RADM Michael Weakhee, a long-time member of COA, was sworn in as Director of the Indian Health Service (IHS) on 8 May 2020 by ADM Brett Giroir. Weakhee had been confirmed by the US Senate on 21 April. RADM Weakhee, an enrolled member of the Zuni Tribe, had been serving as Acting Director of the IHS. More PHS Commissioned Corps officers are assigned to the Indian Health Service (1655) than to any other entity or agency within the federal government.

RADM Weakhee was born in the Shiprock, NM, Public Health Service Hospital on the Navaho reservation, so he became familiar with the IHS at an early age. RADM Weakhee joined the United States Air Force as a public health specialist. He received his B.S. degree in Health Care Management from Southern Illinois University. He earned Master of Health Services Administration and Master of Business Administration degrees from Arizona State University.

RADM Weakhee joined the US Public Health Service Commissioned Corps, serving both in Indian Health Service billets in the field and at IHS headquarters. He was chief executive officer for the Phoenix Indian Medical Center, the largest federally-operated facility in the Indian Health Service. At IHS headquarters he was Executive Officer for the Office of Clinical and Preventive Services, Director of Management Policy and Internal Control Staff, and Deputy Director for Personnel in the Office of Management Services.

He received an Exceptional Proficiency Promotion to Captain, two Outstanding Service Medals, and two IHS National Director’s Awards.

Health and Human Services Secretary Alex Azar congratulated RADM Weakhee on his new position and stated that he
Legislative Update
Flexible Spending Accounts?
If You Want One, Speak Up

by Judy Rensberger

Recently, a longtime COA member came to us with a request for help. Divorced, with young children, she has deployed in response to COVID-19 and expects to deploy again. How many deployments, and for how long, neither she nor anyone else can say for certain. But one thing is certain: she needs, and will continue to need, competent care for her young children. Good and reliable childcare is neither inexpensive nor easy to find, as all parents know. For single, working parents, it is especially difficult – a challenge that’s ever-present for years.

The USPHS officer who approached us wants COA to take another run at winning flexible spending accounts for USPHS officers. She did her homework. She laid out her reasoning. She queried fellow officers through a Facebook post and identified 69 additional USPHS officers who said they, too, wanted access to this benefit. As I write, we are still talking this through.

Initially, my own view whipsawed: Yes, let’s go for it. No, this issue is a loser for us.

The Military Coalition’s Health Care Committee, which I co-chair, reminds me of the unhappy history of efforts to win this benefit for service families. The Defense Department has objected. After all, service members and their families, including USPHS, receive Tricare and its relatively generous coverage. So why should they be able to claim access to other benefits out there? Flexible spending accounts are for those without such coverage, right? So, where do we go from here?

What informs my current thinking is this: There is now a bill in Congress that would authorize flexible spending accounts for Armed Services personnel, but not for the USPHS. I no longer see much of an option here. COA staff will go all out, but we need the help of COA members (and non-members).

What is a flexible spending account? Generally speaking, it is an arrangement through one’s employer that permits the employee to spend pre-tax dollars on specific needs such as medical care that is not otherwise covered by insurance or, as in this case, care for a dependent child. It is a nice benefit for anyone, but especially for working parents of young children.

The amount of money one can contribute to a flexible spending account is relatively modest – $2,650 according to the IRS website, which I checked in mid-June. Detailed information on both Flexible Spending Accounts (FSAs) and Health Savings Accounts (HSAs) is available online in IRS Publication No. 969.

The USPHS officer who contacted me seems wonderfully able to lead an effort to involve fellow officers in seeking this benefit.
As we have for well over a century, United States Public Health Service Commissioned Corps officers are stepping up as the country faces a new public health crisis: COVID-19. Perhaps unique among the uniformed services, Commissioned Corps officers are spread out nationwide and are immersed in day jobs in various capacities yet must quickly coalesce at deployment sites and rapidly reach operational efficiency.

Our recent deployment experience, which began frantically, confirmed what CDR Weitzman and I had long suspected—that despite distance and unfamiliarity with one another, Commissioned Corps officers display an incredible sense of teamwork and camaraderie when it counts the most.

Such teamwork began shortly after being rostered the morning of March 12, 2020 with a call to CDR Weitzman regarding our pending same-day deployment.

Each of us had a challenge. This was to be my first deployment outside the DC-Maryland-Virginia area, and I was uncertain as to what I needed to bring with me or how the process worked. CDR Weitzman, who had been teleworking that day, wanted several spare items that had been left near her office an hour away from her home.

We both sprang into action. CDR Weitzman and other experienced officers advised me on how to prepare and what to expect. Meanwhile, I picked up some of the spare items for CDR Weitzman, saving her a two-hour roundtrip drive.

CDR Weitzman received her orders and immediately notified me. I realized we would be deployed to different sites but still departing from the same airport around the same time.

By the time I arrived at the airport, CDR Weitzman had already passed through security. She circled back to the concourse where I handed her the items she had wanted and, with little time to spare, re-entered security and boarded her flight. Unfortunately, I missed my flight and was rebooked for the following morning.

Once each of us arrived at our destinations, the spirit of cooperation and collaboration was consistently evident. Officers who were unclear about where to report to, or who lacked transportation, were given instruction or rides by fellow officers.

On base, swab team members and case managers worked together to train and help each other. Whenever supplies or sustenance was needed, there was always an officer willing to go above and beyond the call of duty to assist.

Following deployment, we all returned to our duty stations and routines. But in addition to serving our country and those in need, many of us gained a sense of connectedness that transcended geographical distances and federal agency boundaries.
by CAPT Karen Munoz, RN, BSN, MS

When I had the honor of becoming the Chairwoman of the Board of COA last July, I had some big expectations about what we could achieve. Like any new leader in a role, you make some promises, share some hopes, write down a few lofty goals, and start to work on them. But then reality hits you. On my first day as chair, I learned that Jim Currie was planning to retire, and the organization would have to embark upon a search for his replacement. Other twists and turns came into play and, one by one, my expectations crumbled. I was disheartened when the road I envisioned became difficult to traverse. The challenges we faced resulted in many of my goals for COA not coming to fruition. But I have a great team of folks on the Board who helped remind me of the many items we were able to accomplish and everything we will accomplish going forward.

This year, I have seen the Semper Gumby motto fully realized. Whether at a job, on a deployment, in a leadership role, or just living a day in the life - the ability to adapt to circumstances beyond our control is paramount to maintaining resilience and getting to the other side. One must be able to quickly assess a situation, come up with alternate plans, and adjust course as needed. One must be willing to take on unexpected tasks, change plans, and “right the ship.” I see this quick adaptability all around me in the Commissioned Corps, and I am proud to say that many of my colleagues possess this same attitude. During the USPHS response to the COVID-19 pandemic, I have seen individuals, families, organizations, and the machinery of government flex to an ever-changing situation. We have all been quite “Gumby” these last few months! The Board of COA displayed this same resilience and flexibility over the last year, and I have been incredibly honored, and grateful for the opportunity to have served with them.

