

ODCSPER RETIREMENT SERVICES OFFICE: ARMY ECHOES
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Message from the Sergeant Major of the Army

To all Army retirees and their families:

I want to take this chance, through Army Echoes, to address both the regular retired audience of this bulletin and the senior enlisted soldiers who will be receiving it for the first time. Since I became Sergeant Major of the Army, I've traveled all over the world and talked to many soldiers. I recently had the chance to talk to the members of the Army Chief of Staff's Retiree Council. I told your retiree representatives the same thing I tell all the soldiers and families I speak to -- I want to know what's on your mind.

When I visit members of Congress, I tell them what's on the soldier's mind. I tell them about the main concern of soldiers -- housing. Soldiers on post live in old housing, often in poor repair because of decreased funding while soldiers off post find that the only housing they can afford is poorly built and in unsafe neighborhoods. I would like to include the concerns of retirees in my visits with members of Congress as well as the talks I give to our active duty soldiers. I tell our soldiers, married and single, that we're all part of a family. I explain that a family is people who share a home and that the Army is our home. Our family includes active duty soldiers, the Reserve, National Guard, civilians, their families and, of course, our retirees.

I know retirees are very active in the "front end" of our Army, helping us recruit quality soldiers. I ask you to continue that support by touching base with your local recruiters and visiting the local schools. But I also realize that as these quality soldiers stay in the Army for six or seven years, they come to share your concerns with the "rear end", the quality of life after retirement.

I have made a commitment to your council, and I repeat that commitment to you, that I will spend more time talking about retirees and retirement to Congress and to our soldiers. I thank you for your years of service and your continued support of the Army.

GENE C. McKINNEY
Sergeant Major of the Army

Highlights from headquarters

The Chief of Staff, Army Retiree Council has completed its annual meeting. A detailed report on the Council's activities is on page 3. Service representatives from all the Services attend each other's Retiree Council meetings to exchange information on common issues and provide support for retiree programs. Once retired, issues and concerns are similar for all servicemembers. There is renewed optimism about progress on some of the issues the Councils have been pursuing for years. As we reported in the article on page 3 addressing the Council Chairmen's meeting with DOD representatives, there appears to be real progress being made in areas of obtaining medical support for over age 65 retirees and family members; there is a renewed effort, by DOD, for developing a dental plan for retirees; and support for COLAs and commissaries remains strong at all levels. Things move slowly at the Headquarters level, but there finally appears to be some action in areas long championed by our Retiree Councils.

Leadership support for the Army Retirement Services program remains strong and continues to expand. This was clearly demonstrated by the recent decision to add the Army Retirement Services Office as a member of the General Officer Steering Committee for the Army Family Action Plan (AFAP). The AFAP addresses quality of life issues of concern to all soldiers and family members, including retirees. Our membership on this important body provides an additional avenue to champion retiree issues and demonstrates again the sincere commitment to address and respond to concerns in America's Army.

As outlined in our cover letter from SMA Gene McKinney, this issue of Army Echoes is being sent, for the first time, to our soldiers who are within the retirement window (all soldiers with 19 or more years of service). Retirement benefits are always listed by our soldiers as a key reason for joining and staying in America's Army. As the individuals charged with nurturing our soldiers, we hope some of the information contained in Echoes will assist our Army leaders as they prepare for their own retirement and, more importantly, as they provide guidance to our soldiers on retirement subjects. Thanks for your support.

GARY F. SMITH
Chief, Army Retirement Services

Reunions, associations -- using the Web to keep in touch

The editor of Army Echoes receives many requests from military and veterans associations concerning publication of reunions. Because of limited space, Army Echoes does not print reunion notices. The editor also receives many inquiries concerning the addresses of Army Associations.

Information on reunions and associations is now available on-line via The US Army Homepage on the World Wide Web (www). Retirees interested in finding the address of the alumni association of the unit they served with in World War II, Korea, or Vietnam may find this information at <http://www.army.mil/vetinfo/vetloc.htm>. To assist others, officials of these associations may send an E-mail message to Vet Locator@prodigy.com. to update or make changes in the association's address or point of contact.

Army Chief of Staff's Council meets

The future of military health care once again led the list of retiree concerns presented to the Army Chief of Staff by his Retiree Council during their April 1-5, 1996 annual meeting in the Pentagon.

"Our top issues are the same as they've been for the past three years and the same as they'll probably be for the next three years because these are tough issues to deal with," council co-chair retired LTG Ellis D. Parker commented. He added, "I think all five issues have seen some positive movement."

Council co-chair retired SMA William A. Connelly commented, "I'm upbeat because I'm beginning to see the possibility of some headway on these issues, especially when we know we have the Chief of Staff, the Sergeant Major of the Army, the Army Staff and right up to the Secretary of Defense on our side."

The co-chairs attributed this headway to several factors -- Senior Leadership's growing awareness of retiree issues; the link between treatment of retirees and recruiting and retention; strong support from the Chief of Staff and the Deputy Chief of Staff for Personnel, LTG Theodore Stroup; and cooperation among all four Service Retiree Councils.

For the first time, the chairmen of all Service Retiree Councils met with Defense Department officials to discuss the top four retiree concerns, the future of military health care; retired pay cost of living adjustments (COLAs); the preservation of the commissary system; and a dental insurance program for retirees and their families. The concerns the Army Retiree Council presented to the Chief of Staff, Army, included these same four issues and one Army-specific concern, the importance of maintaining command support for the Retirement Services Program.

