list:

- A line item budget for Commissioned Corps Headquarters
- Funding to train response teams, as required by law
- A modernized IT infrastructure for Headquarters
- Funding the authorized Public Health Sciences Track as a pipeline for future Corps officers
- Instituting a force management of officers' careers and rotating officers through duty stations every 2-4 years, starting with a hardship post, if available, in the first two duty stations
- Fund one officer each year as a USPHS Fellow who will work in a Congressional authorizing or appropriations committee
- Secure the authorization and appropriations for a Reserve Corps
- Fund one Public Affairs Officer in the Office of the Surgeon General whose focus would be the Commissioned Corps
- Train officers on how to engage with media and draft media guidance
- Create warrant officers, currently authorized by Congress, to work in human resources and information technology
- Fill the 30 positions allowed under the agreement with the Department of Veterans Affairs
- Expand the agreement with the VA to more than 30 positions
- Agree to place ten PHS physicians, whose medical education at the Uniformed Services University of the Health Sciences would be funded by the VA, in VA clinics and hospitals
- Create a plan for recruiting the next generation of USPHS members

COA stands ready to assist HHS and Commissioned Corps leaders with securing a stronger and well-funded Commissioned Corps. In the new year, we may need our members to voice their support. As always, we welcome your input and participation.

## COA Board of Directors: Call for Nominations

Join the COA Board of Directors. The deadline to submit a nomination is January 31, 2019.

Five seats will open on July 1, 2019. They include: Field Officer (outside of DC), Pharmacist Officer, two Retired Officers, and Veterinarian Officer.

Each new Director will serve a three-year term with the option of being re-elected to a second three-year term. The Retired Officer members of the COA Board of Directors also serve as appointed Trustees of the PHS Commissioned Officers Foundation (COF) for the Advancement of Public Health.

Interested? Review <http://coausphs.org/about/nominations-for-board-of-directors/>



## JOIN a COA COMMITTEE

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Email us to volunteer at

[coamembership@coausphs.org](mailto:coamembership@coausphs.org)



**LEGISLATIVE** from page 2 six Humana Executives. It was held in late October at the DC headquarters of the Children’s Hospital Association. Advocates, including COA and the National Military Family Association (NMFA), described numerous examples of what appeared to be the routine mishandling of claims. One advocate said that her own family’s claims were inaccurate more than two-thirds of the time. She said she was systematically undercharged, not overcharged. Still, she said she could not get help from Humana in straightening out her bills.

### Humana Execs Listen

The criticisms were detailed and blunt. To their great credit, however, the Humana team listened graciously and attentively for two hours. They explained how the billing system is supposed to work. They agreed to cooperate with us to stay on top of problems and get them fixed. (I will be following up with Humana directly.) We learned there is a subcontractor involved, and I wondered if that was the crux of the problem. Better training and tighter oversight could help.

After I described the West Virginia situation, I asked the Humana reps if they would prefer to hear directly from, say, 25 West Virginia PHS officers, or if I should consolidate complaints and forward them to a designated Humana official. “Consolidate and forward” was the response.

### A Satisfactory Result

After weeks of dealing with unhelpful customer service reps, CDR Halldin made the happy discovery that she could by-pass them. It seems that Humana has a formal grievance process. CDR Halldin composed a detailed letter documenting her complaints and snail-mailed it. Here’s the critical “how-to” information she shared with me and wants to share with others: <https://www.humanamilitary.com/beneficiary/enrollment-and-claims/claims/appeals-grievances>

CDR Halldin said Humana responded in

a timely manner, outlining what would be done on her behalf and who would do it. For example, a caseworker from Humana’s Debt Collections Department would convince the hospital chasing her to drop its collections activity. CDR Halldin received a follow-up letter from Humana documenting progress on her case. It explained that she could expect a third and final letter when everything was settled.

On the afternoon of 3 December, I received a quick update. CDR Halldin had just checked her family’s health care accounts and they all showed zero balances.

### Going Forward

We advise all COA members, not just those in West Virginia, to keep close track of their TRICARE services and claims. This is especially important if you have young children, children with special needs, a dependent family member with a chronic condition, a family member who needs specialty care, or all the above.

In case of apparent error, keep every notification and scrap of paper and have it all in front of you when you decide to call Humana’s customer service reps (your first stop). Take detailed notes. Above all, please let me know how it goes. I have promised to let Humana officials know if, and to what extent, their problem-solving efforts are working for our members. Please e-mail me at [jrensberger@coausphs.org](mailto:jrensberger@coausphs.org) with TRICARE in the subject line. While COA cannot get deep into the weeds of individual billing disputes, we need to know if the system overall is responsive to our members’ needs. If it’s not, then we can initiate collective action, as we did here. My own next step will be to help get the word out concerning the appropriate use of Humana’s underpublicized grievance process.

COA and other health care advocates for service families hope to meet soon with officials at Health Net Federal Services, which is the TRICARE contractor for the Western United States. Please stay tuned.

