USPHS Officers Attend ASPR Incident Management Seminar

by CDR James Cowher (RIST-NCR), CDR Tami Bonebrake (NIST-D), and CDR Darin Wiegers (NIST-B)

To strengthen HHS incident management capabilities, the Office of the Assistant Secretary for Preparedness and Response (ASPR) convened a first-of-its-kind training seminar March 5-7 in Atlanta, GA. The training attracted approximately 385 professionals, including 118 U.S. Public Health Service (USPHS) officers, in addition to full-time and intermittent federal staff. Eighty USPHS officers selected for the training were members of a National Incident Support Teams (NIST) or the Regional Incident Support Team – National Capital Region (RIST-NCR).

The training seminar was designed to strengthen HHS’ diverse cadre of incident management practitioners. The training allowed responders from across HHS who work in incident management functions to obtain information on recent changes in ASPR’s incident management approach, provide feedback to improve that approach even further, and train as a cohesive team.

The new ASPR incident management framework places decision-making authority in the field during disasters, defines roles and responsibilities, and describes how the various elements of HHS-led incident responses will integrate and coordinate. The framework is driving streamlined processes for the Incident Management Team (IMT).

What if it happens again?

The “it” is another government shutdown, partial or otherwise, and it is quite possible that we could get another one at the end of the current fiscal year, which ends on 30 September. It’s funny, isn’t it, that while the last government shutdown was taking place, there was all kind of talk here in DC about how we needed legislation to prevent such a thing from ever happening again. The best idea, I thought, was that a law would be enacted to set up an automatic continuing resolution procedure that would go into effect if there was not Congressional/Presidential agreement on appropriations bills. This was a reasonable solution to a bad situation, I thought, and there was a bipartisan effort to push such a measure. Then, the shutdown ended, and the idea of preventing another one quickly

see EXECUTIVE DIRECTOR on page 16
COA Member Benefits

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

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COA Local Branches provide venues for meeting fellow officers and a forum for the discussion of issues within the Commissioned Corps.

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

Legislative Update
COA’s Legislative Agenda, 2019-2021

by Judy Rensberger

- Parity with the Armed Services
- Inclusion of USPHS in the Smithsonian’s proposed National Native American Veterans Memorial
- Defeat of the Office of Management and Budget’s proposal to cut the Commissioned Corps
- Statutory flag for Corps Chief Medical Officer
- Senate confirmation of all Corps officers
- Appropriations for emergency preparedness training for Commissioned Corps officers
- Appropriations for the Office of the Surgeon General (OSG)
- Reinstatement of the USPHS Reserve Corps
- Implementation of USPHS clinical billets at VA
- Reducing tobacco use

These ten priorities comprise COA’s current federal legislative agenda. The 116th Congress began in January of this year and will end in January of 2021. Some legislative priorities may remain well beyond that date; that is because a legislative campaign may take years to show results, if it shows results at all. A few of COA’s current legislative priorities are new, some are old, and some, like diamonds, are forever.

COA’s legislative goals – new or expanded benefits; parity with the armed forces on issues large and small – are defined and developed by COA’s Legislative Affairs Committee. It is chaired by CAPT Paul Jung. Suggestions come mostly from Committee members and staff, but any COA member is welcome to weigh-in. All suggestions are discussed and evaluated by the Committee; the final list is determined by the Chair, subject to approval by COA’s Board of Directors.

The Legislative Affairs Committee has long been one of COA’s largest and most active committees. At present, it has nearly sixty members; about a dozen or so committee members participate in each committee call. The committee meets at noon Eastern Time on the third Thursday of each month. To join, contact CAPT Jung at phsdoc@gmail.com and copy staff (me) at jrensberger@coaushs.org.

Beyond the monthly calls, committee members work behind the scenes, on their personal time. One example was a time-consuming project to determine how many PHS officers serve in various congressional districts across the country. That’s useful information to have when COA staffers call on key House members who may not always know how PHS officers in their districts help their...
Healthy Eating and Active Living (HEAL) Outreach Program at Little Bennett Elementary School

by LT Yajun (Jason) Tu and LT Surjit Basi

Childhood obesity is a complex health issue and serious problem in the United States which puts children and adolescents at risk. The Centers for Disease Control and Prevention defines childhood obesity as a body mass index (BMI) at or above the 95th percentile for children and teens of the same age and sex. Obesity now affects 1 in 5 children and adolescents in the United States. Children who are obese are more likely to have physical, social, and psychological problems. In the long term, children who are obese are more likely to become obese as adults and increase their risk of serious health conditions including heart disease, type 2 diabetes, metabolic syndrome, and many types of cancer.