The Army Council's recommendation on health care included a position paper discussing the adverse impact of TRICARE on retirees over age 65. The Council recommended Medicare subvention and opening TRICARE Prime, the TRICARE Extra Medicare prescription benefit and DOD Mail Order prescription benefit to all retirees, regardless of age or residence. Medicare subvention is the Health Care Financing Administration reimbursing the military health care provider for care provided to Medicare-eligible retirees. See page 4 for a full explanation.

The Council urged continued vigilance and support of COLAs to retired pay because retirees deserve to be treated fairly and equally with all other government COLA recipients and because the way retirees are treated affects the Army's ability to recruit and maintain quality soldiers.

In defending the commissary benefit, the Council pointed out that this benefit has been used as part of the compensation package when calculating military pay raises. Since this benefit has been used as justification for reduced pay, devaluing this benefit would jeopardize the quality of life of both active duty and retired soldiers. Regarding a retiree dental plan, the Council applauded DOD's decision to again pursue an active role in this initiative.

In supporting the Army Retirement Services Program, the Council asked for the continued support of the senior leadership of this program, even in the face of budget cuts, and offered retirees to support the program as volunteers at the installation level.

The council chairs meet with the Chief of Staff semi-annually to discuss these issues and the progress that has been made in resolving them.

Service council chairs hold DOD briefing

The chairmen of all the Service Retiree Councils -- Army, Air Force, Navy/ Marine Corps and Coast Guard -- presented the concerns of military retirees to DOD officials in a Pentagon meeting April 3.

This meeting marked the first time that the Service Retiree Councils have been heard together at the DOD level. Ordinarily, each service council chair presents retiree concerns to that service's Senior Leadership. DOD officials promised to continue to meet with the Council chairs at least on an annual basis or more frequently if special issues or concerns arise.

The council chairs presented the top four concerns of retirees - the future of military health care, retired pay cost of living adjustments (COLAs), the preservation of the commissary system, and a dental insurance program for retirees and their families to Fred F. Y. Pang, Principal Deputy

Under Secretary for Personnel and Readiness and Assistant Secretary of Defense, and LTG Samuel E. Ebbesen, the Deputy Assistant Secretary of Defense (Military Personnel Policy).

Retirees invited to history homepage

Would you like access to the institutional memory of the Army? The Army's Center for Military History (CMH) Homepage (<http://www.army.mil/cmh-pg>) can offer you 13 megabytes of material with the click of a mouse.

The CMH describes its homepage as being particularly suited to the historical needs and interests of the Army retiree community. The first page of the CMH website is divided into the following sections: (I) The CMH: The Chief's Corner, What's New, About CMH, Frequently asked Questions (FAQs) about CMH, Army Museum System, CMH Publications Catalog, User Survey; (II) Military History: If You Have an Inquiry, FAQs about Army History, CMH Books Online, CMH Articles Online, Monthly Special Features, Research Tools, Monthly Museum Displays, and Links to Other Web Sites.

Section I is an organizational guide to the Center. Of particular interest to retirees is the CMH publications catalog. Most CMH publications can be ordered through the Government Printing Office (GPO) -- the catalog tells you how to do this and provides a GPO stock number for each book and poster produced by the Center. Section II is the more substantive area of the site. Among other things, it includes a list of FAQs about Army history such as a list of campaigns fought by the service, a table of casualties for major wars, information about the five-star rank, a history of the 21-gun salute, etc.

The center of gravity of the Homepage is the CMH books online category. In the future, it is conceivable that all CMH publications will be available online. However, current resource restrictions have forced the Center to make difficult decisions about what books to scan and upload. Concerns within the Defense Department about Gulf War Syndrome prompted the immediate posting of CMH's new book on this war, *The Whirlwind War*. To support Operation Joint Endeavor, CMH posted *German Antiguerrilla Operations in the Balkans (1941-1944)*. During the next year, the CMH webmaster hopes to post monographs on the Korean War in support of the 50th anniversary in the year 2000.

Section II is the Online articles section which will contain significant articles from *Army History*, the Center's quarterly journal, and other short works of interest to the Army and general public. For example, CMH recently posted the executive summary of its forthcoming monograph on the 24th Infantry in Korea and an article by Matthew Byrd on Internet resources of interest to historians.

A monthly museum display contains samples of CMH's collection art and material culture.

A final area of interest to retirees is the Research Tools area of Section II. Because so many people have questions about how to look up the history of a unit or find a soldier's individual service record, one of the first items uploaded was a master index of Army records, and some other aids to assist researchers in finding Army records. The Center of Military History is not an archive: it is a research institution and only maintains files related to ongoing and past research projects. The primary repository for the Army's historical records is the National Archives and Records Administration (<http://www.nara.gov>). The Research Tools section of the CMH Homepage is designed to steer people to the National Archives and other records repositories that contain materials of interest to them. In its first three months, the CMH Homepage has been visited by 24,000 people.

Medicare subvention

Medicare subvention is a key factor in determining whether retirees and spouses over age 65 will be able to receive care at military health care facilities.

The Health Care Financing Administration (HCFA) pays the bills for Medicare. Medicare subvention is when HCFA reimburses the health care provider for care provided to Medicare-eligible retirees. If a Medicare patient receives care from a civilian doctor or at a civilian hospital, the care provider is reimbursed by HCFA for that care. Currently HCFA does not reimburse the military for treating Medicare patients. Without Medicare subvention, the military may be unable to provide care to beneficiaries over age 65 because of the unreimbursed cost. The law does permit the military to charge health insurance companies for care provided to their policyholders in military treatment facilities.