# USPHS Pharmacists Highlighted on National Mall Memorial

by RADM (ret) Pamela Schweitzer

On November 12, 2018, the US Public Health Service was represented at the rededication of the Flagpole Memorial in front of American Pharmacists Association (APhA) headquarters located on the National Mall near the Lincoln Memorial.

The Flagpole Memorial is dedicated to all Pharmacists and Pharmacy Technicians who served during the wars of our country. During the ceremony, we heard the extensive history of pharmacists serving our country since the Revolutionary War, where apothecaries served in the Continental Army, preparing medicines for army hospitals and medicine chests for field service.

The original APhA flagstaff was dedicated on May 7, 1948, and depicts pharmacists in the Revolutionary War, Civil War, Spanish-American War, WWI and WWII. A second sculpture was added to the flagpole memorial on May 23, 1993, and recognized pharmacists and technicians during the Korean, Vietnam, and Persian Gulf wars. The latest sculpture (see attachment) was updated to recognize individuals who served and continue to serve in the Global War on Terrorism. The initial conceptual design for the plaque was provided by LCDR Jill Gelviro, USPHS, and showcases the "Joint Federal Pharmacy Services (Army, Navy, Air Force, Coast Guard, VA, USPHS) Effort." USPHS pharmacists were specifically mentioned as they played a key role in dispensing antibiotics following the anthrax attacks.

Several current USPHS officers were in attendance (see attached picture), as well as some retired USPHS officers including RADM (ret) Dick Bertin and RADM (ret) Dick Church, the family of LCDR Jill Gelviro, and the APhA leadership team.

If you have the opportunity to visit Washington, DC, definitely stop by and see the Flagpole Memorial in front of the APhA building on the National Mall. Also, note the engraved wording on the APhA building, highlighting the dedication of the pharmacy profession to public health and the advancement of science:

*"Dedicated To Those Who Have Contributed  
Their Knowledge and Endeavor  
To the Preservation of Public Health  
and To the Advancement of Science in Pharmacy"*



USPHS officers in front of the new sculpture designed by LCDR Jill Gelviro, USPHS. From left to right: CAPT Martin Johnston, CDR Paul Michaud, CDR Tami Rodriguez, CAPT Aaron Middlekauff, CAPT Tracy Farrill, RADM (ret) Pamela Schweitzer, LCDR Nahleen Lopez, LT Kayla Vujovich



Plaque dedicated on November 12, 2018

Article posted by APhA: <https://www.pharmacist.com/media-press>

Article about the APhA building: [https://www.washingtonpost.com/lifestyle/style/the-curious-story-of-the-malls-lone-privately-owned-plot/2017/10/18/9d894632-b27e-11e7-9e58-e6288544af98\\_story.html?noredirect=on&utm\\_term=.5ed4ed21864c](https://www.washingtonpost.com/lifestyle/style/the-curious-story-of-the-malls-lone-privately-owned-plot/2017/10/18/9d894632-b27e-11e7-9e58-e6288544af98_story.html?noredirect=on&utm_term=.5ed4ed21864c)



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# Hurricane Florence: Rapid Deployment Force Three Works with Local Media and Press to Increase Visibility of Commissioned Corps Activities during Deployment

by LCDR Clara Stevens

Rapid Deployment Force (RDF) 3 deployed to North Carolina in response to Hurricane Florence in September 2018. The team supported the state of NC in providing medical care and services to the affected population and their caregivers in a medical shelter housed in a mega-church in Clayton, NC. Under guidance from the Public Affairs Officer of the Assistant Secretary of Preparedness and Response (ASPR) and the Commissioned Corps, the team's Public Information Officer (PIO) for the mission, LCDR Stevens, was responsible for publicizing the activities of the RDF. LCDR Stevens facilitated interviews with local television news stations and an online healthcare news journal, generated frequent reports (including pictures) for the Assistant Secretary for Health and Human Services (HHS), and created social media postings. The PIO during this mission reinforced the RDF 3 social media policy by being the sole person to take photographs and submit them to ASPR and HHS.

The most critical task is for a deployed RDF is to protect and care for the individuals they are serving. Clinical and other support officers work long hours to ensure this task is accomplished. During this mission, the PIO reached out to multiple audiences and increased the visibility of the Commissioned Corps, while maintaining operations security (OPSEC). Not all missions will have the same level of OPSEC, which is why it is crucial for the PIO to communicate with Health and Human Services Public Affairs advisors. This deployment presented unique challenges and opportunities for building partnerships with local non-governmental organizations, other federal/state personnel, and faith-based organizations.

RDF 3 engaged with reporter Rose Hoban, editor for North Carolina Health News for the following article titled, "Inside



Betty and Sarah said, "We are grateful for the amazing care we have received, everyone has been so wonderful." Commissioned Officers Left to Right: LT Jennifer Manning, LCDR Jonathan Wortham, LCDR Selena Bobula, and LT Carin Molchan



an Emergency Medical Hurricane Shelter."