To address this public health concern and to achieve the mission of the U.S. Public Health Service (USPHS) Commissioned Corps, the PharmPAC Public Health Subcommittee has sponsored a special program since 2008 on childhood obesity prevention, healthy eating, and active living. Under the leadership of CDR Duong (Diane) Nhu, this program focuses on educating young children at an early age on preventive strategies, health, and psychosocial issues related to obesity. The program educates elementary school children through fun-filled, interactive presentations on weight management and nutritional behavioral modifications in an effort to meet the goal of curbing childhood obesity within a generation. Targeting elementary school children would be more of an advantage, as we expect better reception and retention of the educational messages in children versus older adolescents.

On March 15, 2019, eight officers visited Little Bennett Elementary School in Clarksburg, MD, and provided education on childhood obesity prevention, healthy eating, and active living to 135 first graders. The event consisted of a presentation, a breakout session, and a relay game. The presentation had five separate sections. In the first section, CDR Duong (Diane) Nhu provided an introduction of the program. In the second section, LCDR Sasha Latonis gave a brief description of the USPHS, our various professions, and our deployment roles. She then presented a background of childhood obesity and the importance of healthy eating and physical activity. In the third section, CDR Vincent Sansone presented “Choose My Plate” to illustrate the five essential food groups that serve as the building blocks for a healthy diet. This section emphasized nutritional balance and portion control and encouraged healthy food choices. The students were then divided into three groups for a breakout session. Each group rotated through three stations: grains and proteins, fruits and vegetables, and dairy. Cardboard displays of the food groups, as well as real and plastic samples of each food group were presented at the stations. The officers at the stations reiterated the five food groups and the importance of choosing meals and snacks of nutritional value, reading nutrition labels, and

CDR Vincent Sansone presents “Choose My Plate” and illustrates the five food groups.

CDR Thomas Hinchliffe leads the relay game.

portion control. The goal of this activity was to help the students physically visualize the actual portion sizes of a healthy meal. After the breakout session, the presentation continued onto the fourth section where CDR Thomas Hinchliffe demonstrated the importance of staying active through fun-filled physical activities. In the last session, CAPT John Quinn discussed the importance of

see HEAL continued on page 10
On October 12, 2018, the NIH hosted the second annual Physician Assistant (PA) Celebration Day in recognition of National PA Week. Civilian and USPHS PAs, along with nurse practitioners from the NIH, enjoyed the camaraderie and a catered lunch. There are approximately 45 PAs who work at the NIH Clinical Center and only 5 of them are USPHS officers. The key note speaker for the event was Dr. Lisa Alexander, EdD, MPH, PA-C, who is president of the Physician Assistant Education Association (PAEA). Her “day job” is being a full-time faculty member at George Washington (GW) University’s PA Program. Dr. Alexander spoke about the growth of domestic and international PA programs and the high demand of PAs at present and predicted for the future. Other distinguished guests included Mr. Tate Heuer, Vice President of Federal Advocacy for the American Academy of Physician Assistants (AAPA). Also in attendance was Mr. Pius Aiyelawo, who is the Chief Operating Officer (COO) for the Clinical Center and a retired U.S. Navy Captain.

At the conclusion of PA Celebration Day, Dr. Alexander suggested that NIH USPHS officers come to GW in the future to meet her students. On February 15, 2019, four NIH officers traveled to the Foggy Bottom campus during call back day to speak to the 69 second-year PA students about practicing as a PA in the Uniformed Services. The panel members—CAPT Ulgen Fideli, CDR John Hubbard, CDR Daniel Goldstein, and another PHS PA—spoke about their USPHS careers, duty stations, and unique experiences. The event commenced with CDR Goldstein giving a brief history of the USPHS. The students had plenty of questions, and several expressed interest in applying to become commissioned officers in the Corps.

These two events highlight the effective recruitment opportunities that can arise from nurturing strong partnerships between the public and educational sectors. Having a seasoned group of USPHS officers share their experiences with PA students will help recruit a new generation of officers dedicated to public service.
A PACE Partnership in Dallas with the Greater Texas COA and the American Heart Association

by CDR Travis R. Hunt, MPH, REHS

Most of my career in the United States Public Health Service Commissioned Corps has been as the sole officer at various FDA resident posts. In the spring of 2018, I transferred from being an Investigator at FDA Pittsburgh to being a Supervisory Investigator at FDA Dallas. After arriving in Dallas, I promptly joined the Greater Texas COA and began actively participating in their auxiliary activities. Once such activity was the Prevention Through Active Community Engagement (PACE) initiative. The goal of PACE is to enact the National Prevention Strategy through educational, civic, and faith-based community outreach. PACE is a fantastic opportunity to increase the visibility of the Corps, while providing valuable leadership opportunities for officers.

