

Public Health Service Academy of Physician Assistants Newsletter

Message from Past President

CAPT Mike Milner



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*The PHS has
come to age and
might just take
over...*

Fellow PHSAPA Members: We have had many successes as a Chapter and have moved our fledgling group "into the light". Your participation at the AAPA HOD and the Veterans Caucus Memorial Day and HOD openings was very much appreciated and sent a powerful message to our sister uniform services that the USPHS and the USCG are real players. We gained a great deal of respect at the AAPA meeting. I heard some of the "real old timers in the Vets Caucus" say, "Wow, the PHS has come of age and might just take over".....you were very visible and because of your commitment to the "transformation of the Corps", displayed bearing and decorum that gave us all more respect by our comrades in arms. Thank you for that positive display.

I hope the creation and significant forward progress of the new Physician Assistant Professional Advisory Committee (PAPAG) does not adversely impact our Chapter. When the PAPAG was conceived, (initially during the tenure of CAPT Richard Vause (ret) on the HS-PAC, followed by more visioning by CAPT Mike Gosman and then by myself), it was expected that there would be clear roles for both organizations. Having two distinct groups, one (PHSAPA) representing the PA profession in support of federal agencies through the AAPA and the other (PAPAG) representing the specific needs and creating new opportunities for PHS PA's would help advance our profession in all arenas. We envisioned increased leadership opportunities and visibility for PA's by these two bodies who work separately yet together with some overlap. I think it is working as well as we envisioned several years ago.

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Federal Services Dining Out

CAPT Richard Vause (ret)

Officers and guests, mark your calendars!! The 7th Annual Federal Services Congress (FSC) Dining-Out Ceremony returns to the AAPA CME Conference in San Francisco this year. The event takes place on Tuesday evening, **May 30, 2006**, in the San Francisco Marriott Hotel, the conference headquarters. It will again be an evening of ceremony, tradition, and revelry. We will salute those currently on watch and honor those who have fallen (Caption left: CAPT Milner). We will renew old friendships and make new ones. This year we are honored to have RADM Kenneth P. Moritsugu, Deputy Surgeon General of the United States as our keynote speaker. RADM Moritsugu was our very first speaker and has joined us for every celebration of this event since its inception. Our opening ceremony will honor the flags of the federal agencies where Physician Assistants serve the needs of our nation.

Dining OutContinued on page 7



Coast Guard Corner

By LCDR (s) James Cannon, USCG
jcannon64@comcast.net

The U.S. Coast Guard and Physician Assistants

The United States Coast Guard (USCG) is one of the five armed services of the United States of America and an agency within the Department of Homeland Security. The USCG is responsible for a wide variety of security and humanitarian missions. The Coast Guard's newest role as a lead agency for US-based natural disaster is a testament to the agencies operational flexibility and true to our motto of "*semper paratus – always ready.*" The major missions of the USCG include search and rescue, maritime safety, aides to navigation, marine environmental protection, living marine resources, drug interdiction, migrant interdiction, law enforcement, ports and waterways patrol, coastal security, national defense, and worldwide ice breaking (www.uscg.mil).

Service in the USCG as a PA is both rewarding and challenging.

The USCG's overall budget for 2006 is about \$8.2 billion funding 38,000 active duty and 9,000 reserve personnel (Homeland Security Budget-in-Brief, n.d.). Medical services in the USCG are focused on primary care and operational medicine. Our Chief Medical Officer is a Public Health Service Admiral who directs through his chief's of health services, the operation of 35 clinics. The USCG is staffed with approximately 60 physicians, 60 dentists, 53 physician assistant (38 active duty & 15 reserve), 12 pharmacists, and 12 health related type officers. The only officers actually commissioned in the USCG are the physician assistants. Otherwise, the majority of our professional medical staff comes from the USPHS. This being said, we occasionally look to the commissioned corps to help with our mid-level needs. Currently, we have about eight PHS physician assistants proudly and professionally wearing the Coast Guard uniform.

