

Veterans Affairs Media Summary and News Clips

8 June 2020

1. Top Stories

Coronavirus / COVID-19

1 - The News-Review: Are we prepared to handle a COVID surge? (7 June, Dan Bain, 49k uvm; Roseburg, OR)

If a surge in COVID-19 cases happens in Douglas County, local health care facilities have been preparing for it. Dr. Jason Gray, chief medical officer for CHI Mercy Medical Center said the hospital is ready for it. He said the hospital has the ability to take care of, and isolate, the patients in a special area.

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2 - Uvalde Leader-News: <u>Headaches trigger COVID-19 test for Landeros</u> (7 June, Meghann Garcia, 22k uvm; Uvalde, TX)

Former Sabinal mayor Louis "Mando" Landeros found himself thinking a lot about COVID-19 over the last few months, but perhaps never so much as on Wednesday morning when a couple of hours of uncertainty after what he called a brutal test gave way to an undesirable result – positive.

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1.1 - One America News Network (Video): New Bill Requires VA Track All Veterans Exposed To Toxic Burn Pits (7 June, 1M uvm; San Diego, CA)

Three-minute video: Many veterans who served in both Iraq and Afghanistan have said their time in the service caused serious health issues. However, new legislation has been introduced in an effort to hold Veterans Affairs accountable. One America's Bobby Dupree has the latest.

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2. <u>Improving Customer Service</u>

2.1 - U.S. News & World Report (AP): Card Program for Veterans Organized (7 June, 27.4M uvm; Washington, DC)

New Hampshire residents are invited to write cards that will be delivered to veterans who are unable to see their loved ones during the coronavirus pandemic. All cards will be delivered to the New Hampshire Veterans Home and the VA medical centers in Manchester and in White River Junction, Vermont.

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Med Center (7 June, 27.4M uvm; Washington, DC)

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Portsmouth, Somersworth and Tilton, New Hampshire, and a 41-bed community living center in Manchester.

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2.3 - Anchorage Daily News: Letter: Good health care (7 June, Spruce Lynch, 1.2M uvm; Anchorage, AK)

One of the markers of a good health care system is the ability to give quality service during crises. As a veteran who receives all my health care from the Veterans Affairs Medical Center, I must say thanks to all the staff of our Anchorage VAMC, for all the great care I continue to receive.

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2.4 - Government Executive (Audio): GovExec Daily: Three-Dimensional Innovation at VHA (5 June, Adam Butler and Ross Gianfortune, 819k uvm; Washington, DC) Every year, the Partnership for Public Service awards the Samuel J. Heyman Service to America Medal finalists to outstanding federal employees who serve the public good and are addressing many of our country's greatest challenges. Dr. Beth Ripley of the Veterans Affairs Department joined the show to talk about her career at the Veterans Affairs Department.

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2.5 - KWES (NBC-9): West Texas VA Health Care System to resume in-person appointments (7 June, Leatra Hernandez, 183k uvm; Odessa, TX)

The West Texas VA Health Care System will begin scheduling for face-to-face health care on June 8. The start of scheduling is phase one to a three-part of the Moving Forward Plan, the clinic has for its plan to reopen. The start of this plan will involve the primary care teams and the specialty services booking up to 25 percent of the clinic's capacity.

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2.6 - MedCity News: GAO report: Mar-a-Lago crowd had a hand in \$16B Cerner contract (7 June, Elise Reuter, 155k uvm; New York, NY)

Three Trump advisors had a role in evaluating Cerner's \$16 billion contract to build a new health record system for the Department of Veterans Affairs, according to a report released by the Government Accountability Office on Thursday. Referred to in news reports as the "Mar-a-Lago crowd," the trio of Marvel Chairman Ike Perlmutter, Palm Beach doctor Bruce Moskowitz and attorney Marc Sherman had a hand in some of the key decisions made by the VA.

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2.7 - The Argus Observer: Broken promises over the years (7 June, Ron Verini, 31k uvm; Ontario, OR)

Sitting around an abbreviated (because of the novel coronavirus COVID-19) coffee clutch at Veteran Advocates of Ore-Ida, the conversation turned to the list of challenges and grievances growing, and our federal government thinking that throwing money at a problem is the solution. They also think that forming a committee to investigate a problem will solve these issues.

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- 3. **Business Transformation**
- 4. DOD Cooperation / Electronic Health Records / MISSION Act Implementation
- 5. Suicide Prevention
- 6. Women Veterans / Homelessness / Benefits / Cemeteries
- **6.1 Pittsburgh Post-Gazette:** For National Guard troops, a lengthy COVID-19 mission brings job benefits into spotlight (7 June, Daniel Moore, 3.2M uvm; Pittsburgh, PA)

 On March 6, as the magnitude of the COVID-19 pandemic was becoming more apparent by the day, Pennsylvania Gov. Tom Wolf turned to the camouflage-clad reserve troops known for quick deployments amid myriad natural disasters and public emergencies. For the Pennsylvania National Guard, the pandemic turned out to be unlike anything it had faced before far different from snowstorms, floods, hurricanes and even deployments to Middle East war zones.

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6.2 - Task & Purpose: <u>230,000 veterans' disability ratings are stuck in limbo due to COVID-19</u> (5 June, David Roza, 2M uvm; New York, NY)

Hundreds of thousands of veterans are stuck in limbo in regards to their disability compensation because the novel coronavirus (COVID-19) pandemic has delayed compensation and pension (C&P) exams, which vets need to take in order to receive a disability rating. The exams are usually conducted in-person, but the Department of Veterans Affairs paused over 230,000 inperson C&P exams on April 2nd to prevent the spread of COVID-19, the VA told Task & Purpose.

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6.3 - KNBC (NBC-4): <u>Veterans' Funerals to Resume; More Businesses to Reopen in Riverside County</u> (7 June, 1.7M uvm; Los Angeles, CA)

Funeral services, which had been on hold during the COVID-19 pandemic, will resume this week at most national cemeteries, including the one in Riverside, according to officials with the Department of Veterans Affairs. Services had been reduced to burials and limited visitations since March 23, while larger services and military honors were suspended.

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6.4 - KTVH (NBC-12): East Helena Boy Scouts build and donate "coffee shed" to VA (7 June, Alexie Aguayo, 55k uvm; Helena, MT)

Evan is an East Helena Troop 212 Life Scout transitioning into an Eagle Scout, but needs to complete a project to do so. He decided to complete a shed. A storage shed that will hold coffee donations for veterans. "Last year, we raised 1,300 cans of coffee. The storage facilities at the VA were not sufficient for all those cans.