<https://www.northcarolinahealthnews.org/2018/09/21/inside-an-emergency-hurricane-medical-shelter/>

News broadcaster Kelly Kennedy, of CBS 17 reported the following regarding the mission:

<https://youtu.be/lwyPWefUenI>

The following is a social media posting that was created by LCDR Stevens, approved by HHS and then posted to ADM Giroir's Twitter page.

[https://twitter.com/HHS\\_ASH/status/1041871761560817666](https://twitter.com/HHS_ASH/status/1041871761560817666)



# Four Corners COA Helps Support “Feed Shiprock” Project

by CAPT Julie A. Niven

On October 19, 2018, the Four Corners Commissioned Officers Association (FCCOA) delivered two large boxes and a hatchback full of clothes to Darin Cadmin, creator and manager of Feed Shiprock, a project to aid the homeless in Shiprock, NM. Cadmin was happy to get the socks, undergarments, winter coats, gloves, and hats. LCDR Kari Wato, CDR Pamela Abrams, and LCDR Shealyn Lucero from Northern Navajo Medical Center (NNMC) in Shiprock met me at Cadmin’s house. The donations had been collected at both NNMC and at Four Corners Regional Health Clinic in Red Mesa, AZ. Cadmin shared with us the origins of his non-profit organization. He said he was doing some beadwork for his family a couple of years ago when he heard a voice saying, “Feed the People.” He initially dismissed what he thought he had heard. The second time he heard “Feed the People,” he made 200 oatmeal cookies and handed them out around town. The third time he heard the voice was on October 26, 2016 and it was “almost like a knock on the head; “Feed the People!” Cadmin said it was after this event that parked his truck and began serving oatmeal and coffee daily to homeless community members suffering with alcohol and drug addiction. Cadmin told us, “Many have passed away since I started, but twenty-three people have gotten jobs, six have begun attending school, and one even joined the Marines!”



This was the second chapter donation FCCOA has made to Feed Shiprock. The first was bulk oatmeal and coffee over the summer. Cadmin talked about his organization’s future needs. We told him we would like to begin contributing to his group on a quarterly basis. For the next quarter, we plan to solicit donations of personal hygiene items, as well as cinnamon and brown sugar for the hundreds of bowls of oatmeal served weekly.

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# Frontline: Providing Hope and Reassurance

by LT Sarah Lyrata

Two years ago, I was mildly anxious and skeptical of my decision to apply for the USPHS.

My application timeline was from August 2016 to my Call to Active Duty date of April 30, 2018, a total of almost twenty months to reach my dream career.

My plan was to apply to the USPHS as soon as I graduated from Physical Therapy school and acquired my license, knowing the application process “can take over a year”.

Since I had been accepted to a year-long residency program, I figured my timing would be perfect. I would have a job lined-up by the time my residency was complete and maybe even have a month or two off for vacation! However, during my residency year a new administration entered the White House and a federal hiring freeze was implemented. This stalled my plans and most likely the plans of many others anxiously awaiting placement.

I had found the perfect match for an agency with an open position, and I felt they were interested in me and were eager to bring in a physical therapist. However, with the hiring freeze in place, their hands were tied.

The wise advice of my mentor led me to the COA webpage. I had some knowledge of COA from my clinical rotation within the BOP at Carswell, Fort Worth, TX, as a PT student. The officers there were experiencing some challenges with staff shortages and turned to the local COA chapter for advocacy. I saw that the PHS officers, in an institution with its own mission and financial concerns, were not alone. They had a place to turn to; a way to reach out for advocacy so all stakeholders could communicate and come to agreements to accomplish the missions of all involved. I knew the COA was a positive resource for the USPHS, and I wanted to become a member for the duration of my career.

Since my application was still pending after my residency was complete, I started to become wary and doubtful about whether the USPHS would be a stable career option or not. I liken the situation to someone waiting for medical test results and jumping to the worst conclusions. While waiting, my thoughts oscillated between desire and doubt. I wished to serve the nation in an agency with amazing possibilities, but would I be able to secure a position before my year-long deadline was up? Will the PHS be around forever? Will the benefits remain the same? Is it a good career decision to wait this out? The people around me and the mentors from my residency program could not understand why I'd pass on a full-time neurology position in the civilian world in order to possibly obtain a position in a prison at an unknown future date.

I was “floating” and doing some contract work. I turned down full-time positions because I wanted to respect their needs and not accept a job, then immediately leave for my dream PHS position, which may start at any moment--or in another year or so.



Despite my inclination to jump to the worst conclusions, I did what I had been taught: I researched. I found solace in the COA Frontline. I read the articles and saw the fruits of their labor. Yes, of course I want to join the PHS! Look at this incredible organization dedicated to advocating for their officers! The Frontline articles showed me progress. They showed me that while there were challenges ahead, they would protect the Corps, and I would have security in my future. More importantly; the Commissioned Corps would continue to thrive in all the amazing work they do.