The Greater Texas COA chose Community CPR as a PACE-initiated activity and established a partnership with Ms. Allie Bateman, Community CPR Manager for the American Heart Association (AHA) Dallas Chapter. The State of Texas has a goal of providing CPR training to all high school students before their graduation. Accordingly, the AHA Dallas Chapter provides hands-only CPR training to students in the Dallas-Fort Worth Metroplex (DFW).

With the AHA Dallas Chapter’s goal in the forefront, Ms. Bateman initiated a dialogue with the Greater Texas COA. In our early meetings with Ms. Bateman, we had to answer the question as to what role a Commissioned Corps Officer could fill to help the AHA Dallas chapter support the State of Texas’ goal. The answer was obvious to her, and she was grateful to have a pool of motivated public health practitioners willing to meet with the community and provide hands-only CPR training.

As PHS Officers, we all maintain an active CPR certification. Regardless, the AHA requires volunteer instructors to complete a half day AHA hands-only CPR training, and we all received it. We were provided with a list of scheduled CPR events where we could provide the training, and my choice was the National Charity League’s “National Philanthropy Initiative Day” on 12 January 2019 at the Trinity Valley School in Fort Worth, TX. I was joined by LCDR William Bird, CIH, who is assigned to the FOH in Dallas, and by LT Kristin Longfellow, RD, who is at the Fort Worth BOP. This was a well-attended event, and we trained over 100 students and their mothers. Additionally, we provided participants with an overview of the USPHS Commissioned Corps. I even fielded a few questions after the event from individuals interested in becoming a Commissioned Corps officer.

My second event was at the Colling College Campus in Frisco, TX, on the evening of 11 February 2019. Once again, I was joined by LCDR Bird. This event was created when the AHA received an invitation from the National Charity League Dallas Chapter to provide hands-only CPR training to its adult members. During the event we provided hands-only CPR training to approximately fifty professional adult women. I was once again allowed to provide a brief overview of the USPHS Commissioned Corps to participants. As before, I fielded multiple questions about the USPHS Commissioned Corps, with subjects ranging from former Surgeon General Koop to our response to Ebola.

Besides supporting the National Prevention Strategy, our partnership with...
Southern Arizona Veterans and First Responders Living Memorial

by Col. Jim Currie, USA (ret.)

Thanks to the persistence and efforts of VADM (ret.) Richard Carmona, the 17th Surgeon General of the United States, USPHS (and NOAA) officers are honored on the Southern Arizona Veterans and First Responders Living Memorial in Naranja Park on 2.5 acres allocated by the Town of Oro Valley, in full view of the Catalina Mountain’s Pusch Ridge.

VADM Carmona began working several years ago to have the USPHS and NOAA included in the memorial. He even joined the effort and became its “Honorary Chairperson.” His work paid off, and all seven uniformed services will be represented on the memorial. The monument will consist of a twenty-five foot tall obelisk.

Donations for construction of the monument can be made at https://vfrm.org/contact-us

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SO. AZ VETERANS AND FIRST RESPONDERS LIVING MEMORIAL

LEARN ABOUT OUR PASSIONATE TEAM, AND HOW YOU CAN HELP BUILD THE MEMORIAL!
Aurora Borealis COA Supports Kids2College Program

by CDR Molly Rutledge, CDR Anne Marie Bott, and LCDR Theresa Castellanos

On April 9 and 10, 2019, the Aurora Borealis COA (Anchorage, AK) supported the Kids2College program. This is a national program that targets students in their last year of elementary school to help them identify career interests and learn the steps to better prepare themselves for college success. CDR Molly Rutledge and LCDR Theresa Castellanos spoke to 6th graders at local elementary schools in Anchorage as part of a career panel through the Kids2College program. Through the six-lesson curriculum, the students gain a better understanding of what it takes to get into college, resources available to help pay for college, what it’s like to be a college student, and how to become a working professional. Kids2College is a partnership between the Alaska Commission on Postsecondary

see AURORA continued on page 11
COA and the National Native American Veterans Memorial

COA continues its efforts to persuade the Smithsonian to modify the design of the National Native American Veterans Memorial and include the seals/logos of both the US Public Health Service and the National Oceanic and Atmospheric Administration. We were bolstered in our efforts when Health and Human Services Secretary Alex Azar sent a powerful letter to the Secretary of the Smithsonian espousing inclusion of the USPHS in the memorial. Secretary Azar's letter is reproduced below.
CAPT (ret.) Dean Coppola, COA Board member and COF Trustee, has been honored by the Marquette University School of Dentistry with its “Distinguished Alumnus in Dentistry Award.” Coppola received the award during Marquette’s 2019 Alumni National Awards weekend, April 25-27, 2019.