In explaining why the Army Chief of Staff's Retiree Council supports Medicare subvention, retired LTG Ellis D. Parker, council co-chair, pointed out that care provided in a military facility costs 30 percent less than care provided in a civilian hospital. Providing Medicare subvention to military hospitals could save HCFA money. The Retiree Council recommended Medicare subvention in its report to the Chief and to DOD.

Health care option for retirees working for government

After retiring from the military, many retirees have second careers as federal employees which entitles them to enroll in the Federal Employees Health Benefits Program (FEHBP). Since these retirees are covered by CHAMPUS/TRICARE, many do not enroll in FEHBP. As we remind you in our health care articles, you lose eligibility for CHAMPUS/TRICARE when you reach age 65 and Medicare eligibility.

The Office of Personnel Management (OPM) advises those in this situation who would like to join FEHBP to enroll during the last open season before civil service retirement. By doing so, you will become eligible to continue FEHBP coverage in retirement. (CHAMPUS coverage will count toward the provision of FEHBP law that mandates coverage five years before retirement.)

Federal employees who have already retired, or who cannot now enroll during an open season, may write and request a waiver of this requirement. Waiver requests should be sent to: OPM; Health Benefits Information Branch; PO Box 14172; Washington, DC 20044.

Task force finds no widespread extremism

Secretary of the Army Togo D. West, Jr., announced that his "Task Force on Extremist Activity: Defending American Values" found no widespread or organized extremist activity in the Army.

The task force, formed Dec. 12, 1995, did find that individuals or small, informal groups of individuals hold extremist views. Allegations or suspicions of widespread, concerted recruitment of soldiers for extremist causes, and participation by soldiers in organized extremist activities, were not substantiated.

"This tells us that the Army is composed of soldiers who reflect the American belief that extremism is unacceptable in our society and in the Army. It also recognizes the continuing challenge posed by even a minimal number of individuals who hold extremist views which are contrary to good order and discipline," Secretary West said.

Secretary West created the task force after the murders of two citizens on Dec. 7, 1995 in Fayetteville, NC. Three soldiers assigned to the 82nd Airborne Division at Fort Bragg have been charged with the murders.

Retired Pay update

As you know, the Fiscal Year 1996 Defense Authorization Act moved your cost of living adjustment to retired pay up to your April 1 retired paycheck.

Your next retired pay COLA is scheduled for Jan. 1, 1997. In 1998, COLAs to military retired pay are expected to be paid at the same time as federal civil service retiree COLAs. Current proposals call for that COLA to be effective with the April 1998 retired pay.

Dental insurance update

Since the issue of DOD-sponsored dental insurance is still being worked, we will occasionally report private dental insurance. Remember, these plans are not endorsed by the Army.

The TREA Dental Plan is offered by the Retired Enlisted Association underwritten by Gerber Life Insurance Company. For more information, call 1-800-808-4514.

The NAUS Dental Plan is offered by the National Association of Uniformed Services through Gerber Life Insurance Company. For more information, call 1-800-808-4514.

The Cigna Dental Plan is offered through the National Officers Association, The Uniformed Services Association, the Marine Corps League, the Military Order of the Purple Heart, the Military Order of the World Wars, and the National Defense Transportation Association. For more information, call 1-800-421-1470.

How to support Joint Endeavor

Even if you don't know anyone serving in Operation Joint Endeavor in Bosnia, you can provide moral support to those serving or their family members by sending mail to "Any Service Member" or "Any Family Member".

The addresses for this mail are:

Army and Air Force personnel: Any Service Member; Operation Joint Endeavor; APO AE 09397-0001

Navy and Marine personnel: Any Service Member; Operation Joint Endeavor; FPO AE 09398
Family members remaining in Germany with a spouse deployed in support of Operation Joint

Endeavor: Any Family Member; Operation Joint Endeavor; APO AE 09399-0001. If you are sending a package, see your post office about any required customs declaration and remember there are certain items you may not mail to Operation Joint Endeavor. For example, the list of items you may not send "any service member" includes currency and alcoholic beverages. You may not send "any family member" any tobacco product or coffee.

You can also get messages to those serving in Operation Joint Endeavor through E-mail using Military City Online's Bosnia Resource Center. Use the address <http://www.dtic.dla.mil/Bosnia/message-form.html>.

'Hip pocket' orders to be rescinded

ST. LOUIS _ Something you carry in your hip pocket is something you're able to produce at a moment's notice, and "hip pocket" orders were based on this principle.

For years, "hip pocket" orders, or retiree mobilization preassignment orders, have been given to retiring soldiers, telling them where to report in the event of an Army call-up of retirees. The idea was for retirees to check their "hip pocket" orders and report as ordered to the specified post.

Times have changed. The elimination of "hip pocket" orders will bring the Retiree Mobilization and Management Program in line with the current world situation, downsizing efforts and cost avoidance, said Don Ashenfelter, the program's planning officer at the U.S. Army Reserve Personnel Center.

The Office of the Assistant Secretary of Defense for Manpower and Personnel discontinued the requirement for these preassignment orders. Consequently, the Army's Office of the Deputy Chief of Staff for Personnel issued a decision that "hip pocket" orders will be done away with and that call-up orders for eligible retirees will be issued by telegram as the need arises.