Now a USPHS Officer with a little over six months in, I could not be more grateful that these Frontline submissions offered me the hope I needed in an uncertain time.

For those of you who are in the application process, or if you know applicants who are expressing a feeling of being in limbo, please know that persistence, patience, and the reasons you want to be here — to protect, promote, and advance the health and safety of our Nation — are enough; and are well worth the wait. Not only that, the skills required during the emotional roller coaster of the application process will also assist you in building your career.

Finally, know that the Commissioned Officers Association will protect, promote and advance your career once you arrive.

# Aurora Borealis Branch Supports Two Bone Marrow Registry Drives in Anchorage

by CDR Anne Marie Bott

To increase the number of Alaska Native and American Indian people in the national bone marrow registry, the Alaska Native Medical Center (ANMC) sponsored two bone marrow drives. The first drive was held on the ANMC campus on October 17, followed by a second drive at the Alaska Federations of Natives Convention on October 18 and 19.

The Aurora Borealis Branch of the COA annually supports the drive by volunteering at the booth. Eight USPHS officers from the Aurora Borealis branch staffed the booth, along with Be The Match® volunteers. Officers attended a Be The Match® webinar training session prior to the events. Volunteers included pharmacists (CDR Anne Marie Bott, CDR Aimee Young, LCDR Jessica Thompson), a physician (LCDR Lee



*Volunteers supporting the bone marrow registry drives in Anchorage in October 2018.*

Astle), and nurses (CDR Sherry Hammock, LCDR Vallan Bush, LCDR Penelope Adams, and LT Deirdre Abellada).

Fifty-three volunteers registered to join the bone marrow registry over the three days.

The Aurora Borealis branch is honored to assist in this important public health initiative. This marks the sixth drive it has supported, and the branch looks forward to supporting the annual event again in 2019.

# SoCal COA volunteers to the 29th AIDS WALK & RUN 2018 in San Diego, CA

by LCDR Gustavo Miranda

On September 29, 2018, the San Diego LGBT Community Center hosted its 29th annual AIDS Walk and Run Fundraising event for San Diego County residents living with HIV. The Walk and Run route is around Balboa Park, a 1,200-acre urban cultural park. Over 8,000 individuals, teams, schools and businesses came together to support the more than 20,000 San Diegans living with HIV/AIDS and to remember those who have lost their lives to this disease.

According to the Centers for Disease Control and Prevention (CDC), in 2015 an estimated 1.1 million people were living with HIV in the United States. In 2015 there were an estimated 38,500 new HIV infections, a decrease from 41,800 in 2010. The CDC continues to raise awareness about testing, prevention, and retention in care through its Act Against AIDS initiative that started in 2009.

SoCal COA Public Health Service (PHS) Officers and family members have volunteered for this event for the past five years, providing medical staff support. This year, LCDR Gustavo Miranda was Co-Medical Team Leader and coordinated for nine Public Health Service officers and one family member to support the annual AIDS Walk and Run. PHS officers volunteered at water stations, walking with the crowd, and biking. SoCal COA has used this special event as way to support San Diegans and to support those who need it the most. The COA branch plans to continue this support for many more years.



*From left: LCDR AnneMarie Galie, LCDR Gustavo Miranda, LCDR Josie Zepeda, LT Marie P. Cetoute, Jordan Bellama, CDR Kim Bellama, CDR Song Lavalais, and LT Juanj Wu*



*From left: LCDR Gustavo Miranda, LT Kendra Vieira, LCDR Julia Majkrzak*

# Building Community Partnerships to Address the Surgeon General's Call to Action

by CDR Molly Rutledge, CDR Aimee Young, LCDR Darrell Acheson, LCDR Christopher Chong