CAPT Coppola retired from the US Public Health Service Commissioned Corps in 2018 after a distinguished career that spanned thirty years. He received numerous awards during his exceptional PHS career, including USPHS Dental Responder of the Year and USPHS Commissioned Corps Responder of the Year. He served twice as Chair of the COA Board and currently serves on both the COA and COF Boards.
breakfast and offered tips for a healthier life. After the presentation, the students played a relay game in which they were given a picture of food from one of the food groups and instructed to place the picture in the appropriate food group bin. The game allowed the students to practice their knowledge of the food groups in a fun and interactive way. In the end, the students were all given a book called “The Two Bite Club” as a small prize.

This is the first time this program was conducted at Little Bennett Elementary School. The event received positive feedback and praise from the teachers in attendance. For the first time in the history of this program, special needs students were included in the audience. These twenty special needs students were able to sit through the whole event and enjoyed the game and presentation along with the other students.

Special thanks to the following officers who enthusiastically dedicated their time and efforts to make this event a success: CAPT John Quinn, CDR Duong (Diane) Nhu, CDR Vincent Sansone, CDR Thomas Hinchliffe, LCDR Andrew Kim, LCDR Sasha Latonis, LT Yajun (Jason) Tu, and LT Surjit Basi.

PHS Officers who want to participate in future events should contact CDR Nhu at duong.nhu@fda.hhs.gov.
The Special Olympics of New York, Western Region, held its Regional Bowling Tournament on February 10, 2019, in Cheektowaga, NY. Five officers from the Western New York COA (WNYCOA) branch (CDR Sean McMahan, CDR Charles McGee, LCDR Susan Collins, LCDR Maggie Zettle, and LT Joel Merriman) served as lane supervisors to help encourage and motivate 250 athletes, ages 8-21 and >22, during three games of competitive bowling without bumpers. Although lane supervisors are not allowed to “coach” during competitive play, WNYCOA officers ensured that scores were accurate, bowling lanes were operational, and that athletes were safe and having fun! WNYCOA joined local law enforcement (Customs and Border Patrol, New York State Troopers, and Buffalo State College Police) and presented awards to several top athletes – some of whom bowled career high scores.

Winners of this regional tournament will play at Vassar College in Poughkeepsie, NY, in the Special Olympics New York Summer Games from June 14-15, 2019. More than 1,500 athletes and coaches will travel from around the state to compete in a variety of summer sports, including bowling.

WNYCOA officers are also looking forward to volunteering at this year’s Special Olympics of New York, Western Regional Spring Games in May.

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### PACE from page 11

The AHA supports the State of Texas’ goal of providing CPR training to high school students. Hands-only CPR is a derivative of CPR that eliminates the requirement to render breathing assistance and focuses on compressions. The AHA reports that hands-only CPR is readily-adaptable and easily-remembered post-training, making it an additional life-saving tool. In the two events detailed above, three USPHS Commissioned Corps Officers provided direct hands-only CPR training to over 150 participants, while sharing the history and mission of our Corps. This embodies the mission of the USPHS Commissioned Corps of “protecting, promoting and advancing the health and safety of our Nation.”

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### LEGISLATIVE from page 2

COA’s Legislative Agenda is a rolling document. Since the current agenda was developed and finalized, COA members have asked that two more items be considered: expanded paternity leave for PHS fathers, and inclusion of PHS children in the Defense Department’s child development centers. Those two benefits will go on the committee’s discussion list. Occasionally, a new legislative priority is added because a new opportunity (or challenge) presents itself. One example was the unexpected White House proposal to cut the PHS Commissioned Corps by thirty-eight percent overall. Fortunately, that terrible idea has not gained much traction.

Still other ideas emerge because, however difficult, they are important. Let us know if you’re willing to help.

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### AURORA from page 7

Education and the University of Alaska College Savings Program.

CDR Rutledge, a speech-language pathologist, spoke on a four-person panel which included a civil engineer, a college advisor, and an epidemiologist. LCDR Castellanos, a pharmacist, was on a panel with an engineer and the director of the local university parking services department. Each panelist talked about their career paths and how they came to be where they are today. The participation was a rewarding experience for the officers, one the Aurora Borealis COA hopes to continue to support for years to come.
Established in 1975 by the certifying organization now known as American Society for Clinical Laboratory Science (ASCLS), Medical Laboratory Professionals Week (NMLW) is a time to celebrate the profession of laboratory science. In honor of the 2019 celebration which took place April 21-27, it is a privilege to introduce a few of the United States Public Health Services (USPHS) Medical Technologists in action. These are their deployment stories and words of wisdom for future deploying Medical Technologist officers.

