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Public Affairs-Naval Service Medical News (NSMN) (96-07)

HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:

(960074)-Payment Rules Change 1 March  
(960075)-Branch Clinic at Andrews Goes from Beyond Bad to Great  
(960076)-Corpsman Selected as Regional Shore Sailor of the Year  
(960077)-Black History Month Highlights Nurse's Achievements  
(960078)-Navy Nurse Recognized by Texas Society of the DAR  
(960079)-Navy PA Takes Recruiting's 'Adventure' Slogan to Heart  
(960080)-Blind Vet Overcomes the Odds  
(960081)-At USNH Yokosuka, Japanese 'Intern' Program Welcomed  
(960082)-New Defense Bill Calls for Separating Those with HIV  
(960083)-TRICARE Questions and Answers  
(960084)-HEALTHWATCH: A Fit Force Foregoes Tobacco

HEADLINE: Payment Rules Change 1 March

MEDDEN AFFAIRS Great Lakes, IL (NSMN) -- Effective 1 March, the Naval Office of Medical/Dental Affairs (MEDDEN Affairs) will begin phasing in payment reforms for active duty Navy and Marine Corps outpatient medical claims, as required by law. The outpatient change reforms, as published in the Federal Register, are designed as a follow-on program for active duty inpatient pricing system based on CHAMPUS guidelines.

Outpatient medical claims will be priced at this activity according to the CHAMPUS Maximum Allowable Charges (CMAC) in order to pay claims in accordance with current CHAMPUS payment rules. The allowable charge for authorized Nonnaval Health Care received from a participating or non-participating provider shall be the lower of the billed charge or the local CMAC charge for the care rendered. Health care providers who have provided services for active duty Navy and Marine Corps members were notified in writing of this upcoming change.

All outpatient medical claims need to be submitted for processing on a Health Care Financing Administration (HCFA)-1500 form, along with a completed Nonnaval Health Care Claim Form (NAVMED 6320/10). The policies for authorizing care and payment under the Nonnaval Health Care Program remain unchanged. Statutory constraints do not permit providers to bill active duty members for any differences in billed charges and the CMAC rates. Dental claims are currently excluded from this process.

If active duty members experience difficulty with resolving claims or have other questions regarding the bill payment process, they should contact a Customer Service Representative at MEDDEN Affairs by calling 1 800 876-1131 and pushing #1 in the customer menu.

Story provided by MEDDEN Affairs

-USN-

HEADLINE: Branch Clinic at Andrews Goes from Beyond Bad to Great  
BMC Andrews, MD (NSMN) -- Staff members at Branch Medical Clinic Andrews, located at the Naval Air Facility aboard Andrews Air Force Base in Maryland, have vastly improved the quality of care and customer service they provide to the men and women who fly aircraft for the U.S. Navy and Naval Reserve. According to many accounts, the clinic, which is responsible for conducting the flight physicals of almost every naval aviator and air crewman in the Washington, DC, area, was in chaos as late as 1993.

Things began to change in November 1993. CAPT James L. Laubach, MC, USNR, senior medical officer at the clinic, called in the clinic staff to solve the problems. Every person, from all levels of the chain of command, offered suggestions and offered their professional expertise.

"It was a joint venture by the whole staff," said HMCM Victor Harshbarger, USNR-TAR, the clinic's command master chief. "The people who do the job know where the hangups are. They now what slows their job down." Analyzing the standard operating procedure of the clinic, staff members checked for and found other kinks. Then they worked out ways to straighten them all out.

"Two years ago we had a 2,000 physical backlog. Right now we have about 85 currently in processing," said Harshbarger.

HM2 Sara Shacklett, a corpsman who earned her caduceus by on-the-job training at almost every task in the clinic in 1993, described it then as a "totally chaotic mess." Now, just returning from AVT school, she says, "everything has been turned around. Things are running smoothly, and morale is a lot better."

Story by JO2 Roy DeCoster, National Naval Medical Center Bethesda

-USN-

HEADLINE: Corpsman Selected as Regional Shore Sailor of the Year  
NMC San Diego (NSMN) -- HM1 Galen Carlos Nelson, Naval Medical Center San Diego's Sailor of the Year, has been named the Commander Naval Base San Diego Shore Sailor of the Year, announced officials.

"I was stunned," said Nelson, a native of Oklahoma City who has served in the Navy for 15 years. His naval career has taken him from duty aboard USS SARATOGA (CV 60) to a tour with the Marines at Cherry Point, NC. But when asked what his favorite duty station was, he replied, "Every one of them." Nelson is currently assigned as leading petty officer, General Surgery Department.

Nelson has applied to the Physician Assistant Program. If accepted, it will bring him one step closer to his dream of becoming a doctor.

