



**DEPARTMENT OF THE ARMY
CHIEF OF STAFF, ARMY RETIRED SOLDIER COUNCIL
OFFICE OF THE DEPUTY CHIEF OF STAFF G-1
300 ARMY PENTAGON
WASHINGTON, DC 20310-0300**

DAPE-MPL-RS

27 April 2018

MEMORANDUM FOR CHIEF OF STAFF, ARMY

SUBJECT: Annual Report of the Chief of Staff, Army Retired Soldier Council

1. The fifty-eighth meeting of the Chief of Staff, Army Retired Soldier Council (CSARSC) was held at the Pentagon from 22 to 27 April 2018. The Council is established in accordance with Army Regulation 600-8-7, "*Retirement Services Program*" and is administered in accordance with its charter, which is approved by the Secretary of the Army. The 14-member Council possesses 410 years of military experience and an additional 141 years of continued service as a Retired Soldier. The Council is your voice of 1.2 million Retired Soldiers and surviving spouses, and as such, reviewed 19 issues nominated by Installation Retiree Councils. Those issues are discussed in detail in the attached Installation Report. The Council extends its gratitude to you and Sergeant Major of the Army Dailey for your consistent support of the Retired Soldier Council.

2. The Council firmly supports the Soldier for Life (SFL) program as one that must be appropriately resourced and sustained to safeguard our Army's readiness. A critical component of growing and sustaining the SFL mindset is the Army's ability to ensure a Retired Soldier finds a place for him or herself in today's Army. Presently, once a Soldier retires, his/her ability to remain connected with the Army community is challenged. Our Council created an informal email distribution list from the CSARSC to Installation Retiree Council Co-Chairs to get that word out, but we need a more complete, systematic tool to communicate with all Retired Soldiers by email. The Army Public Affairs Office's delivery of Army messaging to us is greatly appreciated. However, to enlist and arm our Retired Soldiers to be the Voice of the Army and support USAREC's operational mission to inspire others to serve, the Army needs to be able to share this information across the entire retired population. Currently, our messaging to Retired Soldiers through Installation Retiree Councils reaches only a fraction of our Retired population. Since we no longer have Army Knowledge Online email, we need Army leadership support in gaining access to a complete listing of email addresses. Last year, after the Council submitted a request for access to email addresses managed by DMDC, security was identified as a concern. We have verified that privacy is actually not an issue and are working with DMDC to move this action forward. We respectfully request that you direct the Army staff to advocate support for this expanded access with DoD.

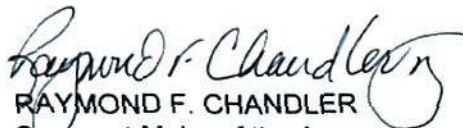
3. The Retired Soldier Community continues to express concern for the loss of their *deferred compensation* (earned benefits). There are provisions of the 2017 NDAA, and

in on-going legislation that, when looked at in their entirety, further erode key benefits and entitlements. One example is the change to TRICARE Select. While this change impacts the entire force, the increased premiums and cost share amounts uniquely impact our Retired Soldiers who earned the entitlement to medical care through their service to our country... especially our enlisted ranks and junior officers. Increased pharmacy charges are another way earned benefits have been degraded. Medical benefits, specifically those benefits intended for our military, are the most often targeted to provide cost savings while entitlement programs for other groups, such as Medicare and Medicaid, are not. We urge the Army's senior leadership to implore Congress to limit healthcare cost increases to less than or equal to cost of living adjustments.

4. The Council appreciates the new energy and focus within Defense Commissary Agency (DeCA) to improve their business practices in order to preserve this earned benefit and savings for patrons. However, we are concerned that combining the Exchanges and Commissaries to allow funding to flow from one entity to the other will seriously threaten MWR dividend payments to military communities.

5. We extend our thanks and appreciation for the outstanding support and assistance provided by Mr. Mark Overberg, Ms. Maria Bentinck and the Army Retirement Services staff for their work throughout the year supporting our Retired Soldiers, their Families, and this Council. We also extend our thanks and appreciation to the entire group of distinguished guest speakers listed at Enclosure 1 for the invaluable information and insight they provided.

6. As this is my last year as the officer Co-Chair of the Council, I wish to say thank you for the opportunity to continue to serve...It has been my privilege. This Council serves a great purpose. Your support in carrying their voices and concerns is sincerely appreciated.


RAYMOND F. CHANDLER
Sergeant Major of the Army
U.S. Army, Retired
Co-Chairman


JAMES J. LOVELACE, JR.
Lieutenant General
U.S. Army, Retired
Co-Chairman

Enclosures

1. Guest Speakers
2. Council Members
3. Ongoing Issues
4. CSA Retired Soldier Council Installation Report

GUEST SPEAKERS

General James McConville, Vice Chief of Staff, United States Army

Lieutenant General Gwendolyn Bingham, Assistant Chief of Staff for Installation Management

Lieutenant General Nadja Y. West, The Surgeon General,

Mr. Roy Wallace, Assistant Deputy Chief of Staff, G-1, United States Army

United States Sergeant Major of the Army Daniel A. Dailey, Sergeant Major of the Army

Sergeant Major of the Army (Ret) Kenneth Preston, VP, NCO and Soldier Programs, Association of the United States Army

Major General Sean Jenkins, Deputy Commanding General, U.S. Army Installation Management Command

Major General Glenn A. Bramhall, Acting Deputy Director, Army National Guard

Major General Jason T. Evans, Commanding General U.S. Army Human Resources Command

Major General Lewis Irwin, Deputy Chief, Army Reserve and OCAR Chief of Staff

Mr. Robert J. Bianchi, Director and Executive Officer, Defense Commissary Agency

Brigadier General Omar Jones, Chief of Public Affairs

Brigadier General Douglas A. Sims, II, Director, Operations, Readiness and Mobilization, Deputy Chief of Staff, G-3/5/7, United States Army

Brigadier General Kevin Vereen, Deputy Commanding General Operations, U.S. Army Recruiting Command

Colonel (Ret) Mike Barron, Director, Government Relations, MOAA

Captain Edward D. Simmer, USN, Deputy Director TRICARE Health Plan

Colonel Sam Whitehurst, Director, Soldier for Life Program

Command Sergeant Major John F. Sampa, Command Sergeant Major of the Army National Guard

Command Sergeant Major (Ret) Frank Yoakum, Enlisted Association of the National Guard

Mr. Mark Overberg, Director, Army Retirement Services

Mr. Roland Wadge, DFAS Retired Pay Director

**2018 CHIEF OF STAFF, ARMY RETIRED SOLDIER COUNCIL ROSTER
CURRENT MEMBERS**

<u><i>NAME</i></u>	<u><i>IMCOM REGION</i></u>	<u><i>INSTALLATION</i></u>
<u>Co-Chairmen:</u>		
LTG James J. Lovelace	At-Large	At-Large
SMA Raymond F. Chandler	At-Large	At-Large
<u>Members:</u>		
MG Robert J. Kasulke	ID Readiness	Fort Drum, NY
COL Lenore Enzel	ID Readiness	Fort Bliss, TX
COL Many-Beans Grinder	ID Readiness	Fort Campbell, KY
COL Charles N. Posehn	ASA JBSA	JB San Antonio, TX
LTC David V. Fulton	Europe	HQ, USAREUR
CW5 David A. Ratliff	ID Training	Fort Jackson, SC
CSM Divina B. Bobb	ID Readiness	Fort Hood, TX
CSM William Grant	ID Training	Ft. Benning, GA
CSM Sandra Matlock-Williams	ID Sustainment	Ft. Meade, MD
CSM Ralph Rusch	Korea	Yongsan, Korea
CSM Tommy Williams	ID Readiness	Fort Stewart, GA
MSG Miguel D. J. Padilla	ID Readiness	Fort Lewis, WA