When we embarked upon the search for a new Executive Director, little did we know a novel coronavirus and social distancing would stare us in the face. We came up with alternate plans and held a 100% virtual search, using video calls to interview candidates and, through that process, chose an outstanding new leader for COA/COF. The transition was as smooth as could be.

I trust in the Commissioned Officers Association of the USPHS, and what the organization does for active duty and retired Officers. The Association is not always successful in their efforts to advocate for our service, but that remains their number one mission. There are not many organizations clamoring to help us, and there is simply no other organization dedicated to our issues. The Public Health Service, its active duty officers, and the hundreds of retired officers we count as members, will continue to have a strong, vibrant association which will fight to advocate, publicize, protect, and support service members of the Commissioned Corps. As I close out my year of service to
Aurora Borealis COA Awards Senior and Junior Officer of the Branch

by CDR Anne Marie Bott, PharmD, BCOP, BCPS

The Aurora Borealis COA awarded the 2019 Senior and Junior Officer of the Branch Awards to CDR Jodi Sides and LCDR Rovigel “Jill” Gelviro, respectively. Annually the branch selects two officers recognizing their leadership, officership, and volunteerism within the branch.

CDR Sides serves as a mentor and coaches nurses and other PHS officers to better their careers. She is an active member of the branch, serving as chair of the Officer Development Subcommittee, and co-leads and participates in PHS Athletics events. She regularly volunteers for multiple community events including serving meals with Special Olympics, building naloxone kits for communities, and providing educational events at the Ronald McDonald House in Anchorage.

LCDR Gelviro displays leadership and officership within the branch, local community and nationally. She served as the branch COA Treasurer during 2018-2019. LCDR Gelviro is a Color Guard Team Lead, training fellow officers in ceremonial protocol and procedures, and performing in promotion ceremonies. She also worked alongside the promotion ceremony planning committee to draft a detailed Standard Operating Procedure, providing guidance and structure for future ceremonies to promote esprit de corps. She has volunteered in several community service and PHS Athletic events. LCDR Gelviro’s hard work and dedication also extends nationally as she represented the Aurora Borealis branch in her role as the Executive Secretariat for the National COA Local Branch Executive Committee, serving 117 local branches during 2017-2019.

CDR Sides and LCDR Gelviro are proudly recognized by the Aurora Borealis branch for their service to the branch and fellow officers.

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benefit for the USPHS. Including her, we know there are at least 70 USPHS officers who want this benefit badly enough to say so and, one hopes, to follow up.

Here is the situation, and what these (and other) USPHS officers can do:

In the U.S. Congress, each of those 70 USPHS officers has one U.S. Representative and two U.S. Senators. If each officer reaches out to all three of his/her representatives in Congress, that is 210 constituent contacts focused specifically on this one, easy-to-understand issue. That can be enough to get noticed.

Please do this, and encourage your fellow officers to do it, and let me know how it goes. We will follow up on every letter to every Congressional office.

If your official home of record is in another state, but you are on long-term assignment in Maryland or Virginia or somewhere else, do not worry about explaining all that in your letter or e-mail. Simply use your current home address. (That advice comes from the office of U.S. Senator Tim Kaine of Virginia.)

Remember that writing to your own representatives in Congress, and saying whatever you want to say to them, is not “lobbying.”

Questions? Please feel free to ask me at jrensberger@coausphs.org in the subject line, please say FLEXIBLE SPENDING. Thank you!

BOARD from page 4

the Board, I am committed to remain engaged, to participate and lend my skills to strengthening this fine organization. Despite the current inability to gather in person and participate in community service events, we still need our members and branches to renew regularly, engage, and participate as we chart the road ahead.

With that goal in mind, COA has embraced videoconferencing technology and held an all-members Town Hall, with almost 400 members on the webinar! We will continue to think of innovative, flexible ways to keep you informed, interested, and to stay in touch. Until we see one another again, Semper Gumby!
In January, my 5-year-old son and I were on a ten-day trip to visit my family in Heilongjiang Province, China. More than 1,500 miles away, Wuhan City was on lockdown due to COVID-19. My brother’s family lives in Wuhan City, so we checked on them every day. My son and I were lucky enough to return to the U.S., before increased travel restrictions were enacted. I chose to monitor him and myself at home for two weeks afterwards. Meanwhile, I was so eager to get involved in the response because it was near and dear to my heart. I was excited to support a new team stood up within CDC’s Commissioned Corps Emergency Operation Center (EOC) Cadre. My responsibilities involve all things surrounding deploying external PHS officers for the COVID-19 response. I have also been on the EOC Cadre’s Data Team developing integrated data systems for tracking officers’ status and deployments. Currently, I am on the EOC Vaccine Task Force and work with our team in planning for COVID-19 vaccination monitoring. Now, with the USPHS “all hands on deck,” I am preparing for my next deployment, whether field or headquarters. I have such pride to be a PHS officer and serve alongside our fellow officers.

LT Amy Schuh, PhD, MPH, MT (ASCP)

On a typical day, I can be found with a colleague and some fruit bats in one of CDC’s high-containment labs, trying to understand how viruses spill into the human population. However, it was not a typical day when I was asked to deploy to the New York Quarantine Station at John F. Kennedy Airport. It was early February and the number of COVID-19 cases in China were increasing, spurring US Quarantine Stations to screen passengers arriving from China for COVID-19 infection. When I arrived at the Quarantine Station, staff were working out the logistics on how to efficiently screen multiple flights arriving at different terminals at the same time, while others were preparing health packets for inbound passengers, re-supplying go-bags with personal protective equipment, answering phone calls, and entering data into an active surveillance system. I wondered how I would be able to concentrate and function in this bustling environment that was vastly different from the environment that I am accustomed to working in. Two hours later, I helped screen a flight of 300 passengers, and when that flight was cleared, I immediately began screening passengers from another large inbound flight. By the end of the month, I grew to love working with a large team of public health professionals in a fast-paced, dynamic environment, and was surprised to find how much I enjoyed answering phone calls from the public. I am grateful to the CDC and PHS for providing this opportunity that has helped me expand my horizons and become a better PHS Officer.