"I'm always trying to find out why things happen. Maybe I could go into research and find the cure to a devastating disease like cancer," he said. "I want to make a difference."

According to COMANVBASE officials, winning the title of

Sailor of the Year brings a number of prizes and privileges to the honoree. Even before the latest rewards, Nelson said, "The Navy has been very good to me. They even provided me a wife." He met his wife, Cheryl, when he was stationed at Naval Hospital Great Lakes in Illinois.

In addition to his military duties, Nelson is very active in his church, the United Fellowship Tabernacle Church in San Diego, where he serves as deacon and minister of music. "Religion and music have always been very important to me," he explained. He is co-director for the Naval Medical Center Choir and Gospel Chorus, in which he also sings.

Now, halfway toward achieving his goal of making Chief of Naval Operations Sailor of the Year, Nelson will travel to Hawaii in April to compete for the title of Commander in Chief Pacific Fleet Sailor of the year. The winner of that competition will vie for CNO Sailor of the Year in Washington, DC, later this year.

Story by Pat Kelly, Naval Medical Center San Diego

-USN-

HEADLINE: Black History Month Highlights Nurse's Achievements

NAVHOSP Jacksonville, FL (NSMN) -- This year's theme for Black History Month is "African-American Women: Yesterday, Today, and Tomorrow." One of the many African-American women making a difference in society today is Navy Nurse Corps officer CDR Vathrice Hartwell, a clinical nurse specialist at Naval Hospital Jacksonville. She serves as an expert resource for nurses in the critical care and medical nursing departments at the hospital, to which she reported in January 1994. She is the clinical supervisor for approximately 40 nurses.

After graduating from Northeast Louisiana with a bachelor of science in nursing degree, Hartwell went to work as a staff nurse in a large, metropolitan teaching hospital, where she stayed for three years. "It was grueling," said Hartwell. "The hours were long; the work constant; and there were a lot of patients. After a while, I, like many nurses, needed a change."

Hartwell's "change" came by putting on a Navy Nurse Corps uniform. She was commissioned in 1979 and embarked on a successful career that's taken her around the world.

Hartwell said she believes Black History Month is important because it, as other months dedicated to honoring the contributions of minorities, makes people focus on those contributions.

"I, like a lot of others, hope that in the future we won't have the need for a specific month to recognize minorities' contributions to history. It would be great if we recognize each individual for what they bring collectively to society and still let them have their uniqueness. You see children do it everyday and wonder why we, as adults, cannot," said Hartwell.

Story by JO2 C.L. Brinkman, Naval Hospital Jacksonville

-USN-

HEADLINE: Navy Nurse Recognized by Texas Society of the DAR

BUMED Washington (NSMN) -- It's been an exciting year for

Navy LCDR Linda Ireland, NC, who is currently assigned as the first Navy Nurse Corps officer to fill a billet at the Global Patient Movement Requirements Center (GPMRC), a part of the U.S. Transportation Command at Scott Air Force Base, IL. She reported to TRANSCOM after graduation from the Air Force School of Aerospace Medicine in San Antonio last February. She made the news then because she was also the honor graduate for Flight Nursing Class 95-02-27, selected because of her "dynamic combination of scholastic achievement, personality and leadership" by the school's faculty.

The faculty was mightily impressed with Ireland, because they thought of her again when it came time to nominate a representative to receive recognition from the Texas Society of the Daughters of the American Revolution. Every year, the society holds a Presidents' Day luncheon in honor of George Washington, where they present awards to local people who reflect the noble attributes of our first President in the areas of government service, military leadership and citizenship.

The society presents a Texas Armed Services Award to each base's representative. Ireland represented Brooks Air Force Base, where the Air Force School of Aerospace Medicine housed. In an area of the country dominated by the Air Force, Ireland was the only Navy person to receive the award, which was given in recognition of her selection by the school's faculty as honor graduate of the year from among the half-dozen or so classes graduated during 1995.

Congratulations, Lieutenant Commander Ireland, for being such an outstanding Navy Nurse and representing the Navy so well in Air Force country!

Story by Mrs. Liz Lavalley, Bureau of Medicine and Surgery

-USN-

HEADLINE: Navy PA Takes Recruiting's 'Adventure' Slogan to Heart  
NAVHOSP Twentynine Palms, CA (NSMN) -- When ENS Norman K. Moser, MSC, graduated from Del Campo High School in Fair Oaks, CA, and entered the Navy in May of 1976, he did so with the expectation of experiencing great adventures as advertised by Navy Recruiting in their slogan "... it's just not a job, but an adventure."

An adventure is just what Moser experienced over the next few years, surviving and thriving as an apprentice boatswain's mate, then moving on to become a quartermaster second class, then a SEAL, and now in his current job as a Physician Assistant at Naval Hospital Twentynine Palms.