ONGOING ISSUES
**The CSARSC Continues to Work these Issues in Support of Retired Soldiers
and their Family Members**

1. Continue to support the ongoing efforts between the Department of Defense and the Department of Veterans Affairs to improve the compatibility of the two health care systems to preserve and improve the benefits for all beneficiary groups.
2. Support efforts to provide full concurrent receipt of military retired pay and disability compensation to all eligible military retirees regardless of disability rating or years of service. Additionally support efforts to provide concurrent receipt of both DIC and SBP to surviving spouses.
3. Support the DFAS initiative to forgive any overpayment of retired pay for any period after the date of death of a Retiree through the last day of the month in which death occurs.
4. Support a test program under which Retired Soldiers who are supported by APOs in Germany be allowed to send and receive parcels weighing up to 5 pounds, for the purpose of quantifying impacts. The three Service Retiree Councils have repeatedly supported a test program and senior leaders in Europe (USAREUR and USEUCOM) and Korea (USFK) have requested the amendment of Military Postal System (MPS) rules to authorize mail privileges for Box R (military retirees) for parcels up to 5 pounds. However, OSD has disapproved those requests citing assumed increases in cost and workload. This issue remains the top quality of life issue, after health care, for military retirees residing in Europe and the Pacific.
5. Support the recommendation for issuance of permanent IDs for spouses and surviving spouses IAW the June 2012 Joint Uniformed Services Personnel Advisory Committee recommendation to OSD allowing Retired Soldiers' spouses and surviving spouses to obtain permanent ID cards at age sixty-five if they purchase Medicare Part B. This was addressed in our 2013 Memorandum to the CSA. Although we considered the comments submitted, in 2014 by HRC, we non-concur and remain firm in our 2013 position which said: "Acknowledge spouses' long-term commitment to the Army by issuing them an indefinite ID card at age 65. We request HRC provides any metrics or other data that justifies maintaining the age for a permanent ID card at 75. Otherwise, recommend action immediately be taken to reduce the age to 65 in recognition of the long term commitment of our spouses and to send the clear message that, like their Soldiers, their association with the Army is for life.
6. Support the authorization of Space A travel for Surviving Spouses of Retired Service Members. The CSARC, annually since 2008, recommended approval of a change to this policy. We continue to strongly believe that the execution of this initiative will acknowledge a spouses' long-term commitment to our Army at a very small price given that their priority will only allow them to fly when there are empty seats available on flights. This will send a strong message that our surviving spouses' support of the Army will not be forgotten after the death of their Soldier and that their association with the Army, like their Soldier's, is for life.

7. Continue to oppose the imposition of any fees on the TRICARE for Life beneficiaries. Additionally, the current fee structure for TRICARE Select should be maintained at the current levels. Any necessary increases should be limited to the most recent COLA. Support the recommendation to rectify the disparity in the National Guard and Army Reserve early retirement by making the original NDAA legislation (signed on 28 January 2008) and subsequent change retroactive to September 11, 2001.

ISSUE: 2018-01-01

INSTALLATION/GARRISON/ASCC Council: 8th Army Retiree Council, Korea

SUBJECT: TRICARE not paying for skilled nursing care while admitted to Korean hospitals.

DISCUSSION:

The US standard for inpatient care is that nurses / nurses' aides provide bedside care for patients while admitted to a hospital (aka skilled nursing). In Korea however, according to country policy and custom, the family is expected to provide bedside level of care including dressing, feeding, assistance to bathroom, changing bedding, personal hygiene, etc. This places our American service members, veterans and families at high risk and possible extreme danger especially for a patient who is aged or has physical (mobility or communication) or mental challenges, coupled with the family's lack of physical stamina or medical training in patient care or Korean customs.

To mitigate this situation, many Korean Medical Centers offer special bedside (skilled nursing) care at an additional cost that is NOT covered by TRICARE. As such, our patients are unjustly expected to pay high out-of-pocket expenses for normal care received in the USA but not overseas. In the United States, hospital regulations require that skilled nursing care is provided to protect the hospital, patient and aid in recovery. Here in Korea, this is not the case and has resulted in instances where elderly men and women have actually been injured from their elderly spouse trying to move them for hygiene or care needs. Such injuries cause further suffering and prolong in-patient stay that ultimately costs our Army and TRICARE heighten fees.

Korea currently has approximately 2,000 retirees. However, this also affects the active duty population and their families. Most international health insurance plans cover thus cost, however TRICARE Overseas does not.

RECOMMENDATION:

TRICARE to include bedside care in overseas healthcare facilities as a covered / reimbursable cost commensurate with beneficiaries in CONUS receiving the same basic level of care.

**APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (USA, Ret) Wayne Clark, Co-Chairman 8 Army Retiree Council, Korea
SGM (Ret) Malcom Wolfe, Co-Chairman EUSA Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan Area II Retiree Council, Korea
WO2 (USA, Ret) Giac Ly, Chairman Area III Retiree Council, Korea

Encl 4

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council recommends that in keeping with the civilian retail pharmacy industry standard, the Army Surgeon General create a policy to eliminate this barrier when the prescription is visible in the electronic health record. The Council was advised that refill prescriptions can be dispensed between pharmacies once communication from the Pharmacist at the home MTF is made with the Pharmacist at the MTF where the beneficiary is seeking assistance. As this takes time, we recommend that coordination be done prior to travel whenever possible until this issue is remedied.

ISSUE: 2018-01-02

INSTALLATION/GARRISON/ASCC Council: 8th Army Retiree Council, Korea

SUBJECT: Prescription Refills

DISCUSSION: Retirees who travel internationally (or within CONUS) or have two domiciles (CONUS and OCONUS) are unable to get prescription refills from military treatment facilities without changing their TRICARE enrollment location. If a retiree is traveling and goes to another military treatment facility they are unable to get a prescription refill. The military treatment facilities is able to see the prescription in their medical system, but will not fill the prescription unless they transfer their TRICARE enrollment to that hospital and see a physician. Anywhere else in the US anyone can go to any pharmacy and get a valid prescription refilled. However TRICARE restricts the ability to obtain a refill to only the MTF where it was prescribed. TRICARE is one of the largest medical providers providing care and medications worldwide, but refuses to provide worldwide access to medication.

RECOMMENDATION: Military treatment facilities need to refill existing prescriptions worldwide regardless of where it was prescribed.

**APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (USA, Ret) Wayne Clark, Co-Chairman 8 Army Retiree Council, Korea
SGM (Ret) Malcom Wolfe, Co-Chairman EUSA Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan Area II Retiree Council, Korea
WO2 (USA, Ret) Giac Ly, Chairman Area III Retiree Council, Korea

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council recommends that in keeping with the civilian retail pharmacy industry standard, the Army Surgeon General create a policy to eliminate this barrier when the prescription is visible in the electronic health record. The Council was advised that refill prescriptions can be dispensed between pharmacies once communication from the pharmacist at the home MTF is made with the pharmacist at the MTF where the beneficiary is seeking assistance. As this takes time, we recommend that coordination be done prior to travel whenever possible until this issue is remedied.