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7. Other

7.1 - KUTV (CBS-2, Video): Exclusive: Utah Marine veteran explains why he chose to protest in uniform (8 June, Kelly Vaughen, 1.5M uvm; Salt Lake City, UT)

A Utah Marine Corps veteran has received praise and criticism from across the country for photos that have circulated of him protesting in uniform at the Utah State Capitol. In an exclusive interview, 2News spoke with the man about what led to his decision to protest and to clear up some of the rumors that have circulated online.

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7.2 - Times Free Press: Cooper's Eye on the Left: White privilege called on building scrubbers of property destruction (7 June, Clint Cooper, 832k uvm; Chattanooga, TN) Opposing vandalism. A federal building that is home to the Export-Import Bank of the United States and some offices of the Department of Veterans Affairs was one of the many Washington, D.C., structures vandalized amid the uprisings following the death at the hands of Minneapolis police of suspect George Floyd.

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If a surge in COVID-19 cases happens in Douglas County, local health care facilities have been preparing for it.

Dr. Jason Gray, chief medical officer for CHI Mercy Medical Center said the hospital is ready for it. He said the hospital has the ability to take care of, and isolate, the patients in a special area. Gray said, right now, the hospital has plenty of surge capacity in the ICU rooms where patients can be isolated in single rooms with negative pressure, which helps prevent airborne diseases from escaping the room and infecting others.

If the hospital gets more than four or five COVID patients at one time, they would open the isolation area.

"We have the ability to, within 72 hours, set up a COVID isolation ward that has the ability to handle 30 additional patients," Gray said. "That way we could cohort patients together and also keep staff in their PPE (personal protection equipment) in that area, minimizing the waste of PPE and also minimizing possible cross-contamination to non-covid patients in the hospital."

The isolation ward could handle an additional six critical care patients in addition to 30 regular medical floor level patients. That's in addition to the 16 ICU beds that the hospital has available.

Gray said the hospital is acting in alignment with the the county's emergency operations and the Roseburg VA Medical Center. If the isolation ward is activated, he said, the county and VA will open up auxiliary care units.

The Douglas Public Health Network and the Douglas County COVID-19 Response Team want to be ready to go if there is an outbreak of the coronavirus.

Teresa Mutschler, executive director of DPHN, said she believes Douglas County is well prepared for an outbreak. Organizing the COVID Response Team and involving all the local agencies and health care facilities has been critical, she said, and it's been a coordinated effort to get prepared for a surge in patients.

"We are in great shape in Douglas County and I think the reason is many people have done a really good job in social distancing and doing what they need to do to keep our numbers down," Mutchler said. "But if we do have more COVID patients, we have all worked together to put a really good system in place."

Mutchler said the Roseburg VA Hospital has a regional resource agreement if more capacity is needed.

Because of the close proximity of inmates in the Douglas County Jail, administrators are already making sure precautions are being taken when bringing a prisoner into the jail.

"We're taking everybody's temperature, we're asking a bunch of precautionary questions about their recent health, if they've had a cough, sore throat or any of those symptoms that go along with COVID-19," Sheriff John Hanlin said.

Those who don't display symptoms are held in quarantine for 12 to 14 days before they go into the general population. New prisoners are visited by a health care provider every day to see if any symptoms develop.

"It's a pretty good process we have in place currently, so it wouldn't change, if we had a surge of positive cases," Hanlin said."We'd continue what we're doing."

Hanlin said any inmate that's brought in with any COVID-like symptoms, will be released unless they've committed an offense that requires them to be held.

"We're just not introducing the possibility, we're not even letting them in the facility," he said.

All of the health screening happens in the sally port at the Sheriff's Office before the prisoner is brought in the jail, so if there is a doubt that they might be infected with the virus, they are turned loose and may be asked to quarantine.

But if COVID-19 does get into the facility, the sheriff has a plan in place to deal with it.

"We would start to reduce our overall population in the facility," Hanlin said. "The reason we do that is so we have more room to quarantine."

But Hanlin stressed that if people need to be held, they will be, and violent offenders will not be released.

"When we started dropping the population down a couple of months ago, we were only releasing people that had a few days to a week left on their sentence," Hanlin said.

And that's what the Sheriff plans to do again if there is a COVID outbreak in the county.

"The last thing we want is to get COVID in the facility, both to protect inmates from getting sick, but also my staff," he said.

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2 - Uvalde Leader-News: <u>Headaches trigger COVID-19 test for Landeros</u> (7 June, Meghann Garcia, 22k uvm; Uvalde, TX)

Former Sabinal mayor Louis "Mando" Landeros found himself thinking a lot about COVID-19 over the last few months, but perhaps never so much as on Wednesday morning when a couple of hours of uncertainty after what he called a brutal test gave way to an undesirable result – positive.

As a veteran of the Gulf War, Landeros is used to experiencing headaches and body aches, but he said the round-the-clock headaches that began the week prior to his COVID-19 diagnosis were different.

"I was experiencing some headaches that I categorized at a level 10 and I could hardly move," Landeros said, adding that neither over-the-counter nor prescription medication alleviated the pain. "The headaches started to feel out of control around Thursday or Friday."

He says his only symptoms have been those headaches and a slight cough, and he has not experienced fever or breathing issues.

"My temperature reading at 8:17 p.m. today was 98.6 so I'm doing very well," Landeros said Thursday evening, stating that his Veterans Affairs doctor feels he has a mild case.

Landeros, who is 46, does not know how or when he contracted COVID-19 but said he made two trips into San Antonio over the last two weeks. He described his other recent activities as routine, as he spent time with the same group of four to five friends and made a few trips to the river – "but on days with less of a crowd and I kept to myself."

He shares a home with his mother, who has cancer, so the warnings from medical professionals about the severity and contagion of the virus began to fester in his mind.

His mother, other family members, and at least five friends were tested over Wednesday and Thursday, following Landeros' positive result.

"You'll never forget that horrible feeling," he said of the test, which he called brutal despite having prior warning from the nurse. "It's just a swab that's inserted through the nose and reaches the back of your throat. Just when you think you're done, there's one more nostril to go."

He feels fortunate to not have pre-existing health conditions like diabetes, after reading news stories about how COVID-19 affects health-compromised people. He hopes others will learn from his experience and take additional precautions – "Please be safe and practice social distancing and wash your hands," he said, expressing gratitude for a friend who encouraged him to be tested sooner rather than later.

While he is now open to talking about his experience, his initial thoughts were to hide from the news.

"When the doctor said, 'Positive,' I immediately thought of my kids and grandkids," Landeros said. "Just seemed like it was all about to end. I honestly didn't know what was to follow."