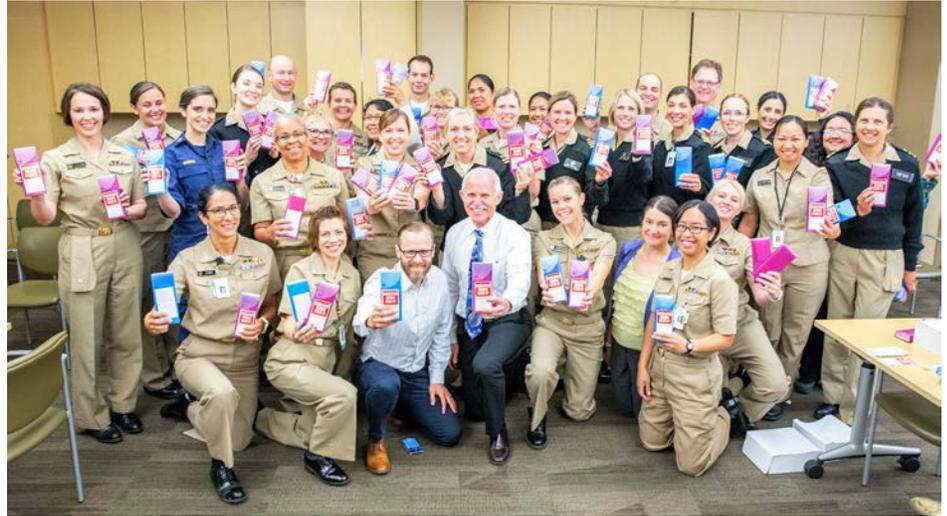
On April 5, 2018, U.S. Surgeon General VADM Jerome Adams disseminated a nationwide advisory on naloxone and opioid overdose. VADM Adams urged more individuals, especially family and friends, to keep naloxone within reach, as it can help save someone's life. Additionally, at the 2018 USPHS Scientific and Training Symposium, VADM Adams challenged all officers to carry naloxone nasal kits and to be prepared to respond to an opioid overdose, similar to the way officers are ready to respond to a cardiac arrest. The following events detail the collaborative efforts between the Aurora Borealis and Fireweed Branches of the Commissioned Officers Association (COA) with Alaska's Project HOPE (Harm reduction, Overdose Prevention, and Education) initiative in response to the VADM Adam's call to action.

## *Alaska Native Medical Center Naloxone Kit Building Event (Anchorage, AK)*

The Aurora Borealis COA identified the important role USPHS officers play in combating the opioid epidemic. We identified the need to become educated in how to identify individuals with a high risk for opioid overdose. We want to ensure that all officers are equipped with naloxone and know how to administer it. We want to be fully prepared to save a life. The Aurora Borealis COA partnered with Project HOPE on July 12, 2018, and assembled over 270 naloxone emergency kits, which included two naloxone nasal sprays, a pair of gloves, CPR face shield, and information regarding signs and symptoms of overdose. These kits were then distributed to nearly all our officers stationed in the Anchorage area.

## *Naloxone Kit Building Event with Surgeon General (Anchorage, AK)*

On August 8, 2018, the Aurora Borealis COA branch had the distinct honor of hosting U.S. Surgeon General VADM



*Aurora Borealis COA branch officers with their newly built naloxone kits at the Alaska Native Medical Center*



*Aurora Borealis and Fireweed COA branch officers building naloxone kits with the Surgeon General*

Jerome Adams at a scheduled meet-and-greet and subsequent naloxone kit-building event for local area officers. The event provided officers the opportunity to hear first-hand the personal toll that opioids have taken on the Surgeon General and his family and why he is so passionate about ending the ongoing opioid epidemic. VADM Adams stressed the role the USPHS plays in improving the health and well-being of all Americans and how we as USPHS officers and health advocates are in a position to cause change within our community by improving partnerships with local businesses and law enforcement. In continuation of the concerted effort we face as a community combating the opioid epidemic, over eighty officers from both the Aurora Borealis and Fireweed COA Branches and several Alaska State Troopers put words into action by



*CDR Molly Rutledge and LCDR Darrell Acheson at the Surgeon General's "Chasing the Dragon" community event*

assembling over 400 naloxone kits, with plans to disseminate them to the public later in the day at a movie screening and panel discussion featuring the Surgeon General.

## *Surgeon General's "Chasing the Dragon" Community Event (Anchorage, Alaska)*

see **PARTNERSHIPS** continued on page 14



LCDR Christopher Chong and employees at Benteh Nuutah Valley Native Primary Care Center with their newly assembled naloxone kits

Later that day, Aurora Borealis COA Branch officers collaborated with Faces of Hope Community Services to support a community event. The event featured:

- (1) a screening of “Chasing the Dragon,” a documentary film regarding heroin and prescription opiate addiction;
- (2) remarks from local experts (panelists), including U.S. Surgeon General VADM

Jerome Adams, who see heroin and prescription opiate addiction through their work;

- (3) Q&A with community members.

The event reached over 170 Anchorage community members, with numerous community members leaving with naloxone kits and additional resources from the opioid overdose prevention table,

which was staffed by officers from the Aurora Borealis COA: CDR Molly Rutledge and LCDR Darrell Acheson.

*Benteh Nuutah Valley Native Primary Care Center Naloxone Kit Building Event (Wasilla, Alaska)*

On August 31, 2018, LCDR Christopher Chong from the Fireweed COA Branch and employees at Benteh Nuutah Valley Native Primary Care Center, including Dental, Primary Care, and Pharmacy, partnered with Project HOPE to assemble 272 naloxone kits in commemoration of International Overdose Awareness Day. These kits will be distributed by Project HOPE throughout the twenty-nine health organizations and community groups across the State, where community members can receive naloxone kits free of charge.