LT Ana Lauer, PhD

Like most officers, I tend to thrive better in very structured environments. I am one of those people who has back-up plans for back-up plans. As I was on call for the month of February as part of APHT-5, I made a contingency plan for my duty station, as well as for childcare. Little did I know that I would be given less than 48 hours’ notice for a deployment. I dropped everything I was doing at work and proceeded to get medically cleared and ready to go out the door. I was told that I would leave on Saturday for Detroit, where I would serve as a tertiary screener. The day I was supposed to leave, my orders changed. I ended up functioning as a Quarantine Public Health Officer while deployed to the San Diego Quarantine Station. It was one of the few quarantine deployments not located at an airport. I never knew what any given day would bring. I answered calls from government partners such as Customs and Border Protection and state public health entities, as well as the travel industry. I worked closely with the amazing staff at the San Diego County Public Health Department. Occasionally, I also interacted with other deployed officers assisting with repatriation efforts at Marine Corps Air Station Miramar or assisting the Department of Homeland Security at US Points of Entry. There were even several occasions where I was almost redeployed to another station. In other words, I re-learned the unofficial corps motto, Semper Gumby!

LT Carrie Whitworth, PhD

Because I have prior experience performing molecular testing, as soon as the opportunity arose, I volunteered to join the Laboratory Task Force in Atlanta. It provided me the opportunity to serve the mission (controlling the spread of COVID-19) by using my background. Currently, I am part of a surge team validating platforms to assist in processing clinical samples. I think one thing COVID-19 has taught/reminded me, and a lot of single parents, is that you can’t plan for everything, no matter how hard you try. I had always planned on my mother helping with my son
while on deployment, but unfortunately that hasn’t been possible because of a death in the family. Many of my friends who had volunteered to help were deployed. Put the role of now being a teacher--and no daycare on top of it—has been a challenge, to say the least. But I know there are lots of people in my position, and I am extremely grateful to both CDC and PHS to be able to serve the mission by using my expertise, while equally wearing all the hats needed for my personal life.

**LT Angela Couliette-Salmond, PhD**

It took my husband and me several years to conceive our second child. It also took several years for the Public Health Service to have an open call for Scientist Officers. My persistence, while successful in both worlds, collided when COVID-19 became a pandemic. Because I am currently entering my third trimester, I am unable to support the response outside of my worksite. So, instead of deploying, I am using my decades of public health microbiology to protect myself, my family, and our unborn daughter, rather than deploying. My role in the fight against COVID-19 was found within the Scientific Response Section within the Lab Task Force. My main responsibility was to lead and author an automated extraction equipment standard protocol, which extracts COVID-19 specimens. My heart and thoughts have been, and will continue to be, with my fellow Officers on the front lines.

**LT Sandra Miller, PE**

When the call for volunteers for the 2019 Novel Coronavirus Outbreak went out to the CDC workforce in early January, I was anxious to join my first response effort. Serving my country in times of crisis was one of the main reasons I joined the USPHS. When I heard about the need for junior officers to assist with administrative duties in CDC’s Occupational Health Clinic (OHC), I thought, “Who better than an Engineer Officer?” The next day I began my COVID-19 deployment in the OHC. I spent my first month in the clinic supporting medical clearance of CDC deployers. During the busiest times, we were clearing over 40 people each day. Now, about 70 days into my deployment, I’m serving as the Administrative Lead of the OHC’s Deployment Assessment and Monitoring Team, the DAM Team. Our administrative group is responsible for managing the mobile texting tool used to monitor CDC deployers, Emergency Operation Center responders, and permanent quarantine station staff for potential COVID-19 symptoms. It continues to be an honor to serve with these dedicated officers during this unprecedented time.

**LT Jayleen KL Gunn, PhD, MPH, MA**

It is noon on a not so typical Friday afternoon in April, and I realize something. A little over a year ago, I quit my job, left upstate New York in the middle of a “snowpocalypse,” drove south, and officially joined the United State Public Health Service as a scientist stationed at the Centers for Disease Control and Prevention (CDC). I had spent years of my life preparing for a moment that I am now living. As I get lost in my own train of thought, I get a text from another officer asking me why I haven’t joined our monthly lunch. It is simple, I think. I am in quarantine. Then I smile, because even as I sit in quarantine, my fellow officers are practicing safe social distancing and have set up a virtual lunch date for our monthly check-in. These check-ins have been vital to helping me understand the ins and outs of being a new employee at CDC and a new officer in the Commissioned Corps. Now, as we find ourselves living during a pandemic, I realize something else: archiving the stories of my fellow officers allows us to preserve moments in history long after we are gone. Before the pandemic, our daily work lives were compartmentalized, and the common string that held us together was our love of public health and our desire to serve the public. Now we find ourselves supporting each other. For every LT’s story here, there is another officer or civilian finding themselves in similar situations. COVID-19 has taught us all that no one can be fully prepared or in control of the world around us. It has also taught us that in great times of stress, new opportunities arise that push us to learn new skills, adapt to new situations, and experience a piece of history that we all hope to never experience again. While I cannot shine a light on all the employees who deserve to have their stories told, I can archive the stories of my fellow officers that I am lucky enough to call my friends. With that, today’s topic for archiving is: What has your role been in fighting COVID-19? How has COVID-19 impacted you?
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Safia Mohamud Receives First Mishoe “Believe” Scholarship

by John McElligott

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) is honored to announce the first recipient of the RADM Helena O. Mishoe Diversity “Believe” Scholarship.

The scholarship was established to encourage the career dreams of high school seniors from populations burdened by health disparities and that have been shown to be underrepresented in the health sciences and research, or health-related disciplines. These include populations such as racial and ethnic minority groups, rural populations, populations with low socioeconomic status, first generation college students, and individuals with disabilities.

Ms. Safia Mohamud is the first scholarship recipient. A refugee who grew up in war-torn Somalia, she wants to become a physician specializing in obstetrics and gynecology. In her scholarship essay, Safia wrote, “My homeland is a place where kids learn to identify the different sounds of gunshots before they learn how to recite the alphabet. I still remember waking up in the middle of the night and having to run and hide in the forest with everyone because of the violence.”

Safia’s inspiration for seeking a career in medicine comes from the neglect her childhood community showed for women’s health. She wrote, “No one ever asked them how they felt or if they had an illness. There is a stigma about women’s health in my culture; if something is wrong, they won’t talk about it because they feel embarrassed.” COF is honored to support tomorrow’s health professionals, exemplified by Safia Mohamud and her commitment, as she wrote, “to be fearless, to live life to the fullest, and to fight for my future.”

The scholarship program is named after Helena O. Mishoe, PhD, MPH, retired Rear Admiral of the Commissioned Corps of the U.S. Public Health Service. Her extraordinary public service and scientist career spanned over three decades at the National Institutes of Health and encompassed 27 years on active duty in the USPHS Commissioned Corps. The scholarship continues RADM Mishoe’s legacy as a believer in the dreams of those who have demonstrated tremendous resiliency in overcoming challenges, and who will become visionary change-makers achieving great things to make our world a better place for all.