Background
There are 124 active duty Medical Technologists serving in the Commissioned Corps as of January 2019. These officers play a vital role in augmenting Rapid Deployment Forces (RDFs) during Federal Medical Shelter (FMS) missions where a laboratory cache is deployed. The Assistant Secretary for Preparedness and Response (ASPR) manages the laboratory packages, which consist of 28 deployable Lab Basic packages and 18 deployable Lab Basic Plus packages. For each shelter mission that receives a laboratory cache, Readiness and Deployment Operations Group rosters two Medical Technologists officers to the assigned RDF team to operate the Lab Plus packages.

Officer Deployment Experiences
CDR Renee Galloway has fifteen-years in the Commissioned Corps and is assigned to the Centers for Disease Control and Prevention in Atlanta, GA, as a Microbiologist III in the Zoonosis and Select Agent Laboratory. A certified Medical Laboratory Scientist for twenty-one years, CDR Galloway was deployed with the lab cache during a RDF-3 mission to staff a special needs shelter in Baton Rouge, LA, in August 2016.

CDR Cara Nichols has served eleven years in the Commissioned Corps and is assigned to CMS in Denver, CO, in the Clinical Laboratory Improvement Amendments (CLIA) Program. CDR Nichols has been a certified Medical Laboratory Scientist for nineteen years, and has deployed with the lab cache on two occasions: 2008 Hurricane Ike and 2011 Hurricane Sandy. To best prepare for deployments with the lab cache, CDRs Galloway and Nichols recommend that officers read the lab manuals in advance, familiarize themselves with the all standard operating procedures and, most importantly, be prepared to perform phlebotomy.

CAPT Todd Alspach has served sixteen years in the Commissioned Corps and is assigned to CMS as the Regional Laboratory Consultant in Denver, CO. CAPT Alspach is currently the Deputy Commander of Regional Incident Support Team 8. He has been a certified Medical Laboratory Scientist twenty-four years. CAPT Alspach deployed in a lab capacity in 2012 for Hurricane Sandy in

At the ASPR warehouse in Fort Worth, Texas, LCDR Christopher Le, Laboratory Director for the ASPR Lab Cache, unpacks a Lab Basic Package equipment case and explains to officers he is training how to set up and operate the package contents.

Lab Cache Basic Plus package displayed after unpacking from the Green triwall. The additional equipment cases and supplies demonstrate the vastly larger footprint of this package.
When people think about the State of the Union Address, they seldom consider the tremendous support necessary to make the event happen. The address is the only event in which all members of both houses of Congress, the Supreme Court justices, the President of the United States, the vice president, and almost all presidential cabinet members are in the same place at the same time. Thousands of people are involved, either participating in the event or as support staff. Security is an obvious concern, but health is also a consideration.

Congress’ Office of the Attending Physician and the U.S. Capitol Police requested U.S. Department Health and Human Services support for potential medical and public health needs during this event. The HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) coordinated the public health and medical response and drew on expertise from the Regional Incident Support Team-National Capital Region (RIST-NCR).

RIST-NCR is a U.S. Public Health Service (USPHS) Tier 1 Deployment Team. Members are expected to deploy within twelve hours of notification of an Emergency Support Function 8 (ESF-8, the public health and medical support), non-ESF-8 public health needs, or to meet an urgent health need in the national capital region.

The RIST-NCR works with USPHS Readiness and Deployment Operations Group (RedDOG) to provide rapid assessments and initial incident coordination resources to partners in the national capital region, including ASPR. RIST-NCR personnel stood among the assets ready to respond if a catastrophic event occurred.

In addition, seven RIST-NCR team members deployed in Incident Management Team positions during the event, serving as the IMT safety officer and as liaisons to partner agencies, including Secret Service, the U.S. Capitol Police, and the Washington, D.C., Department of Health. The Incident Management Team manages the public health and medical response and provides command-and-control for deployed personnel and equipment. Participating RIST-NCR members were CAPT Sally Hu, CDR Gerald Brozyna, CDR Chekesha Clingman, CDR Judy Facey, CDR James Kenney, CDR Jonathan Kwan, and LCDR Carlos Gonzalez-Mercado.

Additional Commissioned Corps officers from ASPR and other HHS divisions supported the event, including serving as the federal health coordinating official who manages the entire operation for HHS.

If you are interested in learning more about the RIST-NCR or joining RIST-NCR please contact the RIST-NCR Team Commander, CAPT Sally Hu (sally.h.hu.mil@mail.mil).

2019 USPHS Scientific & Training Symposium

photos are available.