*Project HOPE*

In recent years Alaska has experienced an increasing number of drug overdose deaths affecting individuals, families, and communities. As we continue to address this poly-substance epidemic, Alaska’s Project HOPE initiative provides the life-saving medication—naloxone—to those in need. Since February 2017, volunteers from across the state have built over 13,000 overdose rescue kits, distributed over 11,000 kits, and saved over 140 Alaskan lives. To learn more about this program, visit the webpage at <http://dhss.alaska.gov/dph/Director/Pages/heroin-opioids/HOPEforms.aspx>, or directly contact [ProjectHOPE@alaska.gov](mailto:ProjectHOPE@alaska.gov).



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# US Public Health Service Officers Recognized by MOAA

by Col (ret.) Jim Currie

The Military Officers Association of America (MOAA), one of COA's partners in The Military Coalition, recently devoted part of its monthly magazine to a feature entitled, "100 Veterans, 100 Years" (found on the MOAA website at <http://www.moaa.org/Content/Publications-and-Media/100-Vets/100-Veterans-List.aspx>).

MOAA does not explicitly state how these 100 individuals were chosen, but they represent all seven of the uniformed services and include a fair number of general officers, admirals, and Medal of Honor recipients. The list of 100 veterans includes three US Public Health Service officers, while two other USPHS offices are mentioned in a sidebar story. Considering the small size of the USPHS Commissioned Corps relative to the millions of men and women who have served in the other uniformed services in the past 100 years, it is remarkable that USPHS officers represent almost three percent of the list. The 100 individuals are presented in chronological order in the magazine.

The first USPHS officer mentioned is Dr. Joseph W. Schereschewsky, described as an Assistant Surgeon General and noted cancer researcher who served as medical director of the USPHS from 1930 until 1940. The second USPHS officer featured in the list is Dr. Roscoe R. Spencer, a researcher who deliberately injected himself with his own experimental vaccine against Rocky Mountain Spotted Fever, proving both its safety and its



*Dr. Joseph W. Schereschewsky*



*Dr. Roscoe R. Spencer*



*RADM Scott Giberson*

effectiveness. Both of these officers served in the first part of the twentieth century.

The final USPHS officer selected for the list is RADM Scott Giberson, a long-time COA member and a pharmacy officer who served as Acting Deputy Surgeon General in 2013 and 2014. RADM Giberson was selected for the list because of his leadership of the Monrovia Medical Center, a 25-bed hospital that USPHS officers staffed in the West African country of Liberia during the Ebola outbreak there. RADM Giberson and all members of the Commissioned Corps were awarded the Presidential Unit Citation by President Barack Obama, and the US Senate recognized their contributions to our country in a Senate Resolution which passed unanimously in 2016. After learning about his inclusion in the MOAA magazine, RADM Giberson wrote, "I'm so very pleased to see MOAA recognize the Commissioned Corps. For us to be represented with all our sister services illustrates our ongoing partnership and visibility. Of course, it's humbling and I

could think of about a thousand other Corps officers that should have been named instead of me. Just glad the Corps made the list and had that unique opportunity to make an international public health impact!"

The other two USPHS officers mentioned in the article were LCDR Judeth L. Layne, who was serving onboard a NOAA survey vessel operating off the coast of Chile in 1994, and LCDR Steve C. Stringfellow, both of whom rendered medical assistance when a crewmember was attacked by a shark. LCDR Layne received the Department of Commerce Gold Medal for her actions, and LCDR Stringfellow was awarded a Commerce Silver Medal.

COA is proud of all of these individuals, living and dead, who epitomize the professionalism and dedication of the second smallest of the seven federal uniformed services. We are pleased that MOAA chose to single them out for appropriate recognition. It's all about respect.

## Obituary

CAPT Catherine Annette Byrne, age 69, who retired from the Commissioned Corps in 2006, has recently died at her home in Cape Coral, FL. Among her survivors is her daughter, COA member CAPT Diane L. Kelsch, USPHS.

## EXECUTIVE DIRECTOR from page 1

meaning cadets (or midshipmen) at the military academies. These are officers-in-training, officers-to-be. They have not even graduated and been commissioned, and they do not deploy like you do. Yet someone in high authority at AA has decided that they should be respected for their service and you should not. It really gets me riled up when I see something like that.

So, we reach out to them, just like we do to Lowe's and the USO and the National Park Service and other groups and organizations—some of them governmental—that treat you as second-class uniformed service officers. American Airlines is like any other large organization: someone screens all the letters and other forms of communication that are sent to their CEO. He only sees the ones that the screeners deem worthy, and I am convinced that COA's letters have not gotten past the gate-keepers at AA. I therefore sent my last couple of letters to an AA board member whose name I found online. I am hoping that she will actually see the letters and bring them to the attention of the CEO. I sent her a copy of *The Washington Post* column immediately after it appeared. Many of you contributed to that column, and it was a good one, I thought. If you haven't read it, you can see it on our website at: <http://www.coausphs.org/media/1958/article-in-the-washington-post-about-american-airline-baggage-fees-12-oct-2018.pdf>.