Anyone interested in donating to the Mishoe Scholarship can do so online at www.phscof.org/donate

COA Kicks off Inaugural Virtual Town Hall

by Jacqueline Rychnovsky, Executive Director

On what would have been the 50th convening of the Commissioned Officers Foundation (COF) hosted annual symposium, the Commissioned Officers Association (COA), along with the COF, hosted their first virtual Town Hall on Monday, June 15 at 8 p.m. Eastern time. The idea to hold this Town Hall meeting was first proposed in May and was brought to life very quickly using the Zoom Webinar platform. Response to the session was overwhelming, with over 700 registering and nearly 400 members signing on to hear presentations from current and future leaders of COA and COF.

The session was opened by CAPT Karen Munoz who welcomed the participants, acknowledging that we have members on the call from the ranks Ensign to Admiral, and coast-to-coast from Miami to Anchorage, and from New York to Hawaii. She remarked that while the pandemic has presented us with many challenges, we’ve also been afforded new opportunities. “This has given us an opportunity to adapt and learn new ways to operate; an opportunity to learn new ways to reach out and to understand the importance of connection.” She introduced RADM Brandon Taylor, COA’s incoming Board Chair, who shared his vision for the Board by highlighting the importance of relationships and partnerships for the Association. He called upon all COA members to make a concerted effort to recruit all officers to COA. RADM Taylor said that COA membership is a “no-brainer.” He also spoke to the value and symbiotic relationship of COA and AMSUS, saying, “These organizations are not at odds with one another” and but serve different purposes.

COA/COF’s new Executive Director, CAPT (retired) Jacqueline Rychnovsky, shared observations from her first month in the new role. COA’s outgoing Executive Director, COL Jim Currie, was acknowledged for his 6 years of service to the association. CAPT Rychnovsky reviewed the mission of COA and spoke on how the association can serve as its’ members’ legislative aide and advisor.
WEAKHEE from page 1

had “played a vital role in improving quality [of care] across IHS and strengthening our government-to-government relationship with Tribes.” Upon being sworn in as IHS Director, Weakhee said that he “appreciate[d] this opportunity to be called upon to continue serving our American Indian and Alaska native people across the Nation.”

COA is proud of all our outstanding members and extends our sincerest congratulations to RADM Michael Weakhee for being placed in this high position of trust and responsibility.
Uniformed Services University’s Global Health Distance Learning Program

by LCDR Anna Zimmerman, RN, MSN, NP-C

If anyone is interested in furthering their education, the Uniformed Services University of the Health Sciences in Bethesda, Maryland offers a graduate program that enables officers to receive a graduate certificate in Global Health and Global Health Engagement. This program is not only available to residents in the DC area but is offered via distance learning to reach officers stationed anywhere in the world. I was fortunate enough to graduate from this program in February 2020 and realized many PHS officers may not be aware of this opportunity.

This 18-credit program is a fully accredited graduate program taught within the School of Medicine at USU and takes a minimum of 18 months to complete. The program first launched in July 2016 with the initial class comprised of 15 students and first year enrolling 35. Since then, the program continues to grow with more than 120 students graduating from the program. There are currently 450 students who have enrolled and taken at least one course. As a growing international graduate educational consortium, the program continues to expand by increasing course offerings, class sizes, and adding additional staff to the program, but demand continues to outpace available spots. There are 180 new students enrolled for August 2020 and over 100 applicants on the waitlist for 2021. The global health program includes students and faculty from the United Kingdom, Australia, and Canada.

Brad Boetig, MD, MPH, Col, USAF, is Director of the USU Global Health Program. Dr. Boetig will speak at the 2020 AMSUS VIRTUAL Conference to promote the program. If you plan on attending, then I recommend reading his article published in Military Medicine, available at https://academic.oup.com/milmed/article/185/1-2/6/5673753. Dr. Boetig and USU plan on growing the program through partnerships with the war colleges, CDC, USAID, and Department of State.

With global health being a national security issue, I encourage officers to consider taking at least a course to learn about global health. Investigate this amazing opportunity, not only to continue your education, but to network with other uniformed officers, and grow personally and professionally.

For more information about the program, visit https://www.usuhs.edu/pmb/gh-distance-learning

Dr. Boetig presents on global health via distance learning.

Conference to promote the program. If you plan on attending, then I recommend reading his article published in Military Medicine, available at https://academic.oup.com/milmed/article/185/1-2/6/5673753. Dr. Boetig and USU plan on growing the program through partnerships with the war colleges, CDC, USAID, and Department of State.

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For more information about the program, visit https://www.usuhs.edu/pmb/gh-distance-learning
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New Mexico Commissioned Officers Support the HOSA State Leadership Conference

by LT Angela Kao, PharmD, BCPS & LT Samora Casimir, OTR/L, OTD(S)

On February 20-22, 2020, Commissioned Corps officers of the U.S. Public Health Service (USPHS) across the state of New Mexico participated in the annual Health Occupations Student of America (HOSA) State Leadership Conference in Albuquerque, NM. HOSA-Future Health Professionals is the only national student organization that exclusively serves secondary and post-secondary/collegiate students in pursuit of a career in the health professions. It is also an organization the Corps strives to support through professional mentorship to build the next generation of healthcare leaders.

Through a collaboration between the Rio Grande and the Four Corners Branches of the Commissioned Officers Association (COA), thirteen officers from various categories—including pharmacy, nursing, dental, and clinical/rehabilitation therapy—gathered to help judge a variety of specialty events and increase USPHS visibility through an outreach and recruitment table. Topics included health science, health professions, emergency preparedness, leadership, teamwork, and recognition. “This was a great event and an effective community outreach activity for PHS officers to show leadership,” reports LT Samora Casimir, an occupational therapist in the Indian Health Service (IHS). This was her first-time volunteering at a HOSA event. “It was an excellent chance to talk to graduating high school seniors about the Corps. We all worked well as a group, showed unity, and had a table of various PHS health professions material displayed for the students to take.”