Service in the USCG as a PA is both rewarding and challenging. It provides an exceptional scope of practice and a strong sense of belonging to something important. The work day is balance with patient care, health services technician (corpsman) training, and those standard activities typical to most any military officer (collateral duties). On the operational side, PA's are the most often deployed medical provider and sent most anywhere the Coast Guard operates. PA's are specifically assigned TAD to the ice breakers (north and south pole trips) and with the Port Security Units. Other unique opportunities could include a faculty position at the country's largest PA program (Inter-service PA Program) in San Antonio, Texas and the white house medical unit caring for the president and/or vice-president of the United States. On the other hand, if flying is your passion the agency does train PA's through the Army's Flight Surgeon course as Aeromedical Physician Assistants assigning them to one of our air stations through out the country.

References

Homeland Security Budget-in-Brief. (n.d.). 2005 briefing in FY 2006 budget for USCG. Retrieved November 7, 2005, from http://www.dhs.gov/interweb/assetlibrary/Budget_BIB-FY2006.pdf

Organization & Personnel. (2006). Medical Manual M6000.1C. Retrieved January 10, 2006, from <http://www.uscg.mil/hq/g-w/g-wk/wkh/pubs/>

Being a PA is wonderful but serving as one in the USCG is priceless.

Message from Past President

Continued from Page 1

Thanks to the hard work of more junior officers, the PAPAG came to life and is a force to be reckoned with. I had a conversation with CAPT Linda Morris Brown, CPO for the HSO category, and she remarked about how well the PAPAG is doing and the leadership that is helping make the HS-PAC stronger. I think that in the next few years, we will see a PA as the CPO of our category.....think big folks.....

I mention this historic consideration in an attempt to keep forward momentum for both groups. I know that with added workload in our jobs, it is sometimes hard to do more, but I challenge each PHSAPA member and USPHS PA to take up the work, "divide and conquer" so that both organizations remain viable and visible to those around us.

Young PA's and PA officers, I challenge you to seek out the new BOD for the Chapter (PHSAPA) and the leaders of the PAPAG and see how you can help. There is work and opportunities for all with newsletters, membership, Dining Out Committee, House of Delegates (HOD), Reference Committees, other AAPA committees with the PHSAPA and the myriad of subcommittees on the PAPAG. All of these are opportunities (big and small) to learn, grow, participate in your future and make an impact for our profession and those we serve.

The "old gang" is getting older and the ranks at the top are thinning and we need young leadership to step up and keep building on past successes.

If you ever want to chat with me personally about how you can make a difference, please give me a call. Alternatively, seek out your leaders of the PHSAPA and the PAPAG for advice, needs and mentorship.

*Mike Milner, DHSc(c), PA-C
Captain, USPHS
617-565-4999 is direct to my office.
617-839-3677 is my cell*

Articles of Interest

Tooth restoration added to dental plan (taken from Army Times)

By [Deborah Funk](#)
Times staff writer

Tricare is serving up another reason for active-duty families and eligible National Guard and reserve members and their families to open wide. The Tricare Dental Program, the commercial group dental plan for service members and their families, has expanded its coverage to include such benefits as restoration of teeth worn down by incorrect brushing or grinding or damaged by birth defect. "It's kind of a nice addition that's not going to break the bank," said Joyce Raezer, government relations director for the National Military Family Association. Not many people will need these services, Raezer said, but for those who do, "it's wonderful."

Other new benefits include dental implants to replace missing teeth, and the crowns and other prosthetics that are placed on top of the implants. The new benefits come at no additional cost to the Defense Department because they are offset by the elimination of one previously covered service, sealants for certain teeth, said Navy Cmdr. Robert Mitton, deputy director of the dental program. Still, users will pay more for the program than they did last year because of inflation. New premiums took effect Feb. 1. The monthly cost for active-duty family members is \$10.51 for an individual and \$26.27 for a family.

Those premiums reflect the user's monthly share of the cost, which can range from 40 percent to 100 percent of the total premium cost, depending on the military status of the sponsor. (See Feb 20 Army Times for complete story)

Spread the Word

Most of the organizations we belong to as active duty officers have low or discount life insurance available. Check out the rates with Navy Mutual, MOAA, COA, ROA and USAA. Often their rates will beat the commercial carriers.