ISSUE: 2018-01-03

INSTALLATION/GARRISON/ASCC Council: 8th Army Retiree Council, Korea

SUBJECT: Overseas Handicap Parking Placards

DISCUSSION: Retirees who reside overseas and are handicap have difficulty receiving handicap parking placards from their respective countries if their primary care is received by a military treatment facility. Military treatment facilities overseas are unwilling (or unable) to produce the paperwork required to obtain the foreign handicap parking placards. The problem appears to be two fold. First the overseas military treatment facilities are not educated in what documents are required. Foreign forms should not be an issue since the overseas military treatment facilities employ numerous foreign medical specialists in the military hospital. Secondly, local hospitals are often hesitant to produce the required paperwork since they are not familiar with the patient since their primary care is provided by the military treatment facility.

RECOMMENDATION: Military treatment facilities either become familiar with and produce the required documents for retirees overseas to obtain a handicap placard or coordinate with TRICARE contract hospitals to produce the paperwork required.

**APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (USA, Ret) Wayne Clark, Co-Chairman 8 Army Retiree Council, Korea
SGM (Ret) Malcom Wolfe, Co-Chairman EUSA Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan Area II Retiree Council, Korea
WO2 (USA, Ret) Giac Ly, Chairman Area III Retiree Council, Korea

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council recommends that the Office of The Surgeon General develop and disseminate clear guidance regarding processing handicapped placards at overseas MTFs. Additionally, we recommend that beneficiaries have their treating physician include the request for a handicapped placard in the discharge instructions or clinical note so it can be taken to the MTF and placed on the proper form for processing by Vehicle Registration.

ISSUE: 2018-01-04

INSTALLATION/GARRISON/ASCC Council: 8th Army Retiree Council, Korea

SUBJECT: TRICARE World Wide Accessible Care

DISCUSSION: Retirees who travel internationally (or within CONUS) or have two domiciles (CONUS and OCONUS) are unable to obtain medical care from a military treatment facilities without changing their TRICARE enrollment location. If a retiree is traveling or has two domiciles they are unable to receive care outside of their very limited primary care facility. Military treatment facilities are able to see the patients' medical history since all medical records are now digital, but will refuse to treat a patient without being enrolled in their discrete area. Anywhere else in the US anyone can go to practically any medical facility and receive medical care (e.g., CIGNA, Kaiser Permanente, etc.). However TRICARE restricts the ability for patients to obtain medical care in multiple locations within the TRICARE system. This is becoming more important as many retirees are not seeking the traditional retirement of staying in one location until they die. More active retirees are choosing to travel and have two domiciles where they split their time, foreign and domestic.

RECOMMENDATION: Military treatment facilities need to be able to see TRICARE recipients across the entire TRICARE network worldwide without limiting their care to one discrete and limited location realizing that today's retirees are not physically limiting their retirement location to one geographic area.

**APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (USA, Ret) Wayne Clark, Co-Chairman 8 Army Retiree Council, Korea
SGM (Ret) Malcom Wolfe, Co-Chairman EUSA Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan Area II Retiree Council, Korea
WO2 (USA, Ret) Giac Ly, Chairman Area III Retiree Council, Korea

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council recommends that the Office of the Army Surgeon General work with TRICARE to assure seamless health care delivery no matter where the beneficiary may be located as long as they have care documented in the electronic health record. Additionally, we recommend that beneficiaries are advised of the best TRICARE Program to meet their needs if they frequently travel between domiciles. Until this is accomplished, we recommend that, whenever possible, care coordination be done prior to travel.

ISSUE: 2018-01-05

COUNCIL: Fort Drum, NY Retiree Council

SUBJECT: Communicating Tricare Change to the Retiree Community

DISCUSSION: The retiree community requires accurate and timely information on the upcoming TRICARE Select preferred-provider network option in order to make informed healthcare decisions.

Information provided to this council to date via DAPE-MPL-RS Information Paper: Fiscal year 2017 National Defense Authorization Act Impact on Retired Soldiers, their dependents and Survivors, dated 28 Feb 17; HQDA Retirement Services Office Pre-Retirement Power Point Presentation, dated Apr 17; TRICARE Briefing, dated 12 Sep 17; and the TRICARE website has been different and confusing.

Implementation is scheduled for 1 Oct 17, yet no accurate data is available to retirees or their family members.

Information is lacking in many areas, some of which are as follows:

- Potential annual enrollment costs;
- Potential exception to annual enrollment fees;
- Identified retiree populations to be grandfathered under zero annual enrollment fees;
- Policies and procedures defining the mechanisms in which a beneficiary is proposed to enroll annually, particularly those mechanisms for beneficiaries, who do not use current technologies;
- Communicating difference in enrollment assumptions. i.e., current system assumes beneficiary is enrolled; new system requires annual enrollment;
- Future eligibility for those beneficiaries, who initially opt out;
- Established 'grace' periods for beneficiaries, who unknowingly lose coverage due to extenuating circumstances that would deny them the ability to learn of TRICARE changes;
- Future implications to TRICARE for Life.

RECOMMENDATION: Distribute DoD information packets to all retirees and annuitants, similar to the MEDICARE annual information book. Additionally, use all available communication outlets to disseminate timely and accurate TRICARE changes, as this information requires some beneficiaries to make decisions that have significant financial impact.

APPROVED BY GARRISON RETIREE COUNCIL CHAIRPERSON(S):

MG (Ret) Robert Kasulke, Co-Chairman, Ft. Drum, NY Retiree Council

CMSgt (Ret) Patrick R. Rourk, Co-Chairman, Ft. Drum, NY Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council acknowledges that beneficiaries received letters concerning TRICARE Select changes. However, communication of these changes was not comprehensive. Given the simultaneous changes in the number of TRICARE Regions coupled with the change in Managed Care Support Contractors, the Council believes beneficiaries should receive a more detailed explanation of the changes. Additionally, like Medicare and the VA do, the Council believes that TRICARE should create and disseminate an annual information booklet to keep beneficiaries updated on changes from the prior enrollment period. Furthermore, the Council recommends that Retiree Councils invite a representative from the Managed Care Support Contractor and a representative from the MTF to discuss the recent TRICARE changes. Lastly, the Council recommends the local Retired Soldier Council keep in touch with their MSOs/VSOs who often have the most updated information about TRICARE changes.

ISSUE: 2018-01-06

COUNCIL: Fort Drum, NY Retiree Council

SUBJECT: Future Tricare Costs for Retirees, Retiree Families and Surviving Spouses
(excluding TFL)

DISCUSSION: TRICARE Select fee schedule should offer a variety of enrollment and benefit options.

RECOMMENDATIONS:

- Include option of \$0 annual enrollment fee, which may include higher deductibles;
- Automatically enroll beneficiaries into the \$0 annual enrollment cost option, who have failed to enroll in any TRICARE option;
- Automatically reenroll beneficiaries annually based on their previous year enrollment option;
- Stipulate qualifying conditions for changes in enrollment based on significant life events, such as death, marriage, loss of employment etc.
- Identify electronic and non-electronic means for enrollment

APPROVED BY GARRISON RETIREE COUNCIL CHAIRPERSON(S):

MG (Ret) Robert Kasulke, Co-Chairman, Ft. Drum, NY Retiree Council

CMSgt (Ret) Patrick R. Rourk, Co-Chairman, Ft. Drum, NY Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council questions the rationale behind not processing annual automatic re-enrollments for TRICARE Select as is done for TRICARE Prime. The Council recommends timely automatic TRICARE Select annual re-enrollment based on the previous year's enrollment to prevent a lapse/cancellation of coverage. We further recommend that both electronic and non-electronic enrollment/re-enrollment options be available to beneficiaries. (The current fee structure was mandated in the NDAA 2017.)