For LT Angela Kao, a pharmacist in the IHS and the leader of the event, this was her third time volunteering at the NM HOSA State Leadership Conference. Initially, she was unfamiliar with HOSA and only discovered the organization after volunteering with them through her local Rio Grande COA branch. “The most rewarding thing that keeps me coming back to volunteer is being able to judge the events and witness the incredible knowledge these young people possess,” LT Kao states in awe. Over the years, LT Kao judged a myriad of events, including public health, first aid and cardiopulmonary resuscitation (CPR), pharmacy sciences, medical terminology, and emergency medical services. “The level of knowledge HOSA students have for their age is quite advanced,” says LT Kao. From a pharmacy perspective, knowing the required components of a prescription, validating a provider’s drug enforcement administration (DEA) number, and demonstrating hand hygiene and proper donning and doffing of personal protective equipment for aseptic technique are skills taught in professional school, yet high school and college students were evaluated on those skills. “I think I learned how to use an oropharyngeal airway just from judging the EMT event,” LT Kao quips. Officers who judged different HOSA events were equally impressed with the students and shared many of the same sentiments as LT Kao. Several officers hope to return next year to help judge and mentor these future health professionals.
Health Leader of the Year
CAPT (ret.) Gene Migliaccio

CAPT (ret.) Gene Migliaccio, DrPH, has made significant contributions to the field of public health as a practitioner and academic. He continues to support COA, most recently at the Second Career Workshop, and as former President of the PHS Commissioned Officers Foundation for the Advancement of Public Health.

CAPT Migliaccio is Professor and Associate Dean for Applied Public Health at the George Washington University Milken Institute School of Public Health. His portfolio consists of building global partnerships with organizations to support internships and practicums for over 2,100 students; overseeing community engagement programs serving special populations; directing the Doctor of Public Health program; and instructing both doctoral and masters students.

With over 35 years in the Senior Executive Service, USPHS, and U.S. Air Force Medical Service, he has experience supporting health programs in five federal departments, including the Department of Defense, Department of Health and Human Services, Department of Justice, Department of Homeland Security, and Department of Veterans Affairs. At HHS, CAPT Migliaccio led the Federal Occupational Health, the largest provider of occupational health services to the federal government and served more than 360 federal agencies reaching 1.8 million employees. At DHS, he directed 18 geographically dispersed ambulatory care clinics, over 200 inpatient beds, and a centralized managed care office. He also established a telemedicine program to include radiology, emergency medicine, and psychiatry, and reduced, via tele-radiology, tuberculosis identification from 3 days to 4 hours. At the VA, CAPT Migliaccio was selected as a team member to write VA’s Plan to Consolidate Community Care Programs requested by Congress. He also conceptualized and wrote an $80 billion contract called Community Care Network to provide access to care in the community for 20 million Veterans and helped to reduce the overall aged medical claims inventory by 75%.

Civilian Outstanding Support of the Commissioned Corps
John McCarroll & Carl Goldstein

Mr. John McCarroll and Mr. Carl Goldstein are recognized for two decades of efforts going above the call of duty to reestablish and perpetuate the utilization of PHS officers throughout the US Flag Territories and Freely Associated States of the US-affiliated Pacific Islands.

Beginning in 2000, Mr. McCarroll and Mr. Goldstein recognized an opportunity to restart the placement of PHS officers as part of the Environmental Protection Agency’s (EPA) Pacific Islands Program, where the provision of basic sanitation remains a fundamental and often unmet public health need. Their initial efforts in recruiting PHS officers resulted in significant public health impact to positively affect more than 280,000 US citizens and residents.

For the past two decades, PHS officers have served as highly visible and effective symbols of America’s commitment to the US-affiliated Pacific Islands. Though few, their work has contributed to numerous and even historic public health and sanitation successes, across a vast and underserved area. Mr. Goldstein and Mr. McCarroll have been the main drivers of these initiatives and have gone far beyond the call of duty to both establish the EPA-USPHS Pacific Islands officer program as it exists today, and to ensure it continues.

Retiree of the Year
CAPT (ret.) Leland Fairbanks

As president of Arizonans Concerned About Smoking, CAPT (ret.) Leland Fairbanks, MD, has been in support of the Surgeon General’s priority on tobacco cessation since 1977.

CPT Fairbanks, affectionately referred to as the “Old Country Doctor Grandpa,” has devoted his life to promoting public health and the fight against commercial tobacco use.

He and helped to implement the first smoke-free hospital in the nation, located on the Hopi/Navaho reservation. CAPT Fairbanks also worked as a national smoke-free hospital coordinator with Indian Health Service and the Surgeon General C. Everett Koop, MD.

Arizonans Concerned About Smoking has provided consultation and education to a number of tobacco control concerns, including: Best Practices a 100% Tobacco-Free Campus-Wide
policies including no e-cigarettes, campus-wide policies for health care facilities, no smoking in cars with children, smoke-free veteran's and fraternal posts/clubs, and tobacco 21 policy. This organization supports the current Surgeon General’s priority on addressing the electronic cigarette epidemic amongst the youth and educating on the dangers of e-cigarettes use and vaping.

CAPT Fairbanks volunteer roles include:
• Member of the Health Committee, East Valley (Arizona) for the National Association for the Advancement of Colored People
• Past member, Board of Directors, Native Health Incorporated Urban Community Health Clinics
• U.S. Trustee Representative, International Network Towards Smoke-Free Hospitals

Local Small COA Branch of the Year
Green Country COA

Located in Oklahoma, Green Country has transitioned itself from a dying branch to one with increased membership. The branch heightened its impact through renovated operations, expanded community involvement, collaborations with other COA branches, and advocacy for the interests of its members.

To increase membership by 27%, Green Country COA added video conferencing lines for meetings to increase engagement of officers in field clinics. The chapter developed a welcome packet, which highlights local resources and benefits to new or transferring officers.

Notable accomplishments for the past year include:
• Four presentations at area middle schools to educate students on the dangers of vaping and encourage tobacco cessation during the Great American Smoke-Out
• Participation in Wreaths Across America at a local cemetery
• Two food drives to support the local food bank
• Two 5K funs generating proceeds for local families in need
• An annual scholarship for a high school student pursuing a career in public health

Large Branch of the Year Aurora Borealis

Located in Anchorage, the Aurora Borealis COA has over 160 active duty and retired officer members, approximately 93% of the total officers in the area. The branch developed a process for updating their standard operating procedures and bylaws, all posted for members to see online. Aurora Borealis has nine standing subcommittees. Notable accomplishments for the past year include:
• Organizing volunteers for an annual community clean-up event
• Hosting the Oklahoma City Area Dining-Out for multiple COA branches
• Articles submitted to Frontline and local publications

Local Large COA Branch of the Year
Aurora Borealis

Located in Anchorage, the Aurora Borealis COA has over 160 active duty and retired officer members, approximately 93% of the total officers in the area. The branch developed a process for updating their standard operating procedures and bylaws, all posted for members to see online. Aurora Borealis has nine standing subcommittees. Notable accomplishments for the past year include:
• Initiating educational activities at monthly meetings
• Publishing eight articles in Frontline
• Hosting a promotion ceremony for 16 officers
• Coordinating the Abused Women’s Aid in Crisis annual gala called “Silent Nights, Starry Nights,” raising a total of $188,000 for the organization
• Hosting an annual bone marrow drive to increase the number of American Indian and Alaska Natives listed on the national donor register
• Hosting four events at the first Ronald McDonald House located on the Alaska Native Medical Center campus to serve healthy food and provide entertaining games and learning events for the children
• Assembling 200 Narcan kits for public distribution
• Conducting 14 PHS Athletic events with a total of 108 participants
• Coordinating four PACE events in the local community
Meet the PHS Mask Makers, Part II

CDR Melissa Laufenberg and LT Jasmine Cresanta, Nurses, Eloy, AZ

We made 85 masks for our ICE Health Service Corps staff. After making masks for PHS officers, we realized our civilian providers needed masks too. The facility was unable to order PPE due to shortages.