Thanks to CDR Kun Shen, CDR Patricio Garcia, and Jeff Nohner for serving as photographers.
Photos are available at phscof.org/symposium
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Nathan Hamil is pursuing his Master of Public Health (M.P.H.) with a concentration in Health Policy and Management at New York Medical College (NYMC) School of Health Sciences and Practice. Lieutenant Commander Hamil, a commissioned consumer safety officer in the United States Public Health Service, serves as drug information specialist with the U.S. Food and Drug Administration.

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An Opportunity for You

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

There are many private clubs in the Washington, DC, area aside from country clubs. The latter focus on outdoor recreation and are generally places with golf courses and tennis courts, perhaps even a swimming pool or two. At a different level, however, are the several distinguished private clubs in downtown Washington, DC, that cater to a particular demographic, usually offer fine dining and entertaining opportunities, and may even have overnight accommodations. You’ve probably heard of some of them: University Club, the Metropolitan Club, the Cosmos Club. Several of these are by-invitation-only and require large initiation fees. One club that might not have caught your attention is the Army and Navy Club, whose beaux arts building occupies a prominent spot on Farragut Square at 17th Street NW (https://www.armynavyclub.org/).

This club, founded in 1885 by Army, Navy, and Marine Corps veterans, has 5000 members, several dining rooms, a 20,000 volume library, a fitness center, private facilities for events like wedding receptions, and thirty-two guest rooms.

We bring this club to your attention because it welcomes USPHS officers as members. Here’s what its website (https://www.armynavyclub.org/membership) says about membership requirements:

“Regular Membership

A person who is serving or has served as a commissioned officer in one of the uniformed services of the United States (i.e. Army, Navy, Air Force, Marine Corps, Coast Guard, National Oceanic and Atmospheric Administration or Public Health Service) shall be eligible for regular membership. Regular membership shall carry all privileges, including the right to vote, to serve as an officer of the Club or a member of the Board of Governors, to have an interest in the property of the Club and to endorse applications for membership.”

COA is not pushing membership in the Army and Navy Club because we derive any benefit from doing so. We ran across this opportunity, thought it was welcoming of USPHS officers, and wanted to bring it to your attention.

GI Bill Reminder

Under a policy change announced by the Defense Department last summer, service members who have more than sixteen years time in service will not be able to transfer their GI Bill benefits to a dependent. The deadline for transferring benefits is July 11, 2019. Your dependent does not have to use the benefit by that time, but you must have transferred it to them.
EXECUTIVE DIRECTOR from page 1

went away. Frustrating. And typical of the way the political class here in Washington approaches any crisis: scream and holler about it while it is happening, then hope everyone forgets it once it is over. How many times have we seen this pattern?

I wrote several months ago about how the shutdown was caused by a 1980 interpretation of an 1870 law that was probably never intended to cause a shutdown of our government. For 110 years the law had never been interpreted as requiring a government shutdown in the absence of approved appropriation bills, and then one largely-forgotten and relatively-obscure Attorney General put in his two cents worth, and we started having shutdowns, though there are so many loopholes in the interpretation as to make it largely a matter of whim.

The reason I believe we are likely to face another shutdown, partial or full, is that I think it quite unlikely that Congress will give President Trump the $8.6 billion in border wall funding his budget calls for. I cannot imagine that the House will provide anything like that amount, though it might provide some funding for “border security,” not to include a brick-and-mortar wall. Will President Trump stand firm and demand this funding as the sine qua non for avoiding another shutdown? We don’t know, and I am not going to make predictions, as the whole matter is so unpredictable. What I do know is that you all are liable to be caught in the middle again. So, what will it mean for you, and can you do anything to lessen its impact?

Michelle Singletary is a personal finance columnist at The Washington Post, and I usually agree with her take. On 13 March she offered her advice to civilian federal workers, and much of it applies to uniformed officers as well. Here are the take-aways from her column that I thought applicable to active duty COA members.

Stash some cash. This is always good advice, whether or not you are anticipating a missed paycheck. Singletary suggests three to six months of living expenses tucked away, and that’s terrific if you can do it. I know that when I was paying for a young family, that would have been impossible. Building up that much of a pot of money that will be there for a rainy day is a terrific idea, but it’s not always feasible. It’s an ideal, so put aside the money you can into an account you can tap into if necessary.

Money in a 401(k) is accessible, but you’ll have to pay a 10 percent penalty if you are under 59½ when you withdraw it. Even if we never have another government shutdown (highly unlikely), and your PHS career is undisturbed, you might well run into a situation where a spouse or partner who shoulders some of the household financial support burden is unexpectedly laid off from their job or gets sick and can’t work, or even dies unexpectedly. This recently happened to one of my neighbors, a nice young fellow who was the innocent casualty of a corporate merger. It was totally unexpected, and it presents quite a problem for the family.