His career path headed toward medicine during his tour of duty with SEAL TEAM THREE, when then QM2 Moser was injured. "I decided to learn something about medicine so I would know what the doctors, nurses and corpsmen were doing to me, so I requested to change my rate to hospital corpsman and attend school at the Naval School of Health Sciences at San Diego," he said.

Moser completed the school and became an HM2 upon graduation in June of 1988. Then he went on to earn his bachelor of science, physician assistant, degree from George Washington University in 1994 and received a commission in the Medical

Service Corps.

Moser was assigned to Naval Hospital Twentynine Palms in 1995 and went to work further learning and excelling at his new job in Staff Sick Call, Military Sick Call, Occupational Health and Family Practice Clinic. Moser's plans for the future include helping his wife Janet through medical school and working on advancing his own education in medicine. With Moser's history, who can tell where he will be next year. Right now he is serving the Marines at the Marine Corps Air Ground Combat Center Military Sick Call.

Story by Mr. Dan Barber, Naval Hospital Twentynine Palms

-USN-

HEADLINE: Blind Vet Overcomes the Odds

NAVHOSP Camp Pendleton, CA (NSMN) -- Mr. Steven Ellwood, a darkroom technician in the X-ray Department at Naval Hospital Camp Pendleton, has spent many years adjusting to being blind. In March 1969 he joined the U.S. Army to work on helicopters as a crew chief. To his dismay, he was unable to pass the flight physical because he wore glasses.

Ellwood was reassigned and trained as a recoilless rifleman and demolition technician for the Army's I Corps. Less than a year later, while serving in Vietnam, he was blinded during combat. Refusing to let fate slow him down, Ellwood made the best of his circumstances by mastering the science of darkroom developing. His blindness turned out to be an advantage in the darkroom, since he now has become quite an expert at navigating in the dark.

Ellwood was not content with just doing a good job in the darkroom; he wanted to become more involved in his department. Involvement meant familiarizing himself with the Radiology Department's daily correspondence ... a big task for a blind person. We take for granted how easy it is for us to glance at the myriad of notes, memos and directives passing over our desks each day. Imagine if you had to find someone to read all of that to you. Most likely you wouldn't bother, and you would just try to pick up bits of information through the grapevine.

Steven Ellwood's situation recently changed when a talking computer was donated to the Radiology Department. On 17 January, he became the first blind employee of Naval Hospital Camp Pendleton to "read" the Plan of the Day (POD).

"I was really jazzed when I heard the computer reading the POD to me," he said, as he loaded another memo onto his scanner.

Story by HM2 Jack Kovic, Naval Hospital Camp Pendleton

-USN-

HEADLINE: At USNH Yokosuka, Japanese 'Intern' Program Welcomed

USNH Yokosuka, Japan (NSMN) -- Shortly after World War II, American Occupation Forces used the former Imperial Japanese Navy hospital as a 250-bed dispensary. In 1950, U.S. Naval Hospital Yokosuka was established. At that time, Japanese medical educators were attempting to reinforce their medical training system. There were few hospital facilities and a limited supply of medical educators.

In an effort to assist in the rejuvenation of a medical infrastructure in Japan, an observership for select Japanese medical students in the Armed Forces Hospitals was suggested. After considerable discussion at local and Washington levels, the Navy's Bureau of Medicine and Surgery agreed to cooperate in establishing such a training program and directed the commanding officer of USNH Yokosuka to implement the program.

By 1 May 1952, most of the details had been worked out and seven selected candidates started intern training at U.S. Naval Hospital Yokosuka. Since 1952, 343 "interns" have participated and graduated from the Post-graduate Physicians Training Program at the hospital.

Physicians participating in the program do not hold an American medical licenses and, therefore, cannot practice patient care independent of staff physicians. The training is endorsed by the Director General, Health and Medical Affairs, Japan Defense Agency, as an appropriate post-graduate year one training program for graduates of Japanese medical schools.

During their year of service at the hospital, interns provide life-saving medical communication with Japanese medical treatment facilities. They also assist in communicating with the large number of Japanese family members treated at the hospital.

Intern alumni who practice in Japan represent a network of expertise. They provide assistance to hospital staff and beneficiaries that is of incalculable value.

-USN-

HEADLINE: New Defense Bill Calls for Separating Those with HIV  
AFNS Washington (NSMN) -- Until now, military people who tested HIV-positive could stay on active duty until they were too sick to work or developed AIDS. The recently approved Fiscal Year 1996 Defense Authorization Bill states that "a member of the armed forces who is HIV-positive shall be separated."