USAA offers a variety of products and services to Active Duty members including home, car and personal loans. They have also been known to compete for your business, especially if you already actively do business with them. Get your best rate, then call them and give them a chance to meet (or beat) the competition.

\$\$ Savings for Military Students

Special Gift of SAT and LSAT Software

Thanks to a generous donation by a group of professional football players, military families can obtain SAT/ACT or LSAT preparation software programs at a greatly reduced cost. Visit www.militarystudent.dod.mil and click on the link for SAT. It appears to be available to all active duty uniform services officers!

Upcoming Events

- | | |
|---|-----------------|
| Veterans Affairs PA Association Con
San Antonio, Texas
conference@vapaa.org | April 12 – 15 |
| Society of Army Physician Assistants
Fayetteville, North Carolina
https://www.sapa.org | April 24 – 28 |
| PANCE Prep Course
Midwestern Univ., Glendale, Arizona
mstatl@midwestern.edu | April 10 - 13 |
| USPHS Professional Conference
Denver, Colorado
www.coausphsconference.org | May 1 – 4 |
| AAPA 34th Annual Conference
San Francisco, California
www.aapa.org | May 27 – June 1 |
| PANCE/PANRE Review Course
George Washington Univ., Washington, DC
www.paboardreview.com | July 7 – 9 |

Send your event dates to LT Mark McKinnon at:
mmckinnon5@gmail.com

Compensation News

New BAH rates for 2006 are now posted on the Per Diem Committee Website (<https://secureapp2.hqda.pentagon.mil/perdiem/>).

The rates for some duty stations have changed; a few increased, and some decreased. If you check your rate, and notice that the rate has gone down, please remember that **individual officers stationed in a location where the rates decrease are protected from a decline in their BAH during the remainder of their tour at the duty station.** If officers transfer, they will receive the current (new) rate for their new permanent duty station.

Special thanks and best wishes in retirement to CAPT Tom Mills and CAPT James Portt. Both of these fine senior officers have dedicated their time, energy and knowledge to the PHSAPA over their PHS careers. CAPT Mills in particular has been instrumental in the revitalization of the PHSAPA and the formation of the new PAPAG. We will miss you both!

Navy Mutual Aid Association

CAP Loan Program *from Navymutual.org*

With regard to the Career Assistance Program (CAP) Loan Program, it is challenging for our staff to pass the word to all eligible newly commissioned officers. We are hearing from many young officers who have just learned about your Association from a Shipmate. Please help us spread the word about our Career Assistance Program. The loan remains at \$5,000 at 1.5% interest. Applications can be completed on-line at www.navymutual.org/cap. Once completed, the application must be printed, signed and mailed to our headquarters. Application packages may also be requested by calling 1-800-628-6011 ext 103.

Please share this information with the newly commissioned officers at your command. Eligible officers should be within six months of commissioning; however, if requested, this requirement may be waived.

Breaking Industry News

Supreme Court upholds assisted-suicide law

The Supreme Court upheld Oregon's one-of-a-kind physician-assisted suicide law, ruling that the Bush administration improperly tried to use a drug law to prosecute Oregon doctors who prescribed overdoses to help terminally ill patients die. The justices, on a 6-3 vote, said that federal authority to regulate doctors does not override the 1997 Oregon law. "Congress did not have this far-reaching intent to alter the federal-state balance," Justice Anthony Kennedy wrote for himself, retiring Justice Sandra Day O'Connor and Justices John Paul Stevens, David Souter, Ruth Bader Ginsburg and Stephen Breyer. New Chief Justice John Roberts backed the Bush administration, dissenting for the first time.