He was told to quarantine for 10 days and is subject to check-ins from a team at the Veterans Affairs hospital.

"I'm home but they call me twice a day," Landeros said. "I'm taking oxygen and daily temperature readings."

For now, he is content to watch movies, organize his room, hang pictures, keep his attention on the news, and answer the hundreds of questions friends and community residents are lobbing his way.

While he is willing to share information on his symptoms, state of mind, growing knowledge of the virus in general, and test results of his nearest and dearest – three negatives so far, with several pending – he can't answer one of the most-asked questions.

"I have absolutely no idea where I could have contracted the virus. Looking back it could have been anywhere of the places or people I visited," he said. "It's just so hard to trace, but I was never around someone that looked sick."

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1.1 - One America News Network (Video): <u>New Bill Requires VA Track All Veterans</u> <u>Exposed To Toxic Burn Pits</u> (7 June, 1M uvm; San Diego, CA)

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2. <u>Improving Customer Service</u>

2.1 - U.S. News & World Report (AP): Card Program for Veterans Organized (7 June, 27.4M uvm; Washington, DC)

HOLLIS, N.H. (AP) — New Hampshire residents are invited to write cards that will be delivered to veterans who are unable to see their loved ones during the coronavirus pandemic.

All cards will be delivered to the New Hampshire Veterans Home and the VA medical centers in Manchester and in White River Junction, Vermont.

U.S. Sen. Maggie Hassan and Laura Landerman-Garber, of Hollis, announced the Cards 2 Connect Program. Landerman-Garber previously worked on a Military Holiday Card Challenge, in which people can send holiday cards to active-duty military troops.

"The thought of veterans being isolated and lonely right now touches all of us, and through sending cards we can find a way to send appreciation, care and love to our veterans and let them know that we will never forget them," Landerman-Garber said.

Cards can be dropped off at the Hollis Pharmacy or sent to Laura Landerman-Garber, Card Challenge, 400 Amherst Street, Suite 407, Nashua, NH, 03063.

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Med Center (7 June, 27.4M uvm; Washington, DC)

MANCHESTER, N.H. (AP) — The interim director of the Manchester Veterans Affairs Medical Center is now its director.

Kevin Forrest will be responsible for the delivery of health care to about 30,000 veterans throughout New Hampshire. The Manchester VAMC includes four sites of care located in Conway, Portsmouth, Somersworth and Tilton, New Hampshire, and a 41-bed community living center in Manchester.

Forrest joined the VA in 2012 as a health system specialist with the VA Boston Healthcare System.

The last director, Alfred Montoya Jr., became director of the VA Connecticut Healthcare System last year.

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2.3 - Anchorage Daily News: Letter: Good health care (7 June, Spruce Lynch, 1.2M uvm; Anchorage, AK)

One of the markers of a good health care system is the ability to give quality service during crises.

As a veteran who receives all my health care from the Veterans Affairs Medical Center, I must say thanks to all the staff of our Anchorage VAMC, for all the great care I continue to receive.

There have been several changes made to protect staff and patients. Throughout all this, they always deliver quality of care to us.

I want to say thank you to all the staff of the VA for helping me with my medical situations. Thank you for helping me make positive health decisions.

Spruce Lynch

Anchorage

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2.4 - Government Executive (Audio): GovExec Daily: Three-Dimensional Innovation at VHA (5 June, Adam Butler and Ross Gianfortune, 819k uvm; Washington, DC)

Every year, the Partnership for Public Service awards the Samuel J. Heyman Service to America Medal finalists to outstanding federal employees who serve the public good and are addressing many of our country's greatest challenges.

Dr. Beth Ripley of the Veterans Affairs Department joined the show to talk about her career at the Veterans Affairs Department. She's nominated for the science and environment award for her work creating an interconnected, hospital-based 3D printing network.

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WEST, Texas — The West Texas VA Health Care System will begin scheduling for face-to-face health care on June 8.

The start of scheduling is phase one to a three-part of the Moving Forward Plan, the clinic has for its plan to reopen.

The start of this plan will involve the primary care teams and the specialty services booking up to 25 percent of the clinic's capacity.

Following the two weeks after the first part of the phase, the clinic will plan to increase the capacity by another 25 percent.

The plan of reopening will continue to increase by 25 percent every two weeks until the clinic reaches its full capacity successfully.

Monitoring the reopening phase of the clinic will be taken seriously for the safety of veterans, staff, and visitors.

Reduced entry points will remain in place in order to maintain safety and veterans may be asked to wait in their cars until called in by the clinical staff.

VA clinical teams will begin the scheduling by contacting veterans to set up appointments.

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2.6 - MedCity News: GAO report: Mar-a-Lago crowd had a hand in \$16B Cerner contract (7 June, Elise Reuter, 155k uvm; New York, NY)

Three Trump advisors had a role in evaluating Cerner's \$16 billion contract to build a new health record system for the Department of Veterans Affairs, according to a report released by the Government Accountability Office on Thursday.

Referred to in news reports as the "Mar-a-Lago crowd," the trio of Marvel Chairman Ike Perlmutter, Palm Beach doctor Bruce Moskowitz and attorney Marc Sherman had a hand in some of the key decisions made by the VA.

Formal officials interviewed by the GAO said the trio had influence due to their connection to President Donald Trump — Perlmutter is a longtime acquaintance — but said VA officials still made decisions independently. One former official said the trio created a "shadow reporting structure" where they served as stakeholders without a formal role, according to the report.

The GAO analyzed 223 email exchanges between the trio and VA. Of them, 77 mentioned some aspect of the Cerner project or interoperability.

The Mar-a-Lago crowd's input may have in part contributed to the "strategic pause" the VA took in late 2017, after it had begun to negotiate a contract with Cerner earlier that year, a former official said in the report. But the time may have also been used to ensure the contract was comprehensive.

In June of 2017, former VA Secretary David Shulkin signed a "Determination and Findings" to be able to solicit Cerner directly to build a new electronic health record system to replace the VA's legacy VistA system. The reason for this unique arrangement, the VA said, was because Cerner was already developing a health record system for the Department of Defense, and the two agencies wanted their systems to be interoperable.

The trio became involved with the Cerner contract later that year. They provided VA officials feedback on the interoperability and usability of the proposed health record system, and provided feedback on the draft contract language, according to the report.

For example, Moskowitz participated in a November, 2017 call between the VA, the MITRE Corporation and five CIOs from private organizations. When former VA CIO Scott Blackburn suggested to Moskowitz and Sherman that they hold another call with the five executives, Moskowitz wrote that "we are committed to your adoption of Cerner..." but "being rushed into a contract without due diligence on our part would be problematic."