Under the new law, service members who test positive for the human immunodeficiency virus face mandatory discharge or retirement within six months. Lawmakers said the effective date of the legislation will be determined from the date of the enactment of the act. President Bill Clinton signed the defense bill on 10 February.

"I believe, and the president believes that this is a poor provision," said Defense Secretary William Perry.

Perry said being HIV-positive is not a stigma, but rather a disease and it should be treated as such.

When HIV-positive service members become ill, the services medically retire them. "That's the way we deal with HIV-positives. That's also the way we deal with people who contract cancer. It's sensible and it's humane," said Under Secretary of Defense for Personnel and Readiness Edwin Dorn.

If the provision to give HIV-positive people an early exit from active duty service is not changed by some other legislation, separation will be "considered involuntary." The defense bill does not give specifics as to the extent HIV-positive people will receive medical benefits and disability pay.

Story by TSgt David P. Masko, Air Force News Service

-USN-

HEADLINE: TRICARE Questions and Answers

BUMED Washington (NSMN) -- As TRICARE comes on line across the country, beginning last year and expected to be available throughout the United States by May 1997, questions about this Department of Defense managed health care program come up. Each week, the Naval Service Medical News will include "TRICARE Questions and Answers" to answer them.

Q: I am disabled, under the age of 65. Can I enroll in TRICARE?

A: Yes, beneficiaries who become Medicare eligible (under age 65) because of disability are eligible to enroll in TRICARE Prime. Once these beneficiaries reach age 65 and lose CHAMPUS eligibility, they may no longer remain enrolled in TRICARE Prime.

Q: How can I enroll in TRICARE Prime?

A: All active duty military personnel will be enrolled in TRICARE Prime automatically and assigned a primary care manager. When Prime is offered in their area, other categories of beneficiaries can enroll on a voluntary basis either by visiting or calling the local TRICARE Service Center.

If you have questions about TRICARE you'd like answered in this column, please contact the editor (see last paragraph on ways to do so).

-USN-

HEADLINE: HEALTHWATCH: A Fit Force Foregoes Tobacco

USNH Roosevelt Roads, PR (NSMN) -- Tobacco products are a major cause of cancer, heart disease and hundreds of thousands of deaths per year. Many Navy men and women using tobacco products have developed smoking or chewing habits and/or nicotine addiction. Consequently, their performance, readiness capacity, and overall health are at risk.

Puerto Rico's Smokeout Day is 16 February, for which U.S. Naval Hospital Roosevelt Roads sponsored an information booth with brochures, and performing carbon monoxide and pulmonary function tests.

Currently, 40 million Americans have quit smoking. Some smokers attended smoking cessation classes and some quit by themselves. It may take several attempts to be successful. Fortunately, the quitting process for tobacco is considerably shorter than for alcohol and other drugs. Five percent of people who quit by themselves succeed in quitting permanently. Using a prescription of nicotine patches generates a 10 percent success rate. By attending smoking cessation classes, the chances for success jump up to 40 percent. Smokers should view each attempt as a learning experience and a tool for the next try.

U.S. Naval Hospital Roosevelt Roads' Smoking Cessation program has a 42.5 percent success rate, which is higher than the

national average. On 25 January, 21 smokers (the first 1996 program participants) courageously snuffed their last cigarettes to symbolize their momentous "Quit Day."

Smoking cessation classes commence regularly throughout the year at many military medical treatment facilities or Family Service Centers. Participation by Navy and Marine Corps active duty personnel and family members is highly encouraged.

The following facts exemplify the type of information educators present to program participants who are committed to "kicking the habit."

SUBHEAD: FACTS

-- 390,000 Americans died as a result of smoking in 1985. This represents one-fifth of all American deaths for that year. Tobacco use is the single largest source of preventable morbidity and mortality in the United States.

-- 30 percent of all cancer deaths are attributable to smoking, as are 21 percent of all coronary heart disease deaths, 18 percent of stroke deaths and 80 percent of deaths from chronic obstructive pulmonary disease.

-- Tobacco contains more than 3,800 different chemicals. More than 50 of these substances have been identified as carcinogens. Most of them cause irritation of the airways.

-- Tobacco smoke contains harmful carbon monoxide. It mixes within the blood's hemoglobin and displaces vital oxygen.

-- Tobacco smoke acts synergistically with other pollutants (such as asbestos), thereby increasing the adverse effects of pollutants.

-- Studies on passive smoking link environmental tobacco smoke to lung cancer in adults and respiratory illness in children.

-- Economic costs of smoking in the workplace include increased absenteeism and productivity loss.

-- Tobacco use usually begins at an early age due to peer pressure from "friends."

Story by Mr. Sammy Gomez, U.S. Naval Hospital Roosevelt Roads