ISSUE: 2018-01-07

COUNCIL: Fort Drum, NY Retiree Council

SUBJECT: Future TRICARE Costs Effects on Tricare for Life Beneficiaries

DISCUSSION: TRICARE for Life is an optional, supplemental insurance for retirees and their spouse once they reach the age of 65. To be eligible for TRICARE for LIFE, a retiree/spouse must enroll in MEDICARE Part A and purchase MEDICARE Part B. TRICARE for Life costs are offset by MEDICARE Part B, which costs the retiree and spouse a minimum of \$150 per month for each family member, depending on the family income. Therefore an additional TRICARE for LIFE enrollment fee, above and beyond the MEDICARE Part B costs, would create an unfair financial burden for retired military families. Additionally, the upcoming TRICARE Select preferred-provider network option should in no way impact TRICARE for Life beneficiaries financially. Any additional TRICARE premiums have already been paid through honorable service in defense of the United States of America. TRICARE services is an earned benefit, not an entitlement.

RECOMMENDATION: Oppose any future suggested fees for TRICARE for Life Beneficiaries and ensure annual enrollment remains automated.

APPROVED BY GARRISON RETIREE COUNCIL CHAIRPERSON(S):

MG (Ret) Robert Kasulke, Co-Chairman, Ft. Drum, NY Retiree Council

CMSgt (Ret) Patrick R. Rourk, Co-Chairman, Ft. Drum, NY Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council was advised that there is no proposed legislation to initiate fees for TRICARE for Life. The Council opposes any TRICARE for Life (TFL) fees in the future as TFL is earned deferred compensation. TFL beneficiaries already must pay monthly income based fees for Medicare Part B (\$134-\$428.60).

ISSUE: 2018-01-08

COUNCIL: Fort Knox, KY Retiree Council

SUBJECT: Hearing Aids for Retired Soldiers and their dependents

DISCUSSION: A provision in the 2016 National Defense Authorization Act gave DoD permission to provide hearing aids at government cost to dependents of Retired Soldiers, under the Retirees At-Cost Hearing Aid Program (RACHAP). Prior to this addition, only Retired Soldiers themselves were eligible.

The problem to date is that military treatment facilities (MTF) are not mandated to support this addition to RACHAP. Some MTF are not even aware of the change. Currently the capacity at MTF is limited and active duty personnel are MTF priority patients. The MTF will schedule appointments with dependents and Retired Soldiers only as their schedules permit. A majority of MTF are unable to provide this service due to manpower issues.

The way this program has been implemented does not appear to support the intent provided for in the 2016 NDA Act. In fact, under the original RACHAP, Retired Soldiers have a hard time being seen. The approach to the support given to RACHAP needs to be reviewed and corrected.

RECOMMENDATION: Chief of Staff of the Army directs all MTF to recognize this program and support it. DoD should provide the necessary funding to meet the increased manpower issues. A program can only be successful if it is implemented properly.

APPROVED BY INSTALLATION RETIREE COUNCIL CHAIRPERSON(S):

BG (Ret) Charles D. Estes, Chairperson, Fort Knox, KY Retiree Council

CSM (Ret) Rodney J. Newell, Vice-Chairperson, Fort Knox, KY Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council recognizes the impact of the voluntary RACHAP Program on MTF manpower and access. Currently 27 MTFs participate in this program. However, in keeping with the intent of this legislation, we recommend the Office of The Surgeon General encourage participation by all MTFs in order to reduce the retirees' out of pocket expense of hearing aids. Hearing aids purchased on the economy cost over \$6000 while the DoD cost is about \$350.

ISSUE: 2018-01-09

COUNCIL: Joint Base Myer – Henderson Hall

SUBJECT: Flu Shots for Retirees 65 Years and Older

DISCUSSION: Flu Shots for the public in the 2017 season came in lower and higher dosages; the higher dosage was prescribed for all personnel 65 and older. At the 2017 RAD at Joint Base Myer & Henderson Hall, Rader Clinic offered all retirees and their spouses only the lower dosage; apparently the higher dosage was not made available to Rader Clinic or other Military Treatment Facilities. Additionally, older personnel were not informed that a higher dosage was recommended for them.

RECOMMENDATION: That all Military Treatment Facilities offering yearly Flu Shots be provided with all recommended dosages to be administered to active duty, retirees and their dependents. In case that dosages designed for older personnel are not available, the older retirees and their spouses affected by this lack of option, need to be advised that they should receive a different dosage and where the proper dosage can be obtained.

APPROVED BY INSTALLATION/GARRISON RETIREE COUNCIL CHAIRPERSON:
Col (Ret) Al Willner, Joint Base Myer-Henderson Hall Retiree Council.

IMCOM/ASCC COMMENTS:

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council was advised by the OTSG and verified by the Centers for Disease Control (CDC) that there is little data to support the efficacy of the high dose flu shot over the standard dose flu shot. However, the Council agrees that beneficiaries should be informed that the MTF is administering the standard dose immunization and that they can receive the high dose vaccine at no cost using their Medicare benefits.

ISSUE: 2018-02-10

COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Indefinite Identification (ID) Cards for Spouses and Widows/Widowers at Age 65

DISCUSSION: This issue seems to have surfaced periodically over the past decade. Spouses and widows/widowers of Active and Reserve Component (AC/RC) retirees are issued indefinite ID cards upon renewal at age 75 or older. The Fort Stewart Retiree Council supports previous recommendations that consideration be given to authorizing an indefinite ID card be issued at age 65. Spouses and widows/widowers are currently reissued ID cards that expire at age 65 due to expiration of civilian medical care and the beginning of entitlement to Medicare benefits. Subsequently, renewals are issued every 4 years at ages 69, 73, and finally the indefinite ID card after reaching age 75. A replacement is required due to expiration at age 65, it would only be prudent that an indefinite ID card be authorized at age 65 vice age 75. Spouses and widow(er)s of the Army's elderly and/or medically challenged retired Soldiers experience great inconvenience replacing their IDs every 4 years. A significant cost savings to the Department of Army, let alone the Department of Defense, could be realized by not having to reissue new ID cards three additional times for spouses and widow(er)s after age 65. This includes not only the potential manpower savings at ID issuing facilities, but also savings of not issuing multiple ID cards to these spouses and widows/widowers of Active and Reserve Component (AC/RC) retirees, who have already given so much to the US Army and its components. Many hardships incurred trying to renew these dependent IDs could be lessened by issuing indefinite ID cards at age 65.

RECOMMENDATION: The Fort Stewart Retiree Council supports issuing indefinite ID cards to spouses and widow(er)s of retired AC/RC soldiers at age 65. Any risk associated with the issuance of an indefinite ID card to these spouses and widow(er)s should be negligible through today's DEERS/DOD ID number programs. Thus, the less frequent ID issuance should not only contain costs and efforts at ID card facilities, but also demonstrate the Army's improved commitment and support to spouses and widow(er)s of retired AC/RC soldiers.

**APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (R) Gerald E. Thompson, Co-Chairman, Fort Stewart, GA Retiree Council

CSM (R) Tommy A. Williams, Co-Chairman, Fort Stewart, GA Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council supports the recommendation for issuance of permanent IDs for spouses and surviving spouses at age 65. This recommendation offers the opportunity to gain immediate efficiencies and savings in the issuing of ID Cards. Support of this recommendation will also reduce the burden and concern for safety that many older Retirees have when required to travel long distances to the nearest military issuing facility. The Council believes the risk associated with the issuance of an indefinite ID card to those who could lose their eligibility after the age of 65 is considered negligible in comparison to the savings in time and resources that accrue.

This recurring issue has been addressed in our Memorandum to the CSA as far back as 2008. We request Defense Human Resource Activity (DHR) provide any metrics or other data that justifies maintaining the age for a permanent ID card at 75 (for spouses and surviving spouses). Lastly, in addition to pursuing legislative change with the support of the other Service Retiree Councils, the Council recommends this issue be submitted through the Army Family Action Plan (AFAP) process in order to gain additional attention, support and the recommended change this issue deserves.

ISSUE: 2018-02-11

COUNCIL: Joint Base Myer-Henderson Hall Retiree Council

SUBJECT: Reduce Commissary Market Basket Cost Growth with Reorientation on a Basic Defense Commissary Agency Goal

DISCUSSION: Retirees and other Commissary patrons are experiencing increased costs for common necessities beyond inflation due to reduction of stocking and visibility of lower cost alternative brands. This apparent trend seems to be counter to the Defense Commissary Agency (DeCA) Strategic Plan Goal One: "Provide service members and their families with a quality benefit at significant savings." This fundamental goal is generally described but DeCA performance in meeting it is apparently not quantitatively measured in the Annual Financial Report (<https://www.commissaries.com/sites/default/files/2017-07/afr-2016.pdf>). DeCA is introducing its own "house brands" which should aid the consumers. There are already lower cost brands (e.g., Ralston cereals, Shasta soft drinks) which serve the consumer, as do commercial grocery house brands. DeCA has used special stickers on the shelves to identify some lower unit cost products, but these are no longer seen. DeCA includes unit prices on its shelf labels which can result in major savings, if understood and readable by the patron. Problems are in the visibility the lower cost alternatives, understanding the unit price as a tool for saving, and lack of management incentive for initiatives that reduce customer expenditure. Greater customer expenditures are reflected positively and precisely in multiple measures of DeCA management. However, an apparent orientation on maximizing sales in the higher priced product lines can be considered as directly in opposition to meeting Strategic Plan Goal One. Institution, use, and customer education of a DeCA military commissary "Standard Market Basket" could provide a quantifiable measure of meeting Goal One. The "Basket" could include the pre-packaged groceries, dairy, frozen, refrigerated, paper, hygiene, and other products frequently purchased by fixed income retirees and younger, growing active duty military families. It could be the subject of a display at commissaries, with the products used for its calculation shown.

RECOMMENDATION: A quantitative measurement of cost savings available to the fixed and lower income patrons be adopted for DeCA. Such a measure could be a Standard Market Basket can aid the patrons and permit measurement of DeCA performance in setting and meeting Goal One objectives.

The means of measuring the benefit and the specific products used to calculate the current "Basket" should be shown to the customers at the entrance area of each commissary. The use of unit prices in its development and by the individual shopper should be shown.

The measure of DeCA management success at meeting Goal One should be more significant than bonus by-products of operating such a major business, as scholarships or contributions to the FMWR operations.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL

CHAIRPERSON(S):

Col (Ret) Al Willner, Joint Base Myer-Henderson Hall Retiree Council.

IMCOM/ASCC COMMENTS: Complete as appropriate.

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council fully endorses the Defense Commissary Agency (DeCA) goal to provide all patrons a quality benefit at a significant savings when shopping at their local commissary. In achieving this goal, the Council encourages DeCA to employ a marketing and customer education strategy that clearly illuminates where and how the customer, particularly low and fixed income families, can save the most when using their commissary benefit. One example for educating customers that the Council would encourage DeCA employ is a visible sign at the entrance of the commissary that clearly highlights the percentage of savings for each department (produce, meat and grocery). The Council also supports recognizing the DeCA Management Teams who are achieving the greatest success in delivering significant savings to customers in their region.

ISSUE: 2018-02-12

INSTALLATION/GARRISON/ASCC Council: 8th Army Retiree Council, Korea

SUBJECT: OCONUS Community Banks Disenrolling Widows

DISCUSSION: Retirees that permanently live OCONUS are now allowed to use the overseas Community Bank. When this retiree dies, his wife (widow) is now ineligible and disenrolled from the overseas Community Bank. Widows are also unable to open new overseas Community Bank accounts. Widows must be given the same privilege and benefits that their spouses earned while on active duty and in retirement. It is not logical that the military now considers the widow of a retired service member “status non grata” because their spouse died.

Widows need a local banking facility overseas that their survivor benefits and social security payments can be deposited and readily available, such as their deceased husband needed for their retirement, disability, and social security deposits. This is another benefit that service members and their families have earned that was being taken away.

RECOMMENDATION: Allow widows to use the overseas Community Bank in the same capacity as a retiree.

**APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (USA, Ret) Wayne Clark, Co-Chairman 8 Army Retiree Council, Korea
SGM (Ret) Malcom Wolfe, Co-Chairman EUSA Retiree Council, Korea
SFC (USA, Ret) Anthony Biagiante, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan Area II Retiree Council, Korea
WO2 (USA, Ret) Giac Ly, Chairman Area III Retiree Council, Korea

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council acknowledges the Status of Forces Agreement (SOFA) Agreement between the United States and Korea is the binding document that authorizes the Overseas Community Bank to provide specific services to authorized patrons. In every country, depending on the SOFA, who is authorized what type/level of services can be different. In the case of Korea, unless there is a willingness to renegotiate the SOFA with Korea, a widow of a military retiree is not authorized to maintain an account at the Community Bank. Yet, for the specific aim of demonstrating commitment to the principles of Soldier for Life and keeping faith with the Retiree community, should the USFK leadership ever open the SOFA to renegotiation, the Council supports any effort to authorize widows of military Retirees to maintain an account at the Community Bank should they meet all other necessary criteria.

ISSUE: 2018-02-13

COUNCIL: Fort Stewart, GA Retired Soldier Council

SUBJECT: Casualty Assistance to Survivors of Retired Soldiers

DISCUSSION: The Fort Stewart, GA Retired Soldier Council submitted a recommendation to the 2017 CSA Retired Soldier Council that the CSA direct the Army Staff to review the suitability, feasibility and acceptability of training and utilizing Retired Soldiers as Casualty Assistance Officer/Noncommissioned Officers for surviving spouses of Retired Soldiers. CSA Retired Soldier Council comments on Issue 2017-0323 were,

“The council supports the revised language in AR 638-8 which now requires the Casualty Assistance Center (CACs) to assign a Casualty Assistance Officer (CAO/NCO) to support a family when requested. In addition, Survivor Outreach Services (SOS) are available. SOS provides survivors specific information on state and/or local benefits. This process ensures all Soldiers for Life are cared for properly. *The Retired Soldier population can provide assistance* (Italics added for emphasis)”.