All current preassignment orders are revoked effective August 1. The orders being revoked were published by ARPERCEN and its predecessor, the Reserve Components Personnel and Administration Center, or RCPAC. Individual orders will not be published to revoke these orders; news items in the media, such as this one and others like it, will serve as official notice of the revocation of all retiree preassignment "hip pocket" orders.

Despite the lack of "hip pocket" orders, retirees will continue to be preassigned through earmarking in the Total Army Personnel Database-Reserve, or TAPDB-R. This keeps Army mobilization planners informed. In general, retirees will not be advised of the earmarking and preassignment because the preassignment is subject to frequent changes.

Current retiree volunteers wishing to maintain a specific preassignment for mobilization should reapply for volunteer status through ARPERCEN. In addition to being processed for preassignment to specific Army installations and units, applications will be processed for special recall options, such as disaster relief, crisis response and small-scale conflicts.

Retiree volunteers will be identified in TAPDB-R as volunteers, and, when the situation dictates, recall orders will be published and forwarded to them.

Army Regulation 601-10, Management and Mobilization of Retired Soldiers of the Army, will be revised in the near future to include these changes.

"On behalf of the Department of Defense and the Department of the Army, I want to express sincere thanks to each and every retiree who continued to serve this country through the Retiree Mobilization Preassignment System," ARPERCEN Commander COL Norman S. Brinsley said, "Your service to this nation continues to be a valuable asset. It is appreciated and not forgotten."

Those with questions should contact Ashenfelter at (800) 325-2660 or (314) 538-2312.

SBP and remarriage

Dear Muster,

I was unmarried and without children when I retired, so I did not participate in the Survivor Benefit Plan (SBP). Three years ago I married and have asked DFAS-CL to enroll my spouse in SBP now; however, they refuse. Why? MSG A, Millersville, PA

Dear MSG A,

Federal law states that action to add a beneficiary to the Plan must be taken by the retiree PRIOR to the one-year anniversary of the event (either marriage or acquiring a dependent child). Since you did not enroll your spouse during the first year of marriage, you cannot enroll now.

Dear Muster,

I enrolled my spouse in SBP when I retired. When we divorced, we agreed not to change to former spouse SBP coverage, so I told DFAS to suspend my spouse coverage since I had no spouse. I remarried two years ago and did not enroll my second spouse in SBP. Now I hear my spouse was automatically enrolled a year ago and I owe premiums from that date. Is that right? LTC G, Fairfax, VA

Dear LTC G,

You had spouse coverage in a suspended status. To cancel that coverage when you remarried you had to act before the one-year anniversary of the event.

ARPERCEN destroys pre-1995 requests

ST. LOUIS _ The Veterans Services Directorate (VSD) at the U.S. Army Reserve Personnel Center (ARPERCEN) has announced that to improve response time to written inquiries from retirees, it is conducting a detailed evaluation of its open actions.

In most cases, written requests submitted before 1995 are being removed from a pending status and destroyed. Exceptions are requests with original documents which will be saved, cataloged and resubmitted for processing.

Retirees who submitted a request before Jan. 1, 1995 and never received an answer are asked to resubmit the request to the National Archives and Records Administration (NARA).

"It may sound like a harsh solution to our backlog problem" said Grace Bohler, acting director of VSD, "but, in the long run, it will improve customer service, and that is our ultimate goal."

"Before we destroy the older files, we screen them, searching for original documents," Bohler said. "It is common to get originals. In these cases, we are careful to pull these and enter the data into our computer base."

Requests submitted in 1995 and 1996 are also being screened for validity and to remove any duplicate documents. Once this cleanup is complete, it is expected some 40,000 retiree requests will be transferred to NARA.

The cleanup was brought about by an estimated 17 to 30 percent duplication of requests. Also, many requests were incomplete, resulting in inaccurate data entries and slowing request time.

"We routinely get second, third, up to six requests for the same information," Bohler said. "This has resulted in a large amount of extra mail sorting and review that only serves to slow processing time for requests."

Bohler added that a new contract between the two agencies calls for the transfer of all Army retiree records from ARPERCEN to NARA. This transfer is scheduled to be completed by May 1996. Now all retiree requests should be sent directly to NARA.

However, law and regulation require that some retiree requests still be handled by ARPERCEN. These will be forwarded from NARA. These inquiries include awards, service verification and issuing of identification cards.

Bohler explained that it takes an average of from 270 to more than 365 days to answer a typical inquiry. An anticipated effect of eliminating duplicate requests is reducing turnaround time to about 120 days, and providing more accurate and complete responses.

Once purging efforts are complete, VSD is expected to be capable of handling all inquiries as routine business through new procedures and increased automation. Under the new system, daily mail will be opened, immediately sorted by type of inquiry and entered into the computer data base. From here, the case can be tracked and handled in a more timely and efficient manner.

When resubmitting inquiries, retirees are asked to provide complete name, Social Security number and service number (if applicable), a clear explanation of the request, and a current address and telephone number.

"These data entries allow us to properly index, categorize and track each case," Bohler said.

The address for submitting requests to NARA is: National Personnel Records Center; ATTN: Army Reference Branch (NCPMA); 9700 Page Ave.; St. Louis, MO 63132.