Find a friendly financial institution (and establish a relationship with them). If you remember a few months back when you were threatened with missing a paycheck, COA reached out to several financial institutions on your behalf. They all had one thing in common: you needed a financial relationship with them that predated the shutdown if you were going to qualify for assistance from them. We talked with Pentagon Federal Credit Union, Navy Federal Credit Union, and USAA. All of them required a pre-shutdown financial relationship with them. In some cases you needed a pre-existing direct payroll deposit checking account before they would consider giving you a low-cost, tide-you-over loan. If you have a good relationship with a financial institution you trust, that’s fine.

But I warn you that if the institution with which you now do your banking and borrowing is one of the mega-banks—I won’t try to name them, but you know who I mean—then I wouldn’t count on any help from them if the stuff hits the fan and you miss a paycheck as a PHS officer. You’re just a bank account number to them, one of gazillions with which they deal. I’m not saying that credit unions are the only way to go, but I have found through the years that these not-for-profit entities actually seem to care about their members. USAA is also a non-profit entity, and I have all my various kinds of insurance with them. I have always found them to be reasonable and responsive.

Home equity lines of credit are harder to arrange now than before the financial crisis of ten years ago, but having a way to access an automatic short-term loan when you need it is always good. If you tap into such credit in the event of a shutdown, you should pay it back as soon as you receive your back pay, else it will just add to your debt burden.

Singletary had other advice that does not apply to you, such as working a side job or seeking crowd funding. As PHS officers, you can’t do either of these. We at COA always say that we are not financial advisors, and we are not. But we gladly pass along the advice that has come to us from qualified sources. It’s worth considering.

As for whether we’re going to have another shutdown, your guess is as good as mine. It is quite unlikely that all of the appropriations bills will have passed the Congress and been signed into law by 30 September. There is obviously the potential for severe disagreement between Congress and the White House, and that disagreement could get to a point—like it did late last year—where the President will refuse to sign a continuing resolution sent to him by the Congress.

If that happens, you could again be threatened with missing a payday. If it occurs, then you would be well advised to have done some pre-planning along the lines suggested by Ms. Singletary. You can be certain that COA will do everything possible to stand beside you as you navigate the troubled waters of a government shutdown. We learned from the last one how to reach out successfully on your behalf, and you can always count on COA to be there for you.
The seminar drew speakers from across HHS, as well as from other federal, state and territorial agencies. In addition to twelve plenary sessions, the seminar included eleven specialty tracks organized by Incident Command System functional areas. Many of the specialty-track breakout sessions were designed as collaborative discussions with two or more functional areas. This approach facilitated teamwork and relationship building, and gave participants the opportunity to discuss common challenges faced during response events.

Seminar features USPHS officers

The seminar kicked off with the USPHS Music Ensemble singing the national anthem, and USPHS officers led breakout sessions over the three-and-a-half day event. CDR Tara Bizjak from RIST-NCR presented on critical leadership skills for operation section members and moderated a panel of experts in identifying best practices for Operations Group Supervisors. CDR Jessica Hensley from NIST B facilitated discussion on lessons learned from several recent deployments for the planning section, and CDR Samantha Spindel from NIST-D co-led an Administration/Finance breakout session on best practices, including protection of sensitive information, administrative briefings, and demobilization procedures.

Many officers attending the IMT training seminar shared that they had received positive comments from the ASPR counterparts they serve alongside during incidents. The Commissioned Corps was repeatedly recognized as bringing a disciplined professional workforce to the IMT and is seen as an extremely valued asset to response efforts.

The seminar concluded by honoring Mr. Andy Stevermer, a retired USPHS officer, who will be retiring from his position as the ASPR IMT Program Manager. His steadfast support has been vital in facilitating PHS officer integration into the incident management system.

USPHS officers essential to future incident management success

Increasing the number of incident-management-qualified officers to support the IMT is essential to the success under the new incident management framework. The new framework calls for developing specific qualifications for staff who fill Incident Management Team roles; the IMT Program Qualification System, which started in 2015, will be expanded to meet this need. To become credentialed, officers must complete a role-specific Position Task Book that requires demonstrating competency in assigned tasks during actual incidents or events. Preparing for these roles requires a significant amount of dedication and time, and requires deployment.

To aid in this effort, six credentialed NIST and RIST officers were asked to participate in an additional training in order to serve in a mentor/evaluator role. This training was offered to improve the quality and consistency of mentoring and evaluation of experiential learning. CDR Tara Bizjak, CDR Jonathan Kwan, CDR Carolyn Volpe, CDR Melissia Walker and LCDR Linda Park from RIST-NCR and CDR Tami Bonebrake from NIST-D completed the training. They join CDR Jessica Hensley (NIST-B) and CAPT Kate Brett (NIST) who were already trained mentor/evaluators.