Moskowitz and Sherman also stated that they were not comfortable with the contract and did not have confidence in the VA team, according to the report.

In January of 2018, MITRE officials traveled to West Palm Beach to discuss the Cerner solution with Moskowitz. He was only familiar with a different, older Cerner system through his experience as an internist. Sherman also participated in the meeting over the phone.

One month later, Shulkin and his chief of staff met with Perlmutter, Moskowitz, and Sherman in West Palm Beach to respond to concerns they had raised over Cerner's voice recognition, lab data, ability to catch duplication of tests and medications, and other technical aspects.

In March, Shulkin was ousted from his role as VA secretary, writing in a New York Times op-ed that "...the environment in Washington has turned so toxic, chaotic, disrespectful and subversive that it became impossible for me to accomplish the important work that our veterans need and deserve."

The report refers to other efforts where the trio was involved, including a suicide awareness campaign the agency was conducting in conjunction with Johnson & Johnson. In November of 2017, Shulkin rung the closing bell at the New York Stock Exchange, in part to promote this campaign. Marvel Entertainment and Disney were also named as collaborators, with Marvel character Captain America making an appearance.

A month prior, Perlmutter emailed VA officials to indicate "we" are now confirmed to ring the bell at the New York Stock Exchange and that he had arranged for Marvel characters to be shown at the event, according to the report.

Perlmutter, Sherman and Moskowitz told the GAO they merely provided advice and introductions when asked. They maintained that they didn't have a formal role at the VA or any decision-making authority.

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2.7 - The Argus Observer: Broken promises over the years (7 June, Ron Verini, 31k uvm; Ontario, OR)

Sitting around an abbreviated (because of the novel coronavirus COVID-19) coffee clutch at Veteran Advocates of Ore-Ida, the conversation turned to the list of challenges and grievances growing, and our federal government thinking that throwing money at a problem is the solution. They also think that forming a committee to investigate a problem will solve these issues. They also think that changing top brass will appear like they are doing something regarding the concerns of our military, veterans or their families. I am amazed how many believe that our challenges can be solved by these tactics.

We need to reorganize our thinking and get back to basics. It is not hard to understand that the road to victory is the ballot box, and keeping a pulse on the very people we send to represent us in Washington D.C., our individual state, county and local government. We should NOT let them go without our input. We should NOT take our foot off the pedal on any issue that we deem necessary during the year. We should pay attention. We should care. We should be heard. We deserve the best. Do something!

Some of the issues that came up around the coffee table were: Agent Orange, Burn Pits, long waits at the VA, transportation to and from health services, PTSD support, red tape, homelessness, medical care for veterans in rural areas not close to the VA Medical services, the constant changes of procedures, the mountain of paperwork and the list goes on!

We have over 320 million people in this nation and every one of us have a responsibility to take concerns that are important to us and let your VOICE be heard.

We need to stop the game of musical chairs and think that our representatives that we elect are doing the right things for us. Things have changed and if WE do not get involved then WE deserve exactly what we get. I am not talking about backing or not backing a particular political party, what I am talking about is zeroing in on the issues that we are passionate about and making sure that the folks that we send anywhere to represent us carry our opinion with them, and holding them to it. This does not mean that we will always get what we need or want but I can assure you we will be better off making sure they know what we want.

I think: Veteran Advocates of Ore-Ida, the Legion, VFW, IAVA, DAV, MOPH or many of the hundreds of other organizations representing our veterans represent only a small portion of us as a group. As an example: WE as individuals have the power in the numbers to make changes to our U.S. Department of Veteran Affairs. If you don't think you can then you won't. If you are defeatist and will not try, you have already lost. If you see the goal clearly and you go for it you have a chance to make a difference. Attitude is contagious so if you have a bad one or a good one you will infect many around you. Don't overthink the solution, keep it simple.

Think about if an elected official receiving a letter from an organization that has a membership of about 2 million folks expressing an idea that is a solution to a problem. Then that same elected official receiving 2 million letters from individuals that have also a solution to that same problem. Will that elected official give more weight to 2 million letters or the one letter? I would have to think that those 2 million individuals would have more weight. There are about 18.8 million veterans living in the U.S. today. WE have the power and the numbers to make right the

many wrongs we are suffering. Of course, that is only my opinion. And you know what they say about opinions: everyone has one!

Positive thinking with positive action like writing letters, leaving messages, etc. isn't a magical solution to all the problems we need to address. This might take time and it might not work in some cases but it will make the problems of our military members seem more manageable and if enough folks do something instead of letting it done to us, WE will win!!!

"The positive thinker sees the invisible, feels the intangible, and achieves the impossible." — Winston Churchill

Ronald Verini is a local veterans advocate who writes a weekly column for The Argus Observer. He can be contacted at (541) 889-1978, help@veteranadvocates.org or 180 W. Idaho Ave., Ontario, OR 97914. The views and opinions expressed in this column do not necessarily represent those of The Argus Observer.

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- **6.1 Pittsburgh Post-Gazette:** For National Guard troops, a lengthy COVID-19 mission brings job benefits into spotlight (7 June, Daniel Moore, 3.2M uvm; Pittsburgh, PA)

WASHINGTON — On March 6, as the magnitude of the COVID-19 pandemic was becoming more apparent by the day, Pennsylvania Gov. Tom Wolf turned to the camouflage-clad reserve troops known for quick deployments amid myriad natural disasters and public emergencies.

For the Pennsylvania National Guard, the pandemic turned out to be unlike anything it had faced before — far different from snowstorms, floods, hurricanes and even deployments to Middle East war zones. The pandemic was an invisible, unpredictable threat that sickened tens of thousands of people statewide and had thrown millions into unemployment.

"COVID-19 is not, for multiple reasons, anywhere near standard call-up," said Lt. Col. Keith Hickox, a state public affairs officer. "All those other scenarios that we're called up [to respond to] never stretch the length of time of the COVID-19 operation."

With the Guard's COVID-19 mission reaching three months on Saturday, some in Washington have called into question the benefits available to troops who are on the front lines of a health

war. The debate highlighted bureaucratic entanglements of the Guard's state and federal activation orders at a time troops are responding to both the pandemic and, more recently, civil unrest over police brutality.

Lt. Col Scott Rushe does a preflight check on a KC-135 Stratotanker aircraft at the 171st Air Refueling Wing on Tuesday, May 19, 2020, in Moon. An aircraft from the wing joined an ED-130J Commando Solo for a flyover of Pittsburgh hospitals as part of Operation American Resolve.