The columnist, Joe Davidson, is one we have cultivated, and we responded to him last February when he was preparing a column about the issue of special pay. We reached out to him this time with the story of how American Airlines discriminates against USPHS officers, and he thought it a worthy subject. Davidson captured the essence of what you all are and do:

They wear uniforms that look just like the Navy's. They are deployed to distressed areas on short notice, just like the military. They can be buried in federal veterans' cemeteries, just like others who wore the uniform in service to their country. There is something U.S. Public Health Service (PHS) officers cannot do that others in military uniform can — escape baggage fees when traveling on certain airlines.

Compared to other problems — including those facing Hurricane Michael victims where PHS officers are now deployed — this is a minor issue. Indeed, the officers can be reimbursed by the government for costs related to official travel. But the issue for the 6,500 officers is respect, not another 25 bucks.

One officer recalled traveling in uniform while on official business and being told by an American Airlines agent that she would have to pay a baggage fee “because I wasn't ‘real military.’” Reimbursement “did nothing to assuage the humiliation I felt at having my branch of the uniform services denigrated like that. Another officer said an airline agent made her “feel like I'm an impostor instead of a first responder.”

*The Washington Post* has a daily distribution of about 400,000, making it one of the largest-circulation newspapers in the country, and we think these statements are all positive press for the Commissioned Corps. What's more critical, however, is that *The Washington Post* reaches government decisionmakers who live and work in the Washington, DC, area. It is read every day by members of Congress and their staffs and by Executive branch personnel. Part of the COA Strategic Plan is to increase awareness of the Commissioned Corps and what it does for our country, and pieces like this one in *The Washington Post* are part of our effort.

According to Davidson, American Airlines responded to his query by telling him that, “We don't have a plan to extend these benefits to personnel outside of the armed services at this time.” That may be their current plan,

but this was definitely negative publicity for them, and they will suffer for it.

I shared this article with VADM (ret.) Richard Carmona, the 17th Surgeon General, and he told me that he would send his own letter to American Airlines. He was as good as his word, and his powerful statement is posted on our website at: <http://www.coausphs.org/media/1967/letter-from-vadm-ret-richard-carmona-17th-surgeon-general-of-the-us-to-american-airlines-oct-2018.pdf>. VADM Carmona tells me that he has some connection with the CEO of American Airlines, and I am hopeful that a letter from someone as prominent as he will make it through the screening.

COA, meanwhile, raised the stakes even further with AA. One of our board members, CAPT Karen Munoz, a nurse officer assigned to CMS, suggested to me that we send a letter to GSA, the government entity that manages the airline contracts. I thought this was a terrific idea and did so immediately. The words are my own, and not those of CAPT Munoz, so here is the link to our letter: <http://www.coausphs.org/media/1965/letter-to-gsa-administrator-about-american-airlines-october-2018.pdf>

In it we asked GSA to “cancel any government contracts with American Airlines until they adopt a non-discriminatory policy toward all members of the federal uniformed services and stop their policy of singling-out USPHS officers as they deploy to help their fellow Americans recover from disaster.”

Realizing that sending a copy of this letter to the AA Chairman/CEO would just be a waste of a postage stamp, I sent a copy of it to the AA board member to whom I had directed an earlier letter.

My Plan B is to be certain that folks on Capitol Hill are made aware of how American Airlines is treating the American taxpayer by charging baggage fees to USPHS officers traveling on orders. All it will take is for one member to decide that this is a worthy issue, and American Airlines will have to answer to Capitol Hill.

Airline baggage fees are not the only indicator of a lack of respect that you all encounter. We have expended effort in an attempt to break through to the US Air Force and persuade them to change their policy of not saluting PHS officers. I covered this in a column some months ago, but to refresh you, the Army and the Navy specifically tell their servicemembers to salute higher ranking USPHS officers. The Air Force tells their folks not to do so. We at COA sent two letters to the Air Force Chief of Staff on this issue, but as with American Airlines, I am confident that no one at a high level saw our letters, which can be found on the COA website at: <http://www.coausphs.org/media/1658/letter-to-air-force-chief-of-staff-re-military-courtesy-sep-2017.pdf>

In an attempt to penetrate the cordon sanitaire around the Air Force Chief of Staff, we reached out to our friends at MOAA, specifically to Lt. Gen. (ret.) Dana Atkins. MOAA's Executive Director, with whom we work all the time. He is one of the highest ranking former Air Force officers we know, and he immediately contacted the Air Force and supported our query. We'll see what response we get from the Air Force, but we have now breached its wall.

As with the baggage check, this may not seem important to you, as the Commissioned Corps is facing many threats which border on the existential. I submit to you that all of these threats and slights originate in the same place: a lack of understanding of who you are and what you do. It comes down to basic respect, and if we can solve that one, then we solve all of them.