LC DR Chandra Preator, Therapist, Nome, Alaska

Since our rehabilitation outpatient department was shut down, I needed another way to assist and help the people we serve. I decided to help sew masks to contribute to Norton Sound Health Corporation (tribal IHS facility). I felt productive by sewing more than 80 masks for colleagues.

CDR Gayle Lundberg, Pharmacist, Phoenix, AZ

After initially sewing 50 masks for use in the IV room at Phoenix Indian Medical Center, I could see there was a much greater need. With donated cotton sheets, elastic, and other supplies, I spent my days off sewing 8-15 hours a day to make over 160 additional masks. My husband helped to cut material. We provided a mask for every member of the pharmacy staff.

CDR Jodi Sides, Nurse, Wasilla, Alaska

I am not a very experienced seamstress, so it was a lot of trial and error. Also, my kids cut the fabric. Spending that family time together helped us talk through a lot of the concerns they were having.

CAPT Janet Cliatt, Health Services Officer, Alexandria, VA

After my deployment, distancing and isolation were equal to prevention. When the guidance suggested that Americans wear a cloth face covering, I got to work. While preventing spread, masks assist with the psychological healing. Making them has kept my family healthy and together in one household. I donated over 200 masks to two senior care facilities in Puerto Rico, where they are in dire need.

CAPT Carolyn Oyster, EHO, Washington, DC

With extra cotton material around the house, I started making cloth face coverings in April. I planned to donate them to Ft. Belvoir’s community hospital. However, word got out near my home and soon, I was flooded with requests from neighbors, friends, and some Coast Guard shipmates. It turned into a fun activity and a great way to give back to my community.

Atlanta COA Volunteers

Our officers continue to proudly report to their duty stations and deploy into the field. ACOA has taken on efforts to help slow the spread of the disease by donating homemade cloth masks to members. After surveying members to gauge demand, six remarkable volunteers have sewn over 150 masks shipped to those in need.

CAPT Anita Pollard Grant, Woodbridge, Virginia

I made masks for fellow officers who were about to deploy. It is a task I enjoy, and I feel like I am contributing to the safety and health of my community. When others found out I was sewing, and they liked my pattern, I continued to create more for my colleagues and friends.

CAPT Dana Hayworth, Nurse, Oklahoma

The first versions I made were no-sew masks made from t-shirts and socks. They were for family and friends to wear in public. I have never been a seamstress and never will be. My mom has sewed for people her entire life. She gave me a machine to stitch the edges of my no-sew masks to make them more durable. I enjoy making these to share with others and promote ways to prevent transmission of COVID-19. It has turned into a hobby to pass the time.
Each year, the Physician Professional Advisory Committee (PPAC) recognizes medical students who have demonstrated outstanding contributions to the field of public health and the U.S. Public Health Service’s mission of protecting, promoting and advancing the health and safety of our Nation. The Excellence in Public Health Award conferred by the PPAC is presented to well-deserving graduating 4th year medical school students. This year, over 100 medical schools participated in this recognition including Harvard Medical School (HMS), from which Andrew Foley recently graduated.

Matriculating at HMS in 2015, Andrew quickly distinguished himself as a stellar student in such endeavors as his key role in the development of the Family Medicine Interest Group, outstanding performance during his elective rotation with the Indian Health Service in Shiprock, NM, internship at the not-for-profit community-based Commonwealth Care Alliance which serves a dual eligible (Medicaid/Medicare) patient population, as well as formalized professional development advancement in obtaining his MPH at the Harvard T.H. Chan School of Public Health.

Due to the impacts of COVID-19, the graduation ceremony was virtual, as was the HMS awards ceremony. The original plan was for Coast Guard Academy Medical Director and Harvard ‘94 graduate CAPT Esan Simon to drive from New London, CT, and present the award to Andrew in person. Going virtual through Zoom, however, allowed for family and friends to join in recognizing the talented and motivated new physicians for their numerous outstanding accomplishments. The ceremony was truly inspiring and impactful and enjoyed by all. With so many people working remotely and not able to attend large gatherings, a video was recorded to expand the recognition of Andrew’s award. You can view it online at: https://drive.google.com/file/d/13T2JsN8S5VfPQjCW_vORzmcNCnD0dyw/view

Many PHS Officers devote their time and energy to ensuring the successful execution of this annual. Special thanks to PHS Physician and Physical Medicine & Rehabilitation Specialist CDR Andrew Geller who is assigned to the Centers for Disease Control & Prevention in Atlanta, GA.

CAPT LaQuitha Mohair, Nurse, Texas

I have been quilting for the past 10 years and won blue ribbons for two of my quilts at the State Fair of Texas. I opened my mask making factory for family and friends and decided to pay it forward by helping postal workers. I would place five masks in my mailbox on Monday, Wednesday, and Friday, for several weeks until they had what they needed. I then made 70 masks for Louisiana’s Long-Term CareSurveyors.

COA thanks these officers and many others who have taken up sewing in response to the COVID-19 pandemic. We also thank CDR Pauline Linhart and CAPT Andrea Sharma for their contributions.

Correction

In Part I of the “Meet the PHS Mask Makers” series, we identified LCDR George Chow and LCDR Alexa Deptola as Engineers. LCDR Chow is an HSO and LCDR Deptola is an EHO.
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Lessons and Tips from a PHS Officer’s COVID-19 Deployment

by LCDR Yvon Yeo, PharmD

In early February of 2020, the deputy team leader of my deployment team, National Incident Support Team D (NIST-D), alerted us to the possibility of deployment in support of the COVID-19 Mission. February was NIST-D Team’s backup month to support NIST-E Team during their on-call month.

On Saturday, February 8, I received an email from my team leader late in the evening asking if I was available to leave on Monday. Alas, it was the weekend and I could not obtain full supervisory approval on such short notice. Two days later, I sought permission from my chain of command to deploy later that month and was granted approval. Back at my duty station, all my teammates were new in their positions, having come onboard in recent months. Thus, before my deployment, I prepared written transition plans (tip #1) for my new teammates on tasks to keep the unit functioning while I was away.