Keep your records current

Too often, we hear about survivors who have been denied Survivor Benefit Plan (SBP) benefits or unpaid retired pay because the retiree failed to update retired pay records when the retiree married, divorced, remarried, was widowed or gained a child. We hear from spouses who did not receive the retired pay for the portion of the last month the retiree was alive because this money went to someone else whom the soldier had elected at retirement.

We hear from former spouses who lost SBP because neither they nor the retiree notified the Defense Finance and Accounting Service within a year of the divorce that SBP was part of the divorce.

To make sure your spouse (or former spouse) is prepared, keep a file of information that your spouse (or former spouse) will need when you die. Make sure your spouse (or former spouse) knows what benefits to expect or not to expect. Clip this article to the outside of your files as a reminder to keep your retired pay records current when your status changes.

Attention, "gray area" retirees! Medical care for your survivors

You are advised that Public Law 104-106, effective Feb. 10, 1996, repealed the link between Reserve Component Survivor Benefit Plan (RCSBP) participation and the survivors' entitlement to receive medical care following the date the member would have reached age 60. Previously, if a Reservist, upon reaching 20 qualifying years of service, chose Option A (decline to make an election until age 60) and died before reaching age 60, that Reservists' survivors were never eligible for medical care. Now the survivors of Reservists who chose Option A and died before age 60 are eligible for medical care when the Reservist would have reached age 60.

This change applies to everyone, Reservists who have already made an RCSBP election and survivors of Reservists who chose Option A and died before age 60 and who have previously been denied medical benefits. Since there is no way to identify those survivors in the latter category, we ask your help in passing the word of this entitlement change to any surviving spouse you know who is affected. If more information is needed, contact the Retirement Services Officer or ID Card Issuing Office at the nearest Army installation.

Clubs try redesign, credit cards to change losses into profits

As budget dollars decrease, the Army looks for more efficient, less expensive ways to get the job done. For example, as the Army club system tries different management techniques, you may notice some changes at your club.

First, you may find that the old club restaurant has been replaced by a specialty restaurant such as an Italian restaurant or steakhouse. This changing view of clubs has transformed club income from a loss of \$2.3 million in fiscal year 1993 to a profit of \$4.9 million in fiscal year 1995.

Second, you may find that your old club card has been replaced by a U.S. Forces Command ESPRIT card (which is a proprietary charge card like those issues by department stores) or by the Air Force Club Card. Both the ESPRIT and the Air Force Club Card programs are run primarily by contractors. The Air Force Club Card cost to the Army is less than 2 cents for every dollar charged. When the club card charge system is handled in-house, it costs the Army 12 to 14 cents for every dollar charged. Changing to a contractor-run system could save the Army about \$5 million annually.

The basics of burial at Arlington Cemetery

When putting together instructions for their families to use after their deaths, some retirees consider burial at Arlington National Cemetery.

Are retirees eligible for burial at Arlington? Yes. Although space is limited and burial at Arlington is restricted to only a few categories of those who have served honorably in the Armed Forces, retirees are among those eligible. Those eligible for Arlington burial include, "Those having at least 20 years active duty or active reserve service which qualified them for retired pay either upon retirement or at age 60, and those retired for disability."

Other categories of those eligible for burial at Arlington include: those who have died on active duty; veterans honorably discharged for 30 percent (or more) disability before Oct. 1, 1949; holders of the Nation's highest military decorations (Medal of Honor; Distinguished Service Cross; Air Force Cross or Navy Cross; Distinguished Service Medal; and Silver Star) or the Purple Heart; certain POWs who died on or after Nov. 30, 1993; the spouse or unmarried minor (under 21) child of any of the previous categories or of any person already buried in Arlington; an unmarried dependent student up to age 23; an unmarried adult child with physical or mental disability acquired before age 21; and, provided certain special requirements are met, a veteran who is the parent, brother, sister or child of an eligible person already interred is eligible if interment is in the same grave as the primary eligible, the veteran's spouse must waive eligibility for Arlington, and the veterans have no dependent children at the time of death.

Those not eligible include: parents, brothers, sisters, or in-laws, even if they are the dependents of an eligible person (exceptions were given in the previous paragraph); the remarried surviving spouse of an eligible person, unless that person is no longer remarried at death; a person whose last discharge was less-than-honorable. (Note: For brevity, the previous categories are generally described. For more detail or evaluation of particular cases, contact: The Superintendent, Arlington National Cemetery; ATTN: ANNC-ADI; Arlington, VA 22211).

In addition to ground burial, Arlington also has a columbarium for cremated remains. Any honorably discharged veteran, that veteran's spouse or dependent children may be inured there. The ashes of a person who meets the criteria for burial can either be inured in the columbarium or given ground interment, according to the wishes of those eligible or next of kin.

For information on shipment of cremated remains, contact the above address.

Commissary shoppers save 30%

FORT LEE, VA _ Re-engineering and streamlining by the Defense Commissary Agency (DeCA) since its inception five years ago are paying off with a significant rise in shopper savings which have reached almost 30 percent.

The 1996 Market Basket Price Comparison Study, done primarily to determine differences between commissary and private sector supermarket prices and the savings to patrons, found that the average savings for those who shop in the contiguous U.S. is 29.7 percent. That's 6.3 percent more than the savings found in a 1992 Market Basket Price Comparison Study, the last one done for DeCA.

DeCA contracted Wirthlin Worldwide to do the study. The study considered a representative random sample of commissaries (30 in the U.S., 12 overseas one in Alaska and one in Hawaii)

and commercial grocery stores near the contiguous U.S. commissaries. The study gathered and compared prices of about 600 items sold in the stores, representing a broad range of what grocery stores sell.