The ruling was a reprimand to former Attorney General John Ashcroft, who in 2001 said that doctor-assisted suicide is not a "legitimate medical purpose" and that Oregon physicians would be punished for helping people die under the law. Kennedy said the "authority claimed by the attorney general is both beyond his expertise and incongruous with the statutory purposes and design." Justice Antonin Scalia, writing for himself, Roberts and Justice Clarence Thomas, said federal officials have the power to regulate the doling out of medicine. "If the term 'legitimate medical purpose' has any meaning, it surely excludes the prescription of drugs to produce death," he wrote. Oregon's law covers only extremely sick people -- those with incurable diseases, whom at least two doctors agree have six months or less to live and are of sound mind. -- *by the Associated Press*

MGIB Participation

Norman Chichester
 Division of Commissioned Corps Officer Support
 (240) 453-6034

A number of questions have arisen lately regarding the Montgomery GI Bill (MGIB) Chapter 30 participation. The following bullet points may be helpful in answering some FAQ.

- Applicants with prior ACTIVE (not reserve on active) duty who DECLINED participation in MGIB are permanently ineligible.
- Applicants with prior ACTIVE (not reserve on active) duty who elected participation in MGIB cannot elect to participate again.
- Applicants with prior ACTIVE (not reserve on active) duty who neither elected nor declined CAN enroll in MGIB.
- Applicants with prior reserve or RESERVE ON ACTIVE duty can elect to participate in MGIB Chapter 30.
- Former reserve members who were on active duty could have participated in MGIB under Chapter 1606 (for reservists) and still be eligible to enroll in MGIB Chapter 30 (for regular active). However, an individual cannot receive more than 45 months of benefits under combined programs.
- In addition, our *practice* has been to allow officers who initially decline enrollment to reverse their decision if they contact us within 60 days of coming on active duty. This is not policy but practice which acknowledges that applicants are not always fully informed when they are completing the voluminous forms in the application packet. All cases are adjudicated on a case by case basis.

Hope this helps. Please feel free to contact me with any questions.

Federal Services Dining Out

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Thanks to a strong effort by the executive committee of the FSC we believe that this event will continue to amplify the traditions that we hold near and dear. There may even be a special treat for after the ceremony is formally closed.

The cost of this year the tickets will be \$60.00. This includes the dinner, wine for toasting, dessert, beverages with the meal and the post event activity. We will start with a meet and greet at 1800 hours and move into the Mess at 1900 hours. The uniform for the evening is Dress Mess or Dinner Dress. For civilians Black Tie is appropriate for gentlemen and gowns or cocktail dresses for the ladies.

For ticket information contact CAPT Richard Vause (retired) at 239-591-4528, ext 18 or in the evening at 239-561-8617. Tickets should be purchased in advance of the event so the proper instructions and accurate dinner counts can be given to the hotel.

So join us for a glorious and fun filled evening; we guarantee a great time. (Caption right: Lt Col David Gwinn (ret USAF))



AMSUS Meeting and Awards

AMSUS Annual Meeting: The next annual meeting of the Association of Military Surgeons of the U.S. (AMSUS) will be held on November 5-10, 2006 in San Antonio, Texas. The detailed agenda and hotel reservation information will be posted on the AMSUS website at www.AMSUS.org in June.

Award Nominations Needed: Each year AMSUS gives twenty-one competitive, four essay, and four lecture awards. All of these awards are presented at the AMSUS Annual Meeting awards dinner in San Antonio. Travel for the award winners is paid for by AMSUS. PHS officers are eligible for nearly all of these awards. In the past, PHS officers have done very well competing with their counterparts in the other services. The awards are described in the Annual Awards Program, which was a supplement to February issue of *Military Medicine*. The AMSUS website, at <http://www.amsus.org/AnnualMeeting/AwardsProgram.htm>, contains a detailed description of all awards and the nomination processes. You are encouraged to nominate deserving individuals (Officers or Civil Service) for these awards.

The deadline for the four lecture awards is early this year: April 14, 2006 and the deadline for the remaining awards is June 30, 2006

The deadline for nominations and essay submissions via snail mail or by hand delivery to AMSUS headquarters is June 30th. Late award nominations are not accepted.

(Note: There are many PHS officers deserving of awards. This year, as in past years, the Deputy Surgeon General will be asking each CPO to report on the award nominations submitted for their discipline.)

Money Sense

It can cost \$0.75 or more to call directory assistance (or 411) from your cell phone. There is a better way...