However, the SOS website <https://sos.army.mil/home.aspx> indicates that services are limited only to families of “Fallen Soldiers”. Since Retirement Services is a component of Soldier for Life, it should be the proponent of a program utilizing volunteer Retired Soldier for Life CAOs/NCOs. The revised language of AR 638-8a (13) clearly and unambiguously establishes eligibility of survivors of retired Soldiers for casualty assistance. Presently, there is no executive agent responsible for developing and implementing a process whereby Retired Soldiers can provide casualty assistance to survivors of Retired Soldiers. Retired Soldiers playing a role in SOS adds another dimension to the original issue that focused exclusively on survivors of Retired Soldiers. The SOS target cohort are survivors of “Fallen Soldiers”. The CSA Retired Soldier Council comments imply an additional issue and coordination with another MACOM, i.e., Installation Management Command. Presently, SOS is an ACS function that falls under Family and Morale, Welfare and Recreation within the Garrison. Retired Soldier CAO/NCO training should include a module on benefits administrated by local and state agencies. Retired CAOs/NCO should be a retired survivor’s single point of contact for federal (e.g., DOD and VA), state and local benefits.

RECOMMENDATION:

That the CSA designate the HQDA/Soldier for Life become the Army Staff proponent for Retired Soldiers serving as volunteer Casualty Assistance Officers/Noncommissioned Officers for survivors of Retired Soldiers. The Casualty Mortuary Affairs Division of the Adjutant General Directorate at Human Resources Command serves as Executive Agent for this program. The duties of the Executive Agent should include, but not be limited to, training and utilization of volunteer Retired Soldier for Life Casualty Assistance Officers/Noncommissioned Officers. CSA directs the Chief of Public Affairs in coordination with Soldier for Life to develop a public relations campaign advising Retired Soldiers and their survivors of their eligibility for Casualty Assistance Services. Demand for these services may exceed the number of active duty officers and NCOs available to local Casualty Assistance Centers; therefore, any public relations campaign must solicit Retired Soldiers to serve as volunteer Retired Soldier for Life Casualty Assistance Officers/NCOs. Defer action on Retired Soldier utilization in Survivor Outreach Services program.

**APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (Ret) Gerald E. Thompson, Co-Chairman, Ft. Stewart GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairman, Ft. Stewart GA Retiree Council

CSA RETIRED SOLDIER COMMENTS: The Council believes Retired Soldier volunteers can be a valuable asset in carrying out duties associated with casualty assistance. While there is concern within the Army ranks that Retired Soldier Volunteers should not, and cannot, provide advisement to survivors, the Council believes a properly trained Retired Soldier can be one of the most effective advisors.

The Council recognizes that, at many posts, volunteers already work closely in an unofficial status with the local Retirement Service Office (RSO) and Casualty Assistance Office (CAO) to support survivors. This support varies but is generally in areas such as providing computer skills, transporting survivors to support agencies and conducting administrative support such as copying / sending documents required by DFAS and Social Security to the responsible RSO and CAO. This volunteer support is viewed as important to the quality of life (QOL) of the Retired Soldier population and the Council encourages the Casualty and Mortuary Affairs Operations Division (CMAOD) develop and implement a public relations campaign advising Retired Soldiers and their Family Members of their eligibility to help with casualty assistance services in these areas.

The Council does not support the recommendation to designate the HQDA/Soldier for Life as the Army Staff proponent for Retired Soldiers to serve as volunteer Casualty Assistance Officers/Noncommissioned Officers for survivors of Retired Soldiers. The rightful proponent for all casualty assistance training and process should continue to be the Casualty and Mortuary Affairs Operations Division within the United States Human Resources Command, which is dedicated to providing the online training resources to support the training needs of Casualty Assistance Officers.

Council members recognize the significant resource challenges facing our Army due to declining budgets and the resulting impact on personnel and programs. Having trained Retired Soldiers who are authorized to provide casualty assistance when needed, can be a great resource for our military communities. The Council believes the Army Staff should capitalize on the experience, talents and energy of Retired Soldiers, recognize and trust them as Soldiers for Life, and establish a training program that provides the skills and certification needed to serve as CAOs.

As part of the Army Team, Retired Soldiers continue to do their part in telling the Army story and supporting wherever and whenever needed. Any public relations campaign on volunteers should encourage Retired Soldiers to get involved. The ongoing contributions and volunteer services of our Retired Soldiers demonstrate our commitment to our Army and is in keeping with the intent of the Soldier for Life Program.

ISSUE: 2018-02-14

INSTALLATION COUNCIL: Fort Campbell, Kentucky

SUBJECT: Change Survivor Benefit Plan law to allow two years post-retirement to decide upon participation.

DISCUSSION: The SBP was created to allow service members (SM) to protect a portion of their retired pay in the event of their death to preclude the surviving spouse from being left without a substantial income source. The fact that DoD created and continues such a program shows the importance of this subject. Given the level of support by DoD to ensure survivors are provided for, suggests that changes to the program that provide significant benefit to the SM should be carefully considered.

The decision for retiring SM to take part, or decline to take part, in the Survivor Benefit Plan (SBP) must, by law, be made prior to their retirement date. Many SMs choose not to take part because they are unsure about their financial situation after retirement. No small number of SMs retire without having post-retirement employment arranged. Others have employment arranged but are unsure as to how much disposable income they will have or are waiting for approval of VA disability compensation claims. Many change jobs several times post-retirement. Having to make the decision "right now", in a situation of employment and financial turmoil, causes many to decline the opportunity to take part in the Survivor Benefit Plan.

Retirement Services Officers (RSO) regularly hear from Retirees requesting to participate in SBP after declining the opportunity at retirement. The RSOs must inform the retiree that SBP is no longer available to them and counsel them to try to purchase commercial life insurance or some other method of securing their spouse's finances in the event of their death.

Currently, if a SM declines SBP at retirement, the decision is irrevocable. If that SM **does** take part in SBP, they are "locked-in" and must pay premiums for two years before they are allowed the "flexibility" to quit the program **only** between the 25th and 36th month of receiving retired pay.

If SMs were allowed additional time to establish employment and allow their personal finances to develop after retirement, before being required to make a SBP decision, it is very likely that significant numbers would elect to participate, rather than decline irrevocably. Those that still elect not to participate would at least be confident their decision was based on the best possible information. For those that choose to do so, they would have the peace of mind that their spouse and children would be well taken care of after their death.

More worrisome is the fact that younger SMs, retired due to disability, find little value in SBP due to their age and the fact that they would not be "paid-up" until they are 70 years old. A preponderance of these SMs do not reside near a military installation after separation, rely heavily on VA disability compensation, and have even more difficulty finding employment and establishing a budget. This "target demographic" would benefit significantly from a change such as this.

This council recommends a change to the law to allow SMs two years, post –retirement, to make a SBP election. If the SM chooses to take part in SBP at any point between retirement and the two year anniversary, that SM would notify DFAS using DD Form 2656-6 with an election start date and premium payments beginning as of the date of the form. If, at the two year anniversary of retirement, the SM has not notified DFAS of an SBP election to take part or decline coverage, the Soldier would be considered to have met the requirement for “Auto” SBP Spouse coverage with an election start date and premium payments beginning as of the two year anniversary of drawing retired pay. Additionally, a change to DD Form 2656, Data for Payment of Retired Pay, would be required to add a statement of understanding regarding the requirement to notify DFAS prior to the two year anniversary or receive automatic spouse coverage.

The option to stop SBP coverage between the 25th and 36th month of drawing retired pay would not be changed, but would only apply to those who made an election at retirement.

This change is unlikely to increase the overall cost of the Survivor Benefit Plan Program and could easily be written into a future NDAA. In fact, with more SMs taking part, the program would likely become healthier. The benefit of allowing this change would far outweigh any additional administrative costs.