The 29.7 percent savings figure came out of a price comparison that includes sales tax for commercial grocers, and surcharge for commissaries. Data from overseas stores was not included in this comparison, because comparable data from overseas civilian grocers was not obtainable. As an internal management tool; however, data from the overseas commissaries was compared with data from the stateside commissaries.

"What this means is that patrons who do all their grocery shopping at their commissary will come through with very significant savings. And delivering savings to our customers is what the commissary system is all about, because we are a most valued part of the service member's total compensation package," said MG Richard E. Beale, Jr., DeCA's director.

The study also serves as a tool for DeCA management to evaluate policy changes and operational procedures.

The Army Chief of Staff's Retiree Council included the preservation of the commissary system as one of the key issues that it reported to the Army Chief of Staff after its annual meeting. The chairs of all military retiree councils also recognized the preservation of the commissary system as a key issue when they presented retiree concerns to DOD officials.

How to change your tax withholding

As retirees, Survivor Benefit Plan (SBP) annuitants and the rest of the country struggled through the annual ritual of preparing income tax forms, many called or wrote asking, "How can I change my federal tax withholding?" or "How can I start or change a state tax withholding?"

The first thing to remember is that you need to request any changes affecting your retired pay or SBP annuity from your pay center, that is, retirees should contact the Defense Finance and Accounting Service's Cleveland Center (DFAS-CL) and annuitants should contact DFAS's Denver Center.

Retirees and annuitants can change their federal withholding by submitting an IRS Form W-4 to your pay center. Do not use an IRS Form W-4P.

For retirees to begin or change a state tax withholding, you need to write to your pay center, give the state to which payment is to be made and the fixed dollar amount of no less than \$10 a month to be deducted. Annuitants do not have the option of having state tax withheld from their annuities.

We've heard from retirees who had been claiming a tax exempt status at the old pay center in Indianapolis (DFAS-IN) but found themselves being taxed through DFAS-CL this January. The reason? DFAS-IN had not observed the IRS policy which requires those filing a tax exempt status to refile a tax exempt form annually. DFAS-CL has their computers programmed to start taxing those who don't submit the new form by a specific date in January each year. If you are one of those affected, you should file a tax exempt form with DFAS-CL every January.

Do you need supplemental insurance and TRICARE?

There is no one answer to this question; it must be answered on an individual and/or family basis. The following questions and answers prepared by the staff of the Army Surgeon General can be used as a guide when you consider this issue.

Remember, if you are age 65 or older and eligible for Medicare, you are not eligible for TRICARE/CHAMPUS.

- ***Are there pre-existing medical conditions in your family?***
Supplemental policies usually exclude pre-existing conditions from 6 to 12 months.

How does supplemental insurance pay under standard CHAMPUS and TRICARE Prime?

The supplemental plan usually covers CHAMPUS outpatient cost shares and inpatient fees after the supplemental deductible is met. Supplemental insurance will not pay the standard CHAMPUS deductible or enrollment fee for TRICARE Prime. The CHAMPUS deductible may apply toward the supplemental plan deductible.

What age groups do you and your family fall into?

Premiums are based on ages of individual family members. Supplemental plans usually have higher deductibles and premiums for older persons.

What is the health status of you and your family members?

The added coverage provided by a supplemental policy may be desirable if a family member has a chronic disease or disability.

Are CHAMPUS supplemental policies expensive?

Supplemental plans base premiums on age, certain health risk factors, the number of family members, etc. These costs are in addition to your CHAMPUS costs. Some insurers now offer Prime supplemental plans, with lower premiums.

Does your family have other health insurance through your civilian employment or spouse's employment?

If you have other health insurance, you may not need supplemental insurance. This is true in part because CHAMPUS is always second payer.

Do you plan to remain in the TRICARE Prime program?

TRICARE Prime has low cost shares, a broad benefit coverage and lower retiree family catastrophic cap when compared to TRICARE standard. **The cost-benefit structure of TRICARE Prime decreases the likelihood that supplemental protection will be needed.**

Conclusion: Advantages associated with CHAMPUS supplemental policies include: 1) acceptance of the CHAMPUS deductible as payment towards the CHAMPUS supplemental deductible and 2) supplemental insurance payment of CHAMPUS cost shares, inpatient charges/fees and military treatment facility subsistence charges. Some CHAMPUS supplemental plans have created a benefit program for TRICARE Prime enrollees and Extra users with lower

premiums, no deductibles and lower or no catastrophic limits. However, CHAMPUS supplemental policy premiums are usually based on individual family member ages and health risk factors. Military families should consider health needs, TRICARE coverage, supplemental insurance rules on pre-existing conditions and costs when making decisions on the need for this additional coverage.

TRICARE Regions 3, 4

Humana Military Healthcare Services of Louisville, KY, will begin CHAMPUS/TRICARE health care delivery and managed-care support services in Florida, Georgia, Alabama, Mississippi, Tennessee, South Carolina, and the eastern third of Louisiana July 1, 1996; however, as Echoes goes to press, the only information available was the toll-free line effective July 1, 1-800-444-5445.

The contract also covers the processing of CHAMPUS claims from Puerto Rico; Europe, Africa and the Middle East; the Pacific Area; and Canada, Mexico, Central and South America, Bermuda and the West Indies.