Last month, Rep. Conor Lamb, D-Mt. Lebanon, joined a bipartisan group of House lawmakers in demanding the Trump administration clarify if it would keep National Guard troops on federally funded deployments rather than state orders.

Mr. Lamb signed a pair of letters to the U.S. Department of Defense and introduced the National Guard COVID-19 Earned Benefits Guarantee Act to ensure troops receive full benefits including education, retirement, health care and paid leave. The bill is endorsed by The Reserve Officers Association and the Enlisted Association of the National Guard of the United States.

The move followed a Politico report that some Guard troops may see their federal deployment orders end after 89 days — one day short of the 90 days required to receive some benefits, like the GI Bill, Mr. Lamb said in a statement.

Mr. Trump has since announced he intends to extend the orders through mid-August. The U.S. Department of Defense did not return requests for comment.

The Pennsylvania National Guard includes about 15,000 reservists of the U.S. Army and U.S. Air Force, troops who usually are activated by governors and are directed by state officials. Guard troops have civilian jobs and often deploy for quick bursts, like a few days or a couple weeks, Lt. Col. Hickox said.

In the early days of the COVID-19 pandemic, Guard members deployed in phases under state active duty orders managed by the Pennsylvania Emergency Management Agency, Lt. Col. Hickox said.

"With any state emergency, we usually do a quick initial draw to start getting ready, and then, as the emergency plays out, we bring people in," he said.

The Guard deployment, which peaked at about 1,300 troops, has distributed food, produced cloth masks, transported three dozen quarantined cruise ship passengers and helped to clean and train staff at long-term care facilities. In May, 40 troops deployed to assist employees at the Brighton Rehabilitation and Wellness Center in Beaver County, one of the country's largest nursing home outbreaks of COVID-19.

In late March, Mr. Trump began allowing some states' National Guard troops to operate under federal orders.

Under that federal designation, National Guard troops remain under state control but the federal government pays the cost, which can run as much as \$9 million per month per 1,000 troops mobilized, according to the National Guard Bureau.

New York, California and Washington State were the first three states granted federal status on March 22. Pennsylvania was authorized for federalized troops effective April 13. That federal order, which lasted an initial 30 days, was extended twice before Mr. Trump extended it through mid-August.

Mr. Wolf's office did not return a request for comment for this story.

Federal vs. state benefits

Federalized troops receive all the federal benefits that come with active duty military — including access to Tricare health insurance, higher housing payments, points toward retirement and accrual of GI Bill education benefits.

Guard troops on state active duty orders are "basically working minimum wage with zero benefits," said Steve Beynon, a sergeant in the Maryland Army National Guard and veteran of the war in Afghanistan, in an interview.

Mr. Beynon, who also writes for the military publication Stars and Stripes, penned a story last month that argued the Trump administration "totally bungled" the National Guard deployment by not federalizing the Guard immediately.

In Maryland, Mr. Beynon's state stipend was about \$700 for the month, a third of the federal active-duty stipend, Mr. Beynon said. If state-activated troops are injured or fall ill, they would have to apply for state workers' compensation instead of seeking care at a U.S. Department of Veterans Affairs hospital.

"Troops went weeks without proper pay and critical benefits," Mr. Beynon wrote. "It is a confusing, bureaucratic mess of different types of activations, meaning different things for pay and benefits few seem to understand or care about."

Capt. David Boyles, a spokesman for the Guard's mission at Brighton Rehabilitation and Wellness Center, said he thinks state benefits in Pennsylvania stack up well with the federal ones. But the COVID-19 deployment "is all new to all us, as it continues to change and unfold."

"This is new territory," Capt. Boyles said. "A lot of assumptions are we are the same as active duty and we're not."

The COVID-19 deployment has eased slightly from its peak and now stands at just under 1,000 troops statewide, Lt. Col. Hickox said. (Another 2,000 troops have been deployed to George Floyd protests, he said.)

But the Guard's COVID-19 mission likely will continue for the foreseeable future. On May 29, the Guard announced a new statewide COVID-19 testing task force to assist nursing homes and long-term care facilities in testing residents and staff.

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6.2 - Task & Purpose: 230,000 veterans' disability ratings are stuck in limbo due to COVID-19 (5 June, David Roza, 2M uvm; New York, NY)

Hundreds of thousands of veterans are stuck in limbo in regards to their disability compensation because the novel coronavirus (COVID-19) pandemic has delayed compensation and pension (C&P) exams, which vets need to take in order to receive a disability rating.

The exams are usually conducted in-person, but the Department of Veterans Affairs paused over 230,000 in-person C&P exams on April 2nd to prevent the spread of COVID-19, the VA told Task & Purpose.

Since few C&P exams can be conducted over the phone or online, many veterans are stuck on hold in terms of determining their compensation levels — and that's attracted the attention of Congress.

"This abrupt pause to the C&P exam process has left some veterans to wonder when and how their claim will move forward," said Rep. Elaine Luria (D-Va.) during a virtual forum on May 27 with experts from veteran service organizations.

While the congresswoman said she understood VA's reasons for halting in-person C&P exams due to the spread of COVID-19, she argued that there also needs to be better procedures in place for ensuring a backlog doesn't build up. According to the VA, claims pending for 125-plus days are considered "backlog."

The build-up is made worse by logistical problems at the VA, several VSO experts said.

Matthew Doyle, associate director for the national legislative service for the Veterans of Foreign Wars (VFW), said that several veterans' exams were cancelled due to COVID-19, but they were still marked as no-shows by the VA. The veterans then received a notification saying that their claim had been denied due to lack of evidence.

"During the 48-hour review period, our service officers noticed that VA drafted a rating decision in which every single condition the veteran claimed was denied because 'we have been informed that you have canceled the VA examination scheduled in support of your claim," Doyle said of one such incident.

Rep. Mark Takano (D-Calif.), chairman of the House Veterans Affairs Committee, lamented a lack of transparency from the VA on what it was doing to address the C&P exam disruptions.

"Unfortunately, despite this looming backlog, VA chose not to participate today," Takano said at the forum last week. "That decision prevents Congress from learning how VA plans to resume these exams and denies veterans the opportunity to hear first-hand from the agency in charge of the process."

The VA seems to have been listening: the day after the forum, the department announced it would resume in-person C&P exams at select locations. The department also said that it would not take a final action on a claim while a required in-person exam is pending.

However, it was unclear what VA would do to address some of the other concerns shared by VSO experts.