Dial 1 800 FREE 411 or 1 800 373 3411 instead and you will only be charged for the minutes required to place the call. No additional fees are billed to the caller. Help spread the word and save your friends and family some money!

GREAT SITE to find the cheapest gas prices in your neighborhood!

Just enter your zip code in the site below, and it tells you which gas stations have the cheapest prices (and the highest) on gas in your zip code area. It's updated every evening.

<http://autos.msn.com/everyday/gasstations.aspx?zip=&src=Netx>

Important Commissioned Corps Information

LCDR Camille P. Hawkins

OCCO Administrative Reviews: What you need to know

The Office of Commissioned Corps Operations (OCCO) performs administrative reviews of each officer's during times of promotion (competitive and non-competitive), assimilation and award consideration. Failure to meet the administrative requirements of active duty officers has serious implications (removal from eligibility pool, even if successfully reviewed). Therefore, it is strongly recommended each officer review and personally maintain their electronic Officer Personnel Folder (eOPF) on a regular basis, not just at the time of promotion.

Please review the following table for items and suggested ways to maintain proper compliance.

- **Licensure** – PA's **must** maintain current, unrestricted certification with the NCCPA. Certificates must be faxed to the licensure technician, Betsy Darracott at 240-453-6134. Do not send your certificate directly to your eOPF. State licensure is not a substitute for a current NCCPA certificate. **Renew these in advance of the due date and do not forget to fax them in early. Food for thought: Our sister services say: On time is really considered late.**
- **Satisfactory Annual COER** – A Commissioned Officer Evaluation Report (COER) is due each year from every active duty officer. **For assimilation, satisfactory means a D or E overall score and narrative COERs do not qualify. If you are having difficulty with a rater or reviewing official completing their part, enlist the help of your commissioned corps liaison.**
- **Satisfactory Background Investigation** (or NACI) – This paperwork is required at the time of call to active duty and must be maintained in accordance with policy. **If new paperwork is requested by your individual agency or OCCO, complete and return it as soon as possible. In some cases, officers not in compliance may be involuntarily separated from the corps.**
- **Basic Level Readiness** – ALL ACTIVE DUTY OFFICERS ARE EXPECTED TO MAINTAIN BASIC LEVEL READINESS AT ALL TIMES. The only exceptions to this policy are for officers who have a medical waiver. If medical waivers are needed they should be sought immediately. **Make a calendar of OFRD items and when they are due to expire. Make the time to get them done in advance and do not forget to log them on the OFRD website. Remember to submit appropriate documentation to MAB.**
- **Physical Examination** – Every five years all active duty officers are required to have a complete medical examination. At the time of examination, form 2808 must be filled out, signed by the examiner and mailed to the Medical Affairs Branch (MAB). DO NOT send these forms to OCCO or your eOPF. **Complete physicals have many components to complete. Get started 6 months to a year in advance. Some larger clinics will take that long just to get an appointment.**
- **Report of Medical History** – The form 2807-1 (Report of Medical History) is required at the time of the five year physical. The medical history is also required for permanent and noncompetitive promotions and for assimilation. **Recommend officers self complete and submit this form annually (maybe your birth month) to the MAB. If your health has not changed from the time of the five year physical, officers are not required to see a Physician. Simply print and sign the disclosure statement (found in the instructions) attach it to the Report of Medical History and send it to MAB. This form is easy and takes only ten or fifteen minutes to complete. Don't risk not having it done!**

Since some reviews will happen more than once in the same year it is very important to be proactive with your personnel file. Fax lines accept documents 24 hours/day, 365 days each year. Don't wait to update your file until the last minute and don't mix other officer documents with yours. Check your eOPF and ensure documents are showing up properly a few weeks after submission and resend as necessary (prior to any published cut-off dates if applicable). Your PHS career is in your hands! If you have any questions on these items or need additional information please do not hesitate to contact me.

LCDR Camille Hawkins
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PHSAPA Board of Directors 2005-2006

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*We are looking for
 a few good men or
 women... Consider
 joining the PHSAPA
 BOD. Elections are
 held yearly in
 early summer.
 Submit your
 nomination now to
 LT Stephen Smith.*