On Thursday, February 13, the deputy team leader informed me that I had a “99 percent chance” of deploying on Saturday for 14 days as the officer from the NIST-E Team was occupied working at Centers for Disease Control and Prevention (CDC). Since CDC has ongoing internal deployments, there was a strong likelihood that the primary officer would be unable to deploy with the United States Public Health Service Commissioned Corps. As I was on standby as a backup, I would be deployed should that officer be unable to deploy.

On Friday, I called EMG Travel to check my travel status and they confirmed I was on the travel roster. However, they had not booked my flight for the next day as they were still working on flights for officers departing that day. As soon as I got off the phone, I searched for flights from D.C. to Sacramento International Airport. I called EMG Travel to provide the flight numbers to them (tip #2) so they did not need to search for flights for me. I heaved a sigh of relief when I received my flight itinerary at 10 p.m. I packed my passport (tip #3) in case I was rerouted overseas and looked up my logins and passwords for the EMPortal and PARS-programs that I would be accessing in the Planning Section (tip #4) before going to bed.

On Saturday, February 15, I contacted the logistics team at Travis AFB to ask for specifics as to the time and place on base to report to. Fortunately, my travel itinerary included a rental car. I brought my cellphone car mount along (tip #5) and could mount my cell phone to use the navigation system. I also packed a USB cable to charge my cellphone in the car (tip #6).

During my first week, I served as the Resources Unit Leader. I assisted the Planning Section Chief in accounting for everyone on deployment at Travis AFB in California and in Hawaii. Using the Personnel Accounting Reporting System (PARS), I moved people from billeting (i.e., lodging) to on-site (i.e., Travis AFB) for those working the morning shift and vice versa for those working the overnight shift. This process was relatively easy in the beginning but became more complicated as the number of responders grew, spreading out over different lodging sites.

When new responders reported I checked them into PARS, and for those completing their deployments I demobilized them in PARS. It had been three years since I last used PARS, so I was quite unpracticed with the program. I had my notebook containing notes (tip #7) I took from a previous deployment. Fortunately, I had a good mentor, the Planning Section Chief, who retrained me on the program.

During my second week I served as the Planning Section Chief. In this role, I liaised with the Command Staff to update and revise the Incident Action Plan for each 24-hour operational period; facilitated the 0900 morning and 1730 evening briefs for all command and general staff; provided reports on behalf of the Planning Section during the 0730 Command Staff meetings; and completed the personnel counts to account for all staff on deployment for the Information Management Section, so that they could produce the sitrep for the HHS Secretary’s Operations Center.

I am forever grateful for this deployment experience and would like to thank my supervisors and teammates for their support.

Lessons and Tips from a PHS Officer’s COVID-19 Deployment
Obituary
CAPT Margaret Ann McCombs

COA member retired Captain Margaret Ann McCombs of Burlingame, California died at her home on May 4, 2020, at the age of 95. A daughter of the late Dwight and Nannie Gilmer Campbell, Captain McCombs was a native of Lebanon, Virginia. She graduated with a Bachelor of Science in Nursing from the Medical College of Virginia in 1947, and following graduation remained at the Medical College of Virginia as a nurse manager and faculty educator. In 1950, she continued her nursing career, teaching nursing students at Cincinnati General Hospital and nurses employed by the Visiting Nurses Association.

Captain McCombs joined the USPHS in 1955. Her first posting was as Head Nurse for the Outpatient Clinic in Cincinnati. Her 23 years of service in the USPHS ended with her retirement in 1978, with a final assignment as Director of Nursing at the USPHS Hospital at the Presidio in San Francisco, California. She was married for 41 years to the late James McCombs and had two children, Patricia and Dwight. Private services were held at Chapel of the Highlands in Millbrae with interment at Skylawn Memorial Park, San Mateo.

Obituary
RADM Jerome Green

Lifelong COA member RADM (Ret.) Jerome “Jerry” George Green, M.D., and his wife of 68 years, Dr. Marie Green (nee Röder), passed away two weeks apart in May 2020 following complications from COVID-19. They lived in Chevy Chase, Maryland. Admiral Green was born in New York City in 1929, to Esther Deiber Green and Sam Green (born Greenberg), Jewish refugees from programs in Poland and forced conscription in Russia, respectively. Admiral Green’s unshakable commitment to the public good led to a 40-year career in the Public Health Service (PHS). Assigned to the San Francisco PHS Hospital for his medical residency, his duties included weekly visits to Alcatraz Federal Penitentiary to care for the inmates. In 1960, the family relocated to Ohio, where Admiral Green joined the Research Division of the Cleveland Clinic. The family moved to Bethesda in 1965, where he served as an Associate Director and a Division Director at the National Heart, Lung and Blood Institute at NIH. For nine years before retiring in 1995, Admiral Green was the Director of the NIH Division of Research Grants, in charge of allocating all NIH funding to external research partners. A cardiologist, he attained the rank of Rear Admiral and Assistant Surgeon General in the PHS, conferred by Surgeon General C. Everett Koop, and was recognized with numerous awards for distinguished service. Admiral and Mrs. Green are survived by their children Karen Green (Bob Yetvin) of Chevy Chase, Maryland, and Paul Green (Avivah Goldman) of Arlington, Massachusetts.

Doctor Marie Green also lived her adult life in public service. Born in Vienna, Austria in 1929, she found safety in the United States where she received a full Regents Scholarship to Cornell University which she turned down because the family could not afford room and board. Instead, she lived at home while attending Brooklyn College. Attaining her Ph.D. directly after college, Marie was an exceptionally rare 1950’s female career scientist. She was a laboratory researcher at the Case Institute of Technology in Cleveland, OH; the Armed Forces Institute of Pathology in Washington, DC; and the National Cancer Institute at the National Institutes of Health (NIH) in Bethesda, MD.

Admiral and Dr. Green both believed passionately in human and civil rights. Contributions to causes they supported are welcomed, including HIAS, Doctors Without Borders, Southern Poverty Law Center, ACLU and Physicians for Social Responsibility. No observances are presently planned.
Obituary

CAPT Truman Lynn McCasland

Captain Truman Lynn McCasland “Mac,” age 83, of Wilmington, NC, died at his home on May 12, 2020. He was born on May 15, 1936 in Gary, Indiana, the son of Truman Elisha McCasland and Virginia Lee Cannon McCasland. After his graduation from Portage High School in 1954, Mac served in the Navy until 1958 as a Corpsman at Great Lakes Naval Hospital and then with the Sixth Marines at Camp Lejeune, NC. Upon discharge, he returned to Gary and worked as an operating room technician at Methodist Hospital. Through evening classes, Mac earned a Bachelor of Science degree in Environmental Health at Indiana University Extension and went on to earn a Master of Public Health degree from UNC Chapel Hill. He accepted a commission in the US Public Health Service and was immediately appointed Chief of Environmental Health and Biomedical Engineering for the PHS Hospital System in Washington, DC.