When in-person exams are inadvisable

For example, both VFW and the Wounded Warrior Project warned that in-person exams may not be ideal for veterans who want to avoid traveling for fear of contracting COVID-19, or for veterans who cannot go to a VA facility easily.

"Often, one disability packet can require multiple exam visits which in turn requires the veteran to take off several days from work," said Derek Fronabarger, government affairs director for WWP. "We believe that virtual C&P exams may resolve these challenges and will decrease barriers for veterans who are employed - or have mobility or transportation challenges."

VA wrote in its press release that veterans outside of the in-person exam areas, or who do not yet feel comfortable receiving in-person exams, can schedule their exam for a later date, or be served through telehealth appointments.

However, virtual or telehealth C&P exams come with their own limitations, VSO experts said. Many of the C&P exams cannot be performed completely virtually.

Earlier in the pandemic, the Veterans Benefits Administration increased the number of authorized tele-C&P exam Disability Benefit Questionnaires (DBQs) from 16 to 29, Fronabarger said.

While the WWP expert applauded that move, he pointed out that only one of the 29 exams, the supplemental claims for already-established PTSD, can be performed completely virtually.

For the 28 other exams, VA requires an 'in-home tele-practitioner,' to assist the medical specialist performing the virtual exam, Fronabarger explained, which is a challenge when the whole point of staying home during COVID-19 is to avoid contact with other people.

"This is obviously the largest barrier we have identified in transitioning from in-person exams to a virtual model," he said.

To remove that barrier, Fronabarger recommended VA review all 29 DBQs and waive some of the in-home tele-practitioner requirements. For example, some of the C&P exams require the tele-practitioner just to check blood pressure and temperature, which could be dropped from the exam requirements when possible, Fronabarger wrote.

Fronabarger also recommended VA work with third-party contractors or possibly VSOs to have mobile practitioners who could assist with virtual exams when practitioner requirements are not waivable. WWP's Independence Program already provides in-home assistance for veterans with limited mobility, so that could be used to help administer C&P exams, he said.

"This would also help those who have limited mobility even after the COVID-19 pandemic is over," he wrote.

More and more paperwork

VFW pointed out even more problems. For example, in late April, the VA ended the decadeslong practice of giving VSOs 48 hours to help veterans review their benefits decisions for accuracy before being finalized, Connecting Vets reported.

Getting rid of that window is bad news for vets, VFW said.

"Veterans will now receive these kinds of erroneous decisions and have to file more paperwork to fix this problem," Doyle said. "Moreover, our advocates must use complex workarounds and tracking methods outside of [veterans benefits management system] in the hopes of finding all of our recent decisions, in order to conduct a proper quality review."

The VA made things even more difficult by removing public-facing DBQs from its website in April, Doyle added. Veterans often consult private medical providers to get an independent opinion about their service-connected disabilities, and DBQs filled out by a private medical provider help strengthen a veteran's claims, he explained.

However, that can no longer be done now.

"[The] VA's removal of public-facing DBQs amidst the crisis, was both imprudent and incomprehensible," said Doyle, who endorsed Rep. Andy Barr (R-Ky.)'s "Veterans Benefits Fairness and Transparency Act" as a way to correct the problem.

Contractor headaches

However, there are still more problems with telehealth C&P exams, namely that the contractors VA hires to conduct its virtual C&P exams have a spotty track record.

Rich Loeb, senior policy counsel for the American Federation of Government Employees (AFGE), said exams conducted by private contractors are more likely to have errors in them, which slows down the process by requiring follow-up exams.

In contrast, VA clinicians have specialized knowledge, skills and experience that reduce the likelihood of such errors, Loeb said.

"This specialized workforce benefits veterans in several ways, including by using and developing examiners who know exactly what to look for during C&P exams, often leading to more thorough examinations that are less likely to be sent for a costly re-examination," Loeb wrote in a statement.

Elizabeth Curda, a director in the Government Accountability Office's Education, Workforce and Income Security team, confirmed some of Loeb's claims about the reliability of VA's C&P exam contractors. In 2018, her office published a report on how the VA needed to increase its oversight of private contractors that conduct medical exams.

"We found the agency does not know the extent to which contractors are meeting the exam contract's quality and timeliness standards," GAO wrote at the time. "The agency identified some contractor performance problems, but the incomplete information gathered on performance highlights the inadequacy of VBA's oversight."

In September, the Government Accountability Office published a report on how VBA was implementing its recommendations for improving oversight. On the plus side, the agency had made fixes to its exam management system and begun auditing training for contract examiners to ensure the contractors were meeting training requirements, Curda said.

However, none of the GAO's recommendations had been fully implemented, "so we do have some concerns about their ability to fully oversee the contracted examiners, especially under these circumstances where a large backlog of claims is building," Curda said in the virtual forum.

For example, VA still hasn't fully resolved its exam management system issues, which it needs in order to track the completion of exams and the payment of contractors, Curda explained. Without that system, VA will also have a hard time analyzing the exam backlog and coming up with ways to fix it.

Cutting down the backlog

Keeping track of its contractors is a vital step for VA, since 61% of all C&P exams are conducted by VBA contractors, Luria said at the forum. The inability to conduct in-person exams has also heavily increased the burden on contractors, she explained, and the backlog has increased with it.

Between April 11 and May 16, VA public data showed that backlogged claims went up from 75,000 to 100,000, she said.

"This means in the first month without in-person C&P exams we've seen a huge spike in the backlog," Luria said. "This tells me we must have a plan to keep vets safe but also keep claims moving forward."

The number of pending exams could reach more than a million by December if things remain unchanged, Luria said. However, that was before VA said on Thursday that it would resume inperson C&P exams at select locations.

Fronabarger said he was encouraged by the move, and he was confident VA would improve its telehealth C&P exams.

"The moves that have been made to digital for healthcare options, diagnosis, and treatment, is new territory for many health organizations, including the Department of Veterans Affairs," he told Task & Purpose. "There will be growing pains and some trial and error as this gets finetuned. But we've seen a willingness from the VA to evolve, grow, and modernize their systems and processes during the COVID-19 crisis."

Fronabarger says he hopes the telehealth adjustment will continue post-pandemic.

"It makes sense for some veterans to utilize a digital offering or telehealth option instead of driving three-to-four hours to the nearest capable VA facility," he wrote.

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6.3 - KNBC (NBC-4): <u>Veterans' Funerals to Resume; More Businesses to Reopen in Riverside County</u> (7 June, 1.7M uvm; Los Angeles, CA)

Funeral services, which had been on hold during the COVID-19 pandemic, will resume this week at most national cemeteries, including the one in Riverside, according to officials with the Department of Veterans Affairs.