RECOMMENDATION: In support of the principles of Soldier for Life, in the realization of the incredible stress undergone by SMs when retiring from the service, and in the spirit of taking care of Family Members, the Council recommends an amendment to U.S.C. Title 10, Chapter 73, "Annuities Based on Retired or Retainer Pay" in the next National Defense Authorization Act, to allow all retiring SMs two years post-retirement to make a decision to participate in SBP.

APPROVED BY INSTALLATION RETIREE COUNCIL CHAIRPERSON(S):
LTG (Ret) Keith Huber, Chairman, Fort Campbell Retired Soldier Council
1SG (Ret) Luther Holsonback, Co-Chairman, Fort Campbell Retired Soldier Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council does not support the recommendation to allow two years post-retirement to decide upon participation in the Survivor Benefit Plan. While the Council understands that the transition out of the military can be a stressful period, the Soldier for Life program reduces this stress by introducing the SBP to Soldiers and their Family Members well in advance of retirement. There is no evidence to support that the two-year extension would increase participation and the Council is concerned that, should a Retired Soldier have this option to delay two years, should they die during that two year period, their spouse may be left with no SBP.

ISSUE: 2018-03-15

INSTALLATION/GARRISON/ASCC Council: Fort Sill, OK Retiree Council

SUBJECT: Retiree access to Military email

DISCUSSION: Since removing access to Retirees with an AKO email we have seen a lack of communication between the Army and the Retiree community. With the Army planning on moving forward with electronic communication, having Retirees able to use AKO for email activities will increase communication. The AKO was originally going to be an email for life for every Soldier and when Retirees were cut out of AKO many emails were not updated to the Retiree's civilian email and many times the civilian email changes due to employment or new internet providers. Retirees also lack the contact with current service-members because the AKO access has been denied; while the SFL website may have much information for Retirees by not having the AKO access many feel they have been cut off by the Army.

RECOMMENDATION: To increase communication between the Army and all Retirees; we recommend that all Retiree AKO emails be re-activated and all future Retirees be allowed to keep the AKO email in the future.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL

CHAIRPERSON(S):

LTC (Ret) George A. Shell, Co-Chairman, Ft. Sill, OK Retiree Council

SGM (Ret) Edward D. Mounts, Co-Chairman, Ft. Sill, OK Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Retired Council appreciates the continued concern of the retired population on this issue. This issue was addressed by three previous Councils and it was determined that the Army is currently providing sufficient information to Retired Soldiers through multiple resources.

In November 2013 the Army Knowledge Online site moved to the next generation enterprise service, Department of Defense Self-Service Logon (DS LOGON) which allowed Retired Soldiers and family members secure access to DOD online self-service sites.

The Army Retirement Services Office Website provides access to current initiatives and issue the Army is addressing on Retired Soldiers' behalf. In addition to the SFL website, all Army and DOD websites can be accessed through DS-LOGON. Once a Retired Soldier has registered for an account, they will have access to MILCONNECT, TRICARE, DFAS, DEERS, HRC and MyHealtheVet. It is an individual Retired Soldier's responsibility to provide current information to the sites. The only information available will be what the Service Member has provided to the site.

ISSUE: 2018-03-16

COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Materials for Retirement Counseling of Active and Retired Soldiers and Their Families.

DISCUSSION: The Department of Army (DA) Retirement Services Officer (RSO) periodically prepares a Pre-Retirement Counseling Guide (September 2016) that both supplements AR 600-8-7 Retirement Services Program and provides valuable additional information and advice not otherwise readily available. This guide has been, and hopefully will continue to be, very comprehensive and easily understood. It is prepared by the DA RSO in conjunction with Human Resources Command (HRC). The guide is available on line as a PDF and at the DA RSO website: <https://soldierforlife.army.mil/retirement/> . Currently, the guide is not yet included in the Army Publications system.

RECOMMENDATION: The Fort Stewart Retiree Council supports all efforts to enhance strategic communications between the DA RSO and Retired Soldiers. Based on the quality and quantity of information contained in the guide, we recommend that it be included in the Army Publications System as a DA pamphlet entitled "Retirement Counseling Guide". Under the provisions of AR 600-8-7, para 3-1e, this guide can be sent electronically to all Soldiers (Active or Reserve Components) during the mandatory pre-retirement phase of their commitment. The Fort Stewart Retiree Council further recommends that the DA RSO consider distribution of the electronic copy of the Retirement Counseling Guide to all Retired Soldiers and their Families and/or periodically include a link to this document in *ECHOES*.

**APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (R) Gerald E. Thompson, Co-Chairman, Fort Stewart, GA Retiree Council

CSM (R) Tommy A. Williams, Co-Chairman, Fort Stewart, GA Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Retired Soldier Council acknowledges that the retirement counseling guide is a cornerstone for Soldiers preparing for retirement under Army's current pre and post retirement preparation and policy. This is the primary way the Army provides guidance to Soldiers who will soon retire and should be included in the overall RSO communications plan.

This document is controlled by the Director of Army Retirement Services and currently resides on the Soldier for Life website under the Preparing to Retire Tab. Additionally; the Pre-Retirement briefing guide and the Retired Soldier Handbook are available in PDF format on this site.

ISSUE: 2018-03-17

COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Reserve Component Retirement Training Program

DISCUSSION: The Fort Stewart Retiree Council commends the United States Army, United States Army Reserve (USAR), Army National Guard (ARNG) and their Major Subordinate Commands (MSCs) in establishing pre-retirement training programs. The Active Component (AC) along with Reserve Component (and Active Guard and Reserve [AGR]) Soldiers should then be able to receive adequate training/ information on retired benefits and procedures involved with applying for retired pay and receiving appropriate retirement benefits. The Reserve Components (both the USAR and ARNG) have mirrored the AC preretirement training programs in their MSCs. These have worked especially well when the MSC is near an AC Retirement Services Office (RSO). As these preretirement training programs are now becoming part of all Troop Program Units [TPUs], a required Program of Instruction (POI) must be in the annual training plan for each MSC's brigades, battalions and companies. Due to geographic locations and mission requirements, some Reserve Component Soldiers do not always receive sufficient information when transferring to Retired Reserve status.

The established Retirement Service Officer (RSO) positions in the USAR and ARNG and their MSCs will better serve TPU and AGR Soldiers and their Families not only just before retirement, but also as these Soldiers and Families move through the "gray area". Programs like Fort Family will be able to initially, as well as continue, to provide retirement services. Periodic and consistent contact from the AC/RC Soldier for Life down through their last MSC is essential for Retired Soldiers to continue to be informed and receive their appropriate retirement benefits. As the Retired Soldier approaches the age of 60, or when they are eligible to receive retired pay, Defense Finance and Accounting Service (DFAS) could contact all Retired Soldiers NLT 24 months before receiving retired pay and supply those Retired Soldiers with an electronic copy of the DA RSO's Retirement Counseling Guide.

RECOMMENDATION: The Fort Stewart Retiree Council supports continued AC Retirement Services Offices efforts at all major Army installations for the Retired Soldiers in their areas of responsibility. The Council commends the USAR, the ARNG and their MSCs in also establishing pre-retirement training programs. The Retiree Council suggests that pre-retirement training become an integral part of each TPU's training plan and this training occur before the Soldier leaves their TPU. The Fort Stewart Retiree Council recommends all Retired Soldiers receive an electronic copy of the DA RSO's Retirement Counseling Guide before their drawing retired pay.

APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL

CHAIRPERSON(S):

COL (R) Gerald E. Thompson, Co-Chairman, Fort Stewart, GA Retiree Council

CSM (R) Tommy A. Williams, Co-Chairman, Fort Stewart, GA Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Retired Soldier Council acknowledges that the Reserve Components have and are currently taking positive steps to both

include and inform all of their Soldiers in the retirement process. We concur with the changes the RC has made on behalf of those preparing for retirement and both applaud and agree to assist with the information flow to the RC retired community.

The Council would also like the Directors of the Reserve Components to remain aware of the COHORT of Gray Area Retired Soldiers that have not been serviced by the RC's recently implemented pre-retirement process.

The Council additionally acknowledges that hard copies of defined RC retirement benefits and services can be downloaded and printed from the current RC Retirement webpages and are available upon request via RC RSOs and/or HRC, RC Retirements Branch. Army Reserve pre-retirement briefings are conducted at locations for the identified AR audience (i.e. population density and/or locations not previously serviced). This is a multi-step approach that should include pre-retirement counseling at the Troop Program Unit and become an integral part of each units' training plan. This training should occur before the Soldier leaves their unit.

ISSUE: 2018-03-18

COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: MPAs and VSOs - Valuable Assets to Retired Soldiers and their Families.

DISCUSSION: The steady increase in the size of the retired population and the need for cost effective and seamless communications given the potential decrease in resources within the Defense budget requires innovative use of existing communications architectures of the Military Professional Associations (MPAs) and Veteran Services Organizations (VSOs). MPAs (e.g., Military Officers of America Association, the Reserve Officer Association, National Guard Association of United States, United States Army Warrant Officers Association, Non Commissioned Officers Association, The Retired Enlisted Association, Enlisted Association National Guard of United States) and organizations such as the Association of the United States Army have robust communications networks to include printed publications, electronic mailings and web pages. These established organizations along with their communications outlets can provide solid mechanisms for reaching out to the Army's Retired Soldiers and their Families. VSOs, such as the Disabled American Veterans, American Legion, Veterans of Foreign Wars, and American Veterans have wide reaches into large retired and veteran populations through existing outreach networks, to include national publications, newsletters and websites. These established organizations and their communications media could provide mechanisms for reaching out to Retired Soldiers and their Families as well as Veteran Soldiers and their Families.

RECOMMENDATION: In an effort to strengthen communications with Retired Soldiers and their Families and increase cost efficiency within limited resources, the Department of Army (DA) should consider developing a partnership with the MPAs and VSOs. Through the joint efforts of DA, MPAs and VSOs a fully implemented communications network and comprehensive announcement system would be able to continually inform the Army's Retired Soldiers and their Families.

**APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (R) Gerald E. Thompson, Co-Chairman, Fort Stewart, GA Retiree Council

CSM (R) Tommy A. Williams, Co-Chairman, Fort Stewart, GA Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Retired Soldier Council acknowledges the Army's position that the VSO/MSOs are organized locally and formed to support all Veterans and Retirees. However, they also operate under the auspices their national charters. As such they provide a valuable voice for policies and benefits that affect the Army's recruiting efforts by utilizing the retired population to assist telling the Army Story. The Army provides all Retired Soldiers current information through multiple online resources. The main purpose of the Retired Soldier portion of the Soldier for Life website is to provide current Army information to the Retired population.

ISSUE: 2018-03-19

COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Using Websites and Social Media to Better Support Retirees and their Families

DISCUSSION: Active and Reserve Component (AC/RC) Retirees need to be aware of all available retirement benefits. Transition and financial counselors in all Troop Program Units (TPU) need to be readily available as early as 12-18 months before Soldiers exit the military in order that they acquire as much knowledge as possible concerning available support and resources in order to make better informed decisions - the values of being a "Soldier for Life." Our use of the electronic highway can greatly enhance each Retirement Services Office's (RSO) series of sessions by reinforcing that retirement is a process. Each Army installation/post's RSO should establish and keep current a website in support of Army Retirees and their Families. Web-based information is not the only way to communicate with Retired Soldiers and their Families; another cost effective way is through the use of social media. An Army installation/post's PAO along with its respective RSO should continue to encourage Army installation/post's retiree social media presence on one or more of the established media sites (Facebook, Instagram, Twitter, etc.). These media would allow an instantaneous flow of information, at no user cost, with minimal overhead involved in maintaining social media presence. The US Army Reserve (USAR) and Army National Guard (ARNG) along with their Major Subordinate Commands (MSC) now have established a social media presence that includes websites, Facebook, Instagram, Twitter, etc. The RC's MSCs should be in direct contact with each Army installation/post's RSO in the area of operation of the MSC to disseminate information about forthcoming Retiree Appreciation Days (RADs) and other items of interest to RC Retirees and their Families. The RC MSC TPUs (Brigades, Battalions and Companies) should also make their presence known on some form of social media, not only for RC Soldiers and their Families, but also for Retired Soldiers and their Families – as it is never too early to begin retirement planning. Defense Finance and Accounting Service (DFAS) – Cleveland/Indianapolis should supply each retired Soldier in the Army installation/ post's service region with respective Uniform Resource Locators, along with the social media addresses, for the Army installation/post's Facebook, Instagram and Twitter, accounts. These actions support the AC/RC RSO's "Soldier for Life" Program by conveying appropriate messages to the Retired Soldier population by way of web and social media.

RECOMMENDATION: The Fort Stewart Retiree Council continues to support informed communication with retired Soldiers through each Army installation/post RSO's URL and the attachment to their post/installation website a URL for the Army's RSO – "Soldier for Life". The Fort Stewart Retiree Council recommends the Chief of Staff of the Army Retired Soldiers Council (CSARSC) support the Army G1's establishment along with continued use social media page(s) on one or more of the following social media sites (Facebook, Instagram, and Twitter)

that maintains contact with, as well as informs, Retired Soldiers and their Families about retirement and benefits one is due. The USAR, the ARNG, their MSCs and respective TPUs staff should maintain website and social media presence that provides a clear line of informative communication with RC Retired Soldiers and their Families, all while maintaining linkage with the Army installation/post's RSO in their region.

**APPROVED BY THE INSTALLATION/GARRISON/ASCC RETIREE COUNCIL
CHAIRPERSON(S):**

COL (R) Gerald E. Thompson, Co-Chairman, Fort Stewart, GA Retiree Council
CSM (R) Tommy A. Williams, Co-Chairman, Fort Stewart, GA Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council has reviewed the responses from the Army Staff, USAR and ARNG and concurs that this issue is being sufficiently addressed.

We fully support IMCOM's willingness to collaborate with the RSOs at Army led installations to insure the Installation Public Affairs Office establishes a social media presence on one or more sites (Facebook, Instagram, Twitter, etc.). We request that IMCOM consider providing guidance to the Army RSOs on joint bases so they can also provide this level of service and ensure information flows to all Retired Soldiers within their service areas.

LIST OF COMMITTEE RECOMMENDATIONS SUBMITTED DURING THE PREVIOUS 3 YEARS

Name of Committee

Enter 10 key recommendations the committee made to the decision maker during the previous 36 months and the recommendations' disposition.

Date Recommendation Submitted	Recommendation (Enter a Brief Description—One to Three Sentences)	Disposition (Adopted / Partially Adopted / Pending Review / Rejected)	Decision Maker(s) (Name and Position Title/Office)
27 Apr 2018	See attached report of 19 recommendations		