After two years, Mac was selected for a residency training program at Tulane University in Institutional Environmental Health, from which he was awarded a Doctorate in Public Health. Mac spent over twenty years as a Commissioned Officer in positions including Director of Refugee Health during the Cuban refugee crisis of 1980, Director of the PHS Hospital in San Francisco, Deputy Director of the National Hansen’s Disease Program and the first Director of the Childhood Injury Compensation Program.

Mac and his wife Kathleen retired to Wilmington, NC, where he began teaching at Webster University at Camp Lejeune in a master’s program and served as the university’s faculty advisor for many years. He enjoyed traveling, gardening, woodworking, cooking, and singing. He leaves behind his wife of 43 years, Kathleen McCasland and five sons. Jeff (Sharon) and Dave (Rebecca) live in the DC area, Tom (Susie) in Houston and Truman Clark (J Lauren) and Michael (Maayan) in Brooklyn, NY. Grandchildren include Christopher (Tiffany), Ashley (David), Jacob, Annabel, Susannah, Ethan, and great grandchild Brooks. His sister Cheryl (Jimmy) Hinds and niece, Becky Hinds, are from Tulsa, OK. Mac is predeceased by his parents and brothers Terry and Charles. Mac is remembered as a devoted husband, father, grandfather, and friend who always knew what to say and do to make someone feel better.

Please share condolences and memories with family by visiting https://www.wilmingtoncares.com/obituary/.

Obituary

RADM George Arthur Reich

Rear Admiral George A. Reich, born January 18, 1933, passed away on June 25, 2020. Born in Los Angeles to George Miller Reich and Esther Elizabeth Reich (nee Richards), he grew up in Polk County, Florida and in Burbank, California. He received a Bachelor of Science (BS) degree in Chemistry from the University of Florida, a Doctor of Medicine (MD) degree from the University of Iowa, and a Master in Public Health (MSN) from the University of North Carolina. Most of his professional career was with the U.S. Public Health Service Commissioned Corps, entering active duty service on June 4, 1962. At the time of his retirement he had obtained the rank of Rear Admiral (upper half) and served as the Assistant Surgeon General. RADM Reich was a diplomat of the American Board of Preventive Medicine and was a member of many professional societies including the Military Officers Association of America, the American Medical Association, the Florida Medical Association, and the Commissioned Officers Association, having joined in 1965. He received many awards and honors including the Distinguished Service Medal of the U.S. Public Health Service and the Surgeon General’s Exemplary Service Medal. He was preceded in death by his wife of 58 years, Elizabeth Ann Reich, and leaves behind seven children; 13 grandchildren and 2 great grandchildren.
opportunity to connect, network and learn at the Commissioned Officers Foundation’s annual symposium. We’ll be back in 2021 which will be COA’s 70th anniversary! Please take a moment to “Save the Date” now by putting June 21-24, 2021 on your calendar.

Last month we received an inquiry from a member who asked about the possibility of PHS officers participating in a Flexible Spending Account (FSA) program. We rely on inquiries like this because it tells us what’s on your mind and what we might advocate for on your behalf. While we discovered that Tricare beneficiaries are ineligible to participate in FSAs, we also discovered that this has been an ongoing request by the armed services for over a decade. We promise to keep that conversation going and focused on the uniformed services, and in the meantime, we have asked for an amendment to a current bill in the House which would allow participation in an FSA for spouses of uniformed officers. If you’re like me and enjoy tracking the progress of legislation, follow the bill at www.congress.gov by searching for “H.R. 5876.”

Sometimes we must choose to play the long game.

Another opportunity we had to advocate on your behalf was an issue also brought forward by a COA member. The National Council on State Boards of Nursing (NCSBN) was soliciting public comment on a proposed change to the nurse licensure compact proposed rule. The terms “federal nurses” and “military nurses” were used which could unintentionally exclude active duty nurses in the Commissioned Corps. We asked for an administrative change to the wording so that nurses serving on active duty in the U.S. Public Health Service (USPHS), and their spouses, be eligible for federal compact licensure. As federal compact licensure becomes more popular, this is important for many categories, not just nursing. Please keep the questions and issues coming!

In closing, I want to wish each of you, whether active duty or retired, a Happy 222nd Birthday as you celebrate the birth of the U.S. Public Health Service. It was on July 16, 1798 that President John Adams signed into law an Act for the Relief of Sick and Disabled Seamen. A year later Congress extended the provisions of this act to sailors and officers in the U.S. Navy. Marine Hospitals were established all over the country as a result of these laws, and from this modest beginning grew today’s Commissioned Corps of nearly 6500 uniformed officers.

The United States is the envy of the world for having a uniformed corps of officers who can be dispatched to fight disease anywhere. You deploy with a few hours’ notice and go to places others stay away from. You mostly operate without public recognition, displaying ultimate professionalism and dedication in the silent war against disease. I want to personally thank my colleagues at the Military Officers Association of America (MOAA), author Todd South and COA member RADM (retired) Clare Helminiak, for acknowledging this in their excellent articles “Prepared for Anything” and “From the Front Lines” in the June edition of MOAA’s magazine “Military Officer.” If you haven’t seen it, you owe it to yourself to check out the front cover, read the articles and enjoy the photos.

Your legacy is great; your accomplishments are many; your value to the country and the world are undeniable. These threats, like others you have faced in the past, will be overcome, and the Commissioned Corps will celebrate many birthdays to come. Happy 222nd birthday to each of you!
PHS Commissioned Officers Foundation
Donations Received, May 1, 2020 to June 30, 2020

**Silver ($250)**
- RADM James Graham
- Ms. Lashoun Payne ^
- Ms. Leanna VanKeuren ^

**Bronze ($100)**
- Dr. Maria Benke ^
- CAPT Delwin Buckhold
- CAPT Andrew Chen
- Ms. Kelsey Gordon ^
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**Friends (Under $100)**
- CAPT Keith Adcock ^

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**We Welcome New Members of COA,**
**May 1, 2020 to June 30, 2020**

- LT Douglas Cordel
- CAPT Christine Curtis
- Ms. Holly Daverin

- LCDR Matthew Ellis
- CAPT Carol Goodin
- LT Brian McAleney
- LCDR Donna Rachuba

- CDR John Sammons
- LT David Vieth
- LT Alati Wasson

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**COA Donations**

- CAPT Ruben Acuna
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- CAPT Robert Mork

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- CAPT Betty Rufus
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- CAPT David Taylor

^ C. Everett Koop Living Legacy Fund
All other donations were made to the COF General Fund