Services had been reduced to burials and limited visitations since March 23, while larger services and military honors were suspended.

On Tuesday, the department plans to start contacting families that had to delay or limit services for loved ones and let them know the cemeteries are now fully open again.

"We believe we have a robust set of measures in place that will allow us to conduct committal and memorial services while protecting the health and safety of veterans, their families and our team members who serve them," VA Secretary Robert Wilkie said.

There will still be limits on the number of people at each service, physical distancing will be required for those who do not live in the same household, masks will be required and those who are ill will be urged to stay at home.

Meanwhile, Riverside County Supervisors Karen Spiegel and Manuel Perez said the county is prepared to move forward in the next Stage of de-regulation to reopen additional economic sectors amid the coronavirus pandemic.

"We will be excited to share how this will be implemented," Spiegel said Friday during an afternoon news briefing at the County Administrative Center in downtown Riverside.

Perez added that after the county has reviewed Stage 3 criteria of the governor's four-Stage reopening framework, released Friday, "we will be prepared for the reopening of all sectors throughout the County of Riverside."

The Board of Supervisors is expected to address the matter further during its meeting on Tuesday.

The California Department of Public Health and the governor's office established an action list for bars, day camps, gyms and schools to return to business, as well as paving the way for professional sports venues to restart operations.

"It is up to the local jurisdiction to make decisions regarding reopening specific sectors based upon the epidemiology and readiness of the county," according to a CDPH statement.

Currently, Riverside County, like most of the rest of the state, is in the "advanced" Stage 2 point of the de-regulation framework that was put in place by the three-dozen or so public health executive orders signed by the governor since mid-March.

Retail outlets, hair salons, dine-in restaurants and gaming facilities were among the businesses permitted to reopen two weeks ago in Stage 2.

"We are ready to work with businesses to reopen safely," Spiegel said. "Testing is really important. More people need to get tested."

One of the state's thresholds for progressing along the de-regulation path is for the number of residents screened for COVID-19 to increase. Currently, close to 5% of the county's aggregate population has been tested, according to county health officials.

County Department of Public Health Director Kim Saruwatari said that one criterion for a jurisdiction to continue toward full reopening is for the positivity rate in tests to remain below 8%. The county topped out at 8% on June 3 but was consistently below that figure prior to that time.

According to the Department of Public Health, 8,777 COVID-19 infections have been documented countywide. That compares to 7,486 a week ago -- a 17% increase.

The number of coronavirus-related hospitalizations has remained relatively flat, Saruwatari said, hovering just above or below 200 on a daily basis. The number of deaths attributed to virus-related complications stands at 355.

Those numbers reflect 474 new infections and 10 additional deaths in the past two days.

More than 70 patients from Imperial County were admitted to Riverside County hospitals during the past two weeks of May. Riverside University Health System spokesman Jose Arballo told City News Service last week that another 22 patients from Imperial County had either been transferred or walked into county hospitals since then, although he said it was unclear how many were still being treated.

Saruwatri produced, for the first time, statistics indicating racial breakdowns of COVID-19 infections.

She said blacks, who represent 6% of the county population, have experienced an infection rate of 4%. Whites, who represent 38% of the county population, have an infection rate of 15%, and Hispanics, who represent 47% of the county population, have an infection rate of 46%.

Spiegel reminded business owners of the availability of \$45 million in grants to offset impacts from the shutdowns the governor ordered in mid- March. The federal Coronavirus Aid, Relief & Economic Security -- CARES -- Act money will translate to 4,500 individual businesses receiving up to \$10,000 each for employee retention, capital investments and safety equipment purchases.

The supervisor said on Tuesday she will introduce a proposal for a similar aid package available exclusively for nonprofit organizations countywide.

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6.4 - KTVH (NBC-12): East Helena Boy Scouts build and donate "coffee shed" to VA (7 June, Alexie Aquayo, 55k uvm; Helena, MT)

Evan is an East Helena Troop 212 Life Scout transitioning into an Eagle Scout, but needs to complete a project to do so. He decided to complete a shed. A storage shed that will hold coffee donations for veterans.

"Last year, we raised 1,300 cans of coffee. The storage facilities at the VA were not sufficient for all those cans. So, I saw a need to build more storage space and decided to provide it," says Evan Ceaicobschi, a Troop 212 scout transitioning to Eagle Scout.

Evan and the troops (pictured above) gathered to build the shed. They developed the shed beforehand and finally assembled it to completion at Fort Harrison. The shed will be an addition to the coffee program set by The Mountain States chapter of the Paralyzed Veterans of America organization. A non-profit that worked with the scouts before.

"It's just a delight. The scouts have always been a wonderful program. They've always been involved in my coffee program. They've always donated coffee to the veterans, every year," says Daniel Koehl, Mountain States Chapter Paralyzed Veterans of America Vice President.

The program allows for any outpatient clinic in the state to give free coffee to their veterans as they visit with their doctor. A program that Evan feels is an honor to give.

"I'm pretty proud of what I've been able to do. Of course, I wouldn't be able to complete it without a lot of people helping me, without volunteers. It's a good feeling being able to help the community, especially veterans," says Evan.

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7. Other

7.1 - KUTV (CBS-2, Video): Exclusive: Utah Marine veteran explains why he chose to protest in uniform (8 June, Kelly Vaughen, 1.5M uvm; Salt Lake City, UT)

A Utah Marine Corps veteran has received praise and criticism from across the country for photos that have circulated of him protesting in uniform at the Utah State Capitol.

In an exclusive interview, 2News spoke with the man about what led to his decision to protest and to clear up some of the rumors that have circulated online.

In the photos that have been seen by many, Todd Winn can be seen standing in front of the Capitol in his Marine Corps uniform with his mouth taped shut, the words "I can't breathe" written on the tape.

Many across the country have supported him, but many also criticized the decision or questioned if he is even in fact a Marine.

Winn said long before he stood alone at the Capitol in solidarity with protests happening around the world, he was just a small-town boy from Kansas. He said:

Being a Marine had been a dream of mine since I was a little kid.

He grew up in south-central Kansas, in what he called a patriotic environment. Winn's father served in Vietnam, his grandfather served in World War II, he had uncles who served in Korea and World War I.

He said the 9/11 attacks happened in his senior year of high school, solidifying his decision to join the Marines. He said he enlisted in the Marines in 2003, volunteered to be in the infantry.

Frankly, I loved being a Marine. The camaraderie, the brotherhood, its a connection that unless you've experienced you can't really understand.