USPHS officers from the five NIST Teams and RIST-NCR have been an integral part of the ASPR response framework. Currently 120 officers serve on NIST teams and thirty officers serve on the RIST-NCR. RIST-NCR has supported response efforts with an average of ninety percent of team members deploying annually from 2014 to 2018. Data for NIST teams indicate that from 2014 through 2016, an average of twenty percent of officers deployed annually, but this increased to an average of seventy-five percent in 2017 and 2018. These data suggest that officers are being relied upon increasingly for IMT staffing and support.

If you are interested in joining a NIST team, contact CAPT Kate Brett (kmb5@cdc.gov). Officers in the national capital area that are interested in joining RIST-NCR should contact CAPT Sally Hu (sally.h.hu.mil@mail.mil).
Donations Received, April 1 to 30, 2019

**Silver ($250)**
- CAPT James R. Minor, Ret. ^
- RADM George A. Raich, Ret. ^

**Bronze ($100)**
- CAPT Sara B. Newman ^
- LCDR Jamie L. Martinez
- CAPT Richard M. Taflet, Ret.

**Friends (Under $100)**
- CAPT Maria D. Benke ^
- Mrs. Carol Delliapenna
- Mr. Stephen Deming
- CAPT George A. Durgin, Jr., Ret.
- CAPT John L. Henderson, Ret.
- CDR James L. Kenney, III
- CDR Andrew H. Sallach
- Ms. Beth Krah ^
- Dr. Albert T. Wilburn

All other donations were made to the COF General Fund

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**We Welcome New Members of COA,**
**April 1 to 30, 2019**
- LT Jennifer Carrera
- LCDR David Jackson, Jr.
- LCDR Justin Markley
- LCDR Samantha Morales
- LT Cindy Pallack
- CDR Stacey Yonce

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**COA Donations**
Commissioned Officers Association of the USPHS Donations Received,
April 1 to 30, 2019
- LCDR Jennifer J. Clements

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**Reminder**
Submissions to *Frontline* are a maximum of 750 words in length. Articles that exceed this length will be cut.
RESULTS from page 12
Edison, NJ, and again in 2017 for the ASPR Logistics Resupply for Hurricane Responses in Sacramento, CA. CAPT Alspach felt that prior to working with the cache he had sufficient relevant experience with the equipment from his clinical practice and was well prepared. CAPT Alspach recommends that officers preparing to work with the lab cache should be familiar with general lab procedures, ask officers who previously deployed what their experience was, and make certain to read the procedure manuals.

LCDR Renae Hill has served twelve years in the Commissioned Corps and is assigned to CMS as a Senior Health Insurance Specialist in Seattle, WA. She has been a member of the Rapid Deployment Force-5 since 2009. She has been a certified Medical Laboratory Scientist for nineteen years. LCDR Hill deployed in a lab capacity for responses in Hurricane Gustav in College Station, TX, (2008), Hurricane Isaac in New Orleans, LA (2012), and the ASPR Logistics Resupply for Hurricane Responses in Sacramento, CA (2017). LCDR Hill recounts that prior to working with the cache she had used most of the instruments and was well-prepared due to her clinical experience and background. She stressed that the ability to perform phlebotomy was crucial in the shelter missions she served. LCDR Hill also shares that the handoff orientation between RDF teams was a great orientation to the lab cache. She shared that CDR Cara Nichols (see above) gave an excellent orientation of the lab cache before she went home. LCDR Hill also used the manuals and job aids such as training videos to orient to the task. LCDR Hill recommends that officers preparing to work with the lab cache know ahead of time what instruments are currently in the lab cache. If officers can make a site visit to a nearby lab for some hands-on training, that would be best.

Tell us Your TRICARE Stories

Weeks ago, members of The Military Coalition’s Health Care Committee met with Senate subcommittee staff to discuss TRICARE problems. I described the experience of a PHS Captain who also happens to be a physician, a health care administrator, and an insurance expert. Everything that could possibly go wrong in the handling of his child’s claim did go wrong, including an improper invoice for nearly $3,000.

It’s a mixed bag. Some PHS officers say TRICARE has served them well. What I am hearing most often, however, are disheartening stories of claims badly mishandled by TRICARE customer service reps who do not seem to know how the program works. A PHS spouse spent nearly 80 hours untangling multiple mistakes made by a TRICARE subcontractor as it processed claims made on behalf of the family’s two teenagers.

COA wants to hear more. We will not publish your name or identifying details without getting your permission in writing. Help COA to create a snapshot of the kind of health care offered to PHS members and their families. We can take that back up to Capitol Hill. Email your TRICARE stories to Judy at jrensberger@coausphs.org.