Reminder: If you are over age 65 and eligible for Medicare, you are not eligible for TRICARE or CHAMPUS.

TRICARE/CHAMPUS cancer trials expand

The TRICARE/CHAMPUS breast cancer demonstration project has been expanded to include clinical trials sponsored by the National Institute of Health's National Cancer Institute (NCI) for other cancers. The expansion of the demonstration became effective Jan. 1, 1996.

Remember, if you are age 65 or older and eligible for Medicare, you are not eligible for TRICARE/CHAMPUS. TRICARE/CHAMPUS-eligible cancer patients who meet clinical criteria for participation in NCI-sponsored studies will have better access to new cancer therapies. DOD participation in NCI-sponsored clinical trials for cancer will further research efforts and help determine the safety and efficacy of new ways of treating cancer.

The original demonstration, which began in 1994, allowed CHAMPUS to reimburse the costs for eligible patients who requested treatment for breast cancer under NCI-sponsored Phase III clinical trials. Participation in the expanded demonstration now includes Phase II and Phase III NCI-sponsored clinical trials and is extended to other cancers.

A TRICARE/CHAMPUS-eligible patient who has cancer will be evaluated initially by the patient's physician. If the patient agrees to consider a clinical trial after discussing the various treatment options with the physician, the physician will determine which clinical trials and participating medical institutions are available and arrange for evaluation of the patient at the chosen center. Providers seeking program information or authorization for treatment in an NCI-sponsored trial should call Palmetto GBA at 1-800-779-3060.

Upon identifying an appropriate NCI-sponsored trial and receiving authorization for treatment from the contractor, the physician will then arrange for an evaluation of the patient at the chosen center. Physicians at the center involved in the NCI-sponsored clinical trial will make the actual determination of eligibility, based on the clinical criteria for their study.

Participating institutions include NCI's network of cancer centers, university and community hospitals and practices, and military hospitals.

Normal TRICARE/CHAMPUS cost shares and deductibles will apply for demonstration participants.

For further information, contact the Health Benefits Advisor at the nearest military hospital.

When will TRICARE come to your area?

The TRICARE managed health care program is already in place in Hawaii, all along the West Coast (plus a small portion of northern Idaho), and in Oklahoma, Arkansas, and most of Louisiana and Texas.

When will your part of the country see TRICARE?

Remember, if you are age 65 or older and eligible for Medicare, you are not eligible for TRICARE.

In July 1996, TRICARE will come to South Carolina, Georgia, Florida, Alabama, Mississippi, Tennessee and the eastern third of Louisiana.

In early 1997, TRICARE is expected to be operational in Montana, most of Idaho, Wyoming, Utah, Colorado, the Dakotas, Nebraska, Kansas, Minnesota, Iowa, Missouri, Nevada, Arizona, New Mexico, and the western corner of Texas that includes El Paso.

The remaining states - from Wisconsin and Illinois east, and from Kentucky and North Carolina north - plus the District of Columbia, will see the beginning of TRICARE in August 1997.

Early versions of TRICARE have operated in some parts of the country for several years.

VA Questions and Answers -- DIC, disability

Q - For recipients of Dependency and Indemnity Compensation (DIC), what are the new rates for those of us in the post-1992 program, and how much extra is being added for each child?

A - Effective Dec. 1, 1995, survivors covered in DIC are receiving \$810 per month with \$205 additional for each child under age 18. Survivors covered in the earlier program (deaths prior to January 1993) are compensated according to the servicemember's pay grade.

Q - I am optimistic the outcome of my pending claim for disability will be favorable. If awarded, will it be retroactive to the date of the diagnosis or to when I filed the claim?

A - Compensation generally is awarded retroactive to the date of the veteran's claim filing.

Q - If I am already 30 percent service-connected for one condition and am successful

in getting another condition service-connected at an 80 percent rate, do I get just the higher of the two, or is it cumulative so that I would get the dollar value of both _ equivalent to more than the 100 percent rate?

A - The combined rating for an individual's service-connected disabilities results from consideration of the individual's abilities as affected first by the most disabling condition, then by the other disabilities in descending order of severity. Evaluations are not added, but are combined. The total evaluation will not exceed 100 percent. The table for combining these evaluations is part of the Schedule for Rating Disabilities found in the Code of Federal Regulations. (Note: Retirees, remember if you have not filed with the VA for a rating, it is never too late to do so.)

VA expands cemeteries to 4 states

The VA is planning to expand five national cemeteries in Mississippi, South Carolina, New York, and Texas.

The transfer of 12.1 acres to the Biloxi National Cemetery from the adjacent VA medical center will allow VA to keep the cemetery open until the year 2015. Without the additional acreage, the cemetery would have reached its capacity for new gravesites by 2004.

VA has accepted a 14.5 acre donation from the State of South Carolina to add to the Florence National Cemetery, expanding its capacity by 7,200 gravesites.

Recently signed legislation approved the transfer of land from DOD to VA's National Cemetery System for continued service at national cemeteries in Calverton, NY; Fort Bliss, TX; and Fort Sam Houston, TX.

The Navy is transferring 150 acres east of the existing Calverton National Cemetery to expand VA's largest cemetery and provide the space necessary for full service to continue beyond the year 2030.

The Army is transferring 53 acres to the Fort Sam Houston cemetery to provide 30,000 new gravesites and full service until the year 2010.

The Army is also transferring 22 acres to VA to expand the Fort Bliss cemetery, providing 15,400 new gravesites on land west of the existing cemetery and extending its capacity to the year 2020.