He was deployed to Iraq, where he was wounded twice, including traumatic brain injuries. He was medically discharged in 2007.

Much to my chagrin, because I had planned on being a career Marine, loved the Marine Corps, but sometimes life has other plans for you.

He said he spent a number of years with PTSD, depression, and short-term memory loss. Winn said he still struggles with those things today but has help from the VA.

He said it was his time in the Marines that opened his eyes, and let him lose what he called the "small-minded ideas" he grew up with.

You know until I left home and joined the Marine Corps, I didn't really understand that that was wrong. Until I served with men whose skin was a different color than mine, who were the finest men that I've ever known, help me to learn that really we're all the same. He said it is those lessons he learned in the military that led him to protest. And he said he

"I laugh, but it's not really funny, because personally I find stolen valor to be pretty despicable," Winn said.

knows some are questioning if he is even a Marine, after choosing to demonstrate in uniform.

He shared with 2News his US Department of Veteran Affairs identification card, his purple heart citations, as well as photos from his time in the Marines to assure the public he is in fact a Marine Corps veteran.

Winn stood at the Capitol for three hours last Friday. He said he taped his mouth to silence the voice he has as a veteran – one he says is a privileged voice – with the hopes to magnify the voices of so many others speaking out against police brutality.

"That had a lot to do with my decision, to choose to do this in uniform," he said.

He said he remembered the oath he took the day he was sworn into service: "Support and defend the constitution. And there's no qualification on that. It's not until this time, or only for these people."

Winn said that as he protested, he planned for his watch to go off every eight minutes and 46 seconds, to represent the time George Floyd was held down by Minneapolis police. He said when his watch didn't work he stood there counting that time over and over, saying three hours in the heat is a small price to pay if even one person reconsiders how they feel about current issues.

Winn said he has received criticism from many for protesting in uniform, from strangers online, to those he served with.

"Really all I have to say to my fellow Marines and veterans is you're right. What I did in a prescriptive sense was wrong. But I believe that morally and ethically it was the right decision to make."

He said he agrees that military personnel should not protest and take sides on political issues, but he sees what is going on in the world as a human issue – not a political one.

Winn also wanted to be clear that he has no ill will towards the police, but he does advocate for the improvement of the escalation of force, tactics training, and procedure.

Having these incidents also puts good, conscientious police officers in danger. Because when you have officers acting out, not using their escalation force properly, abusing their authority, it causes more and more people to think, I think somewhat rightfully, to distrust the police.

He said he still doesn't know if this was the best way to spread his message, but if it's a mistake he said it's one he stands by.

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7.2 - Times Free Press: <u>Cooper's Eye on the Left: White privilege called on building</u> scrubbers of property destruction (7 June, Clint Cooper, 832k uvm; Chattanooga, TN)

Opposing vandalism

A federal building that is home to the Export-Import Bank of the United States and some offices of the Department of Veterans Affairs was one of the many Washington, D.C., structures vandalized amid the uprisings following the death at the hands of Minneapolis police of suspect George Floyd.

But when three women were scrubbing the graffiti "Blacks Lives Matter" slogan off the building last week, a woman drove up, started filming them and asked, "Why are you guys removing the 'Black Lives Matter' graffiti?"

"This is a federal building," one of the women said, "and we care about our country and city."

"So you don't care about black lives then," said the woman filming.

"That's not at all what we're saying we certainly do care about black lives," one of the scrubbers said, no doubt incredulous someone could conflate destruction of property with feelings about race. "We don't disagree with the message, it's just on the building, so we're trying to clean it."

"Not a great way to use your white privilege ladies," the driver responded. "That's disgusting."

Loved by non-Georgians

Jon Ossoff, who took 95% of his campaign contributions from out of state in attempting to win a U.S. House seat in Georgia that the media said he couldn't lose in 2017, is doing a little better this time in his race to be the Democratic nominee for U.S. Senate from the Peach State. This time, he's only taking 64% of his campaign donations from out of state.

California, according to campaign records, has poured \$415,717 into his coffers, while New York has contributed \$271,393. Indeed, he announced the start of his campaign in New York City with an in-studio interview at MSNBC.

Ossoff not only didn't win the suburban Atlanta House seat, but he lost it by four points. He couldn't even vote for himself because he didn't live in the district.

He's the polling leader for Tuesday's primary with former two-term Columbus Mayor Teresa Tomlinson and businesswoman Sara Riggs Amico but has considerably less monetary backing from Georgians than does Tomlinson. In fact, he'd only raised \$4.1 million for the primary, a

considerable drop from the \$32 million his campaign raised in the most expensive House race in U.S. history in 2017.

If he wins, Ossoff will face incumbent Sen. David Perdue in November.

Left foiled again

When the Tampa Bay Times reported White House press secretary Kayleigh McEnany had voted by mail 11 times in the last decade, leftists thought they had found hypocrisy in an administration that is dead set against all-mail balloting because of the high chance of fraud. They were wrong.

Yep, she said, she'd done just that, and she said the White House and President Donald Trump were fine with individuals requesting to vote by mail and doing so.

"Every American is entitled to vote the way that I did," McEnany said. "If you are someone who is working out of state but your domicile is in a different state, you are absolutely entitled to request an absentee ballot and to cast your ballot by mail. I am entitled to that. The average voter is entitled to that."

On the other hand, she said, no one seems to have a problem with Los Angeles County, where 112% of the population is registered to vote.

"Well, that leaves [at least] 12 percent subject to fraud," McEnany said. "So, that's what [Trump]'s against. He's not against the average every day American who has a reason for casting their ballot — to get an absentee cast in that manner."

'Peaceful' and dead

As of last Thursday, at least 10 people had been killed in the riots following the death at the hands of Minneapolis police of George Floyd, but the major broadcast networks ABC, CBS and NBC were little concerned with those deaths.

Indeed, from May 28 to June 3, the three networks spent less than 1% of their combined broadcast time — about four and a half minutes total — on the deaths. But the protests? That was a different story.

During that time, they spent nearly 12 combined hours cheering on the protests, with NBC spending 309 minutes on protests and 132 seconds on the deaths, CBS 201 minutes on the protests and 61 seconds on the deaths, and ABC 200 minutes on the protests and 91 seconds on the deaths.

At least three unarmed blacks were victims of the protests, including a retired police captain in St. Louis who was attempting to protect his friend's business, a 22-year-old woman in Davenport, Iowa, who was killed as she was leaving protests after they became violent and an Indiana business owner and former Indiana University football star who was known as "Mr. Indianapolis."

Yet, somehow, the majority of reporting on the protests keeps pronouncing them "peaceful."

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