Respect also enters into our determined effort to change the Smithsonian's position on the National Native American Veterans Memorial. As I have written before in Frontline, we discovered in June of this year that the

# PHS Awareness Day at AHRQ, HRSA, IHS, and SAMHSA

by CDR Samuel Price and CDR Bryna Forson, USPHS

Commissioned officers from the Agency for Health Care Research and Quality (AHRQ), Health Resources and Services Administration (HRSA), Indian Health Service (IHS), and Substance Abuse and Mental Health Services Administration (SAMHSA) came together for the first joint PHS Awareness Day at 5600 Fishers Lane in Rockville, MD. On October 4, 2018, the four agencies collaborated to host this inaugural event. Participants benefited from updates by the Commissioned Corps Headquarters, a demonstration of the Corps leave system (eCORPS), presentations on deployment activities and teams, and information on a variety of Corps committees and issues.

Highlights included an inspiring keynote address by Deputy U.S. Surgeon General RADM Sylvia Trent-Adams, an engaging leadership session with the admirals; and over twenty information tables on a range of Commissioned Corps issues. Breakout sessions covered an assortment of essential topics including: Medical Affairs updates, Thrift Savings Plan Seminar, policy and process updates, discussions on maintaining retention weight goals, and much more.



*Display of an Engineer officer uniform circa 1950.*



*Deputy U.S. Surgeon General RADM Sylvia Trent-Adams expressed to officers at PHS Awareness Day, Oct. 4. "We are the only uniformed public health entity in the entire world. We do things nobody else can do".*

Officers had an opportunity to build camaraderie, network, and inspire one another with a spirit of enthusiasm, devotion, and honor. At the same time, officers raised visibility of the Public Health Service Corps across the co-located agencies. Through the partnership of these federal government agencies, Commissioned Corps officers received

information and support to uphold the mission of protecting, promoting, and advancing the health and safety of the nation, as they continue to serve in essential public health leadership and clinical service roles within the agencies.



*Information tables equipped officers with resources on navigating USAJOBS, PHS Corps Cares, Commissioned Officers Association, PHS Ensemble and Honor Cadre, Veterans and Disability, GI Bill/DEERS, Readiness and Deployment (RedDOG), and more.*

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# The Greater New York COA Branch Welcomes Four Former Surgeons General



COA Executive Director James T. Currie stands with members of the Greater NYCOA Branch. Seated (left to right) are former Surgeons General: VADM Richard Carmona, VADM David Satcher, VADM M. Joycelyn Elders, and VADM Antonia C. Novello

by LCDR Jonathan Blonk

On 15 October, the Greater NYCOA Branch held a meet-and-greet reception for USPHS officers with four former Surgeons General. In attendance were VADM Richard Carmona, VADM David Satcher, VADM M. Joycelyn Elders, and VADM Antonia C. Novello. Also in attendance was COA Executive Director James T. Currie.

During the candid discussions with the NYCOA Branch, the Surgeons General each shared stories of the challenges they faced during their term, as well as the political climates in which they were appointed, noting that the four of them together held the office from 1990 to 2006 under the contrasting administrations of Presidents George H. W. Bush, Bill Clinton, and George W. Bush.

The event was held at the New York Academy of Medicine in conjunction with a presentation from the Surgeons General to the Academy and members of the public entitled *America's Doctor*:

*Reflections on Being the Surgeon General.*

The presentation was given to a packed house, and the discussion, with its question-and-answer session, lasted two hours. Much of the conversation focused on the changing stature of the Office of the Surgeon General. Each Surgeon General told personal stories and discussed the impact that politics had on serving as the "Nation's Doctor." In VADM Richard Carmona's own explanation, he stated, "Once you put on the uniform, there's supposed to be no room for politics. But we aren't stupid; Washington is a combat zone, but you don't always know where the shooting is coming from." The discussions also included the highlights of being the Surgeon General and on positive aspects of their administrations, including lessons learned for the future.

The event was featured in a New York Times article that can be found at <https://www.nytimes.com/2018/10/24/health/surgeons-general-politics-interference.html>

**EXECUTIVE DIRECTOR** from page 16  
Smithsonian's design for the Memorial did not include the logos of either the USPHS or our sister uniformed service, NOAA. We have reached out to the Smithsonian and to the Congressional oversight bodies of the Smithsonian, as well as to the Congressional Veterans Affairs Committees.

We have involved in our efforts the USPHS Native American officers' community, as

represented by the American Indian/Alaska Native Commissioned Officer Advisory Council. We are, of course, approaching this issue because the Smithsonian's approved design omits an important segment of our membership and an important group of Corps officers and does not provide them with the recognize they deserve. But, we are also pursuing this issue because it is a matter of respect for the Commissioned Corps itself.

We at COA take great offense when you are not given proper recognition and respect, and we take on anyone who does not show that respect. You have a long and storied history of service to our country, and we will do whatever we can to promote respect for you. We believe that the late, great Aretha Franklin would have understood.

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