Mustard gas, stress disorder link found

Department of Veterans Affairs (VA) investigators have found that some World War II veterans who were subjects of mustard gas testing may have post-traumatic stress disorder (PTSD) as a result of their participation.

PTSD is an anxiety disorder typically associated with military combat, natural disasters, and personal or sexual violence, but it also may occur following accidental exposure to toxic substances or technological disasters. Reporting in the March issue of Military Medicine, the investigators said that half of those studied had significant PTSD symptoms at some point in their

lives because of participation in mustard gas testing. More than 40 percent exhibited current mustard gas-related PTSD symptoms.

The investigators are conducting a large-scale study of some 400 Army and Navy veterans who were exposed to mustard gas. An estimated 4,000 servicemen participated in tests using significant concentrations of mustard gas and Lewisite in chamber or field exercises in contaminated areas during World War II. VA authorizes compensation for certain illnesses to those veterans who were exposed to significant levels of mustard gas and Lewisite during WWII testing, as well as those exposed in WWI; those present at the Germany bombing raid on Bari, Italy; and those engaged in manufacturing and handling mustard gas and Lewisite during their military service. For more information, call the VA at 1-800-827-1000.

Retiree Activity Days

Following is a list of Retiree Activity Days (RADs) hosted by Retirement Services Officers (RSOs). RADs let you hear more about retiree benefits and programs and get together with other retirees and families. We have also included Retiree Seminars offered by our Navy counterparts and listed their phone numbers with the seminars. For information on an Army RAD, call the RSO hosting it.

- o Aug 3 Tobyhanna, PA Aug 3 Watervliet Arsenal, NY Aug 9 Ft Lewis, WA Aug 24 Marquette, MI (Ft McCoy) Sep 6 Ft McCoy, WI Sep 7 Ft Monmouth, NJ Sep 7 Carlisle Barracks, PA Sep 7 Redstone Arsenal, AL Sep 12-13 Ft Riley Health Awareness Sep 14 Ft Riley RAD Sep 16-17 Ft Riley Health Awareness Sep 14 Ft Dix, NJ Sep 19 Duluth, MN (Ft McCoy) Sep 20 Ft Sill, OK Sep 20 Ft Myer, VA Sep 20 Ft Snelling, MN(Ft McCoy) Sep 20-21 Ft Drum, NY Sep 21 Great Lakes, IL (Ft McCoy) Sep 21 Ft Leonard Wood, MO Sep 21 Ft Eustis, VA Sep 21 Groton, CT (860)449-3284 Sep 27-28 Ft Gordon, GA Sep 27-28 Ft Bragg, NC Sep 28 Ft Hamilton, NY Sep 28 Ft Meade, MD Sep 28 Grand Rapids, MI Sep 28 Ft Sam Houston, TX Oct 4-5 Ft Rucker, AL Oct 5 Naval Amphib.Base, Little Creek, VA (804)444-2102 Oct 5 Carlisle Barracks, PA Oct 5 Ft Huachuca, AZ Oct 19 USAREUR, Heidelberg Oct 19 Ft Polk, LA Oct 19 Ft Leavenworth, KS Oct 26 Rock Island, IL (Ft McCoy) Oct 26 Vicenza, Italy Nov 1-2 Ft Hood, TX Nov 2 University Park, IL (FtMcCoy)

VA news--contracts to vets, handbook

The VA has awarded more than \$1 billion in contracts to veteran-owned businesses since 1984.

VA is the only federal agency to establish an annual procurement goal for veteran-owned businesses. For fiscal year 1996, the goal is 8 percent of total procurement dollars.

To ensure that small veteran-owned businesses are part of the procurement process, VA's Office of Small and Disadvantaged Business Utilization (OSDBU) uses a variety of methods to reach out to the veteran-owned business community with information, training and assistance.

In conjunction with the Small Business Administration's Office of Veterans Affairs, OSDBU is seeking to forge working alliances with veterans' service organizations to conduct small business seminars and conferences across the country. Any interested veterans' service organization

should contact the OSDDBU small business outreach coordinator, Robert Moore, at (202) 564-8132. Federal Benefits for Veterans and Dependents, known as the Veterans Handbook, has been revised for 1996. The 98-page booklet describes benefits available to veterans and their families, such as medical care, education, disability compensation, life insurance, home loan guaranty, and burial. The book may be purchased for \$3.25 per copy by ordering GPO Stock Number 051-000-00209-1 from the Superintendent of Documents; PO Box 371954; Pittsburgh, PA 15250-7954. Visa and MasterCard orders may be placed by calling (202) 512-1800.

The entire booklet is also available on the Internet at VA's homepage on the World Wide Web server at <http://www.va.gov>.

How to change your address

The change of address form that usually appears on this page has been discontinued and will not be replaced. If you need to change or correct your address with the Defense Finance and Accounting Service's Cleveland Center (retirees) or Denver Center (annuitants) or the Army Reserve Personnel Center (Reserve retirees not yet age 60), you can call, write or FAX the center you need.

Address, phone, and FAX numbers of each center are printed on page 9 of each Army Echoes. If you're writing or FAXing your address change, include your Social Security number and sign your request. Remember, the addresses used for mailing Army Echoes are the residence addresses maintained by the Cleveland, Denver and St. Louis Centers. Do not send your change of address for Echoes to Army Retirement Services. We do not maintain or change your address.