

ODCSPER RETIREMENT SERVICES OFFICE: ARMY ECHOES
Issue 2, 1999 April – June

CSA Council Calls for Health Care Reform

For the third year, the Chief of Staff, Army, (CSA) Retiree Council made health care its major item of concern at its annual meeting. In its report to GEN Dennis Reimer, Army Chief of Staff, the council said, "Restoration of promised lifetime health care for all military beneficiaries continues to be the single greatest issue affecting the welfare of the 670,000 Army retirees..(it) continues to be a moral imperative that defines the relationship of America's Army with its retiree community."

The council cited efforts to improve TRICARE and Congressionally directed test demonstrations of Medicare subvention, Federal Employee Health Benefits Program (FEHBP)-65 and the expanded DoD Mail Order Pharmacy as welcome steps in restoring care for all military retirees; however, it expressed disappointment at the slow pace of improvements and the fact that DoD has no implementing plan beyond the current demonstrations.

The council also expressed concern that despite measurable progress in health care, this information has not reached all retirees because of budget cuts recently reducing the retiree bulletin *Army Echoes* from four to three issues a year and reducing or eliminating installation retiree bulletins.

The council commented, "In view of the Army's recruiting shortfall and the fact that military retirees have historically played an important role in influencing young Americans to volunteer for service in our nation's armed forces, the CSA Retiree Council firmly believes that enhanced communications with Army retirees is fundamental to the ability of the Army to man the force."

The council questioned using economy to measure the success of demonstration projects stating, "With a budget environment that now enjoys a surplus, derived in great measure by the \$750 billion peace dividend earned by the service and sacrifice of our nation's military retirees, the guiding principle for the leadership of the Congress and DoD must be fairness and equity – not affordability."

The council recommended four objectives whose accomplishment could bring about promised lifetime health care:

Continued TRICARE improvement: reducing the TRICARE Standard retiree catastrophic cap from \$7,500 to \$3,000 a year; raising the TRICARE Standard Reimbursement Levels in remote areas; streamlining TRICARE Standard claims processing; expanding TRICARE Prime outside catchment areas; expediting TRICARE Prime enrollment for CHAMPUS-eligible retirees outside the U.S.; and getting clear and concise health care information to all beneficiaries.

Full implementation of Medicare subvention: A three-year test of subvention authorized by the Balanced Budget Act passed in August 1997 is being conducted at six test sites. Since initial data show the test to be successful and within budget, the council recommends full implementation of TRICARE Senior Prime within the U.S. at the earliest opportunity.

Adoption of FEHBP-65: The FY 99 Authorization Act requires DoD and OPM to permit up to 66,000 Medicare-eligible military beneficiaries to take part in a three-year FEHBP demonstration beginning January 2000. The council called this a positive step

For about two-thirds of the military retiree population age 65 and older but decried DoD's reluctance to support the program because of cost. The council contrasted the cost of FEHBP coverage for 1.67 million federal civilian beneficiaries age 65 and older (about \$4 billion annually) with the cost of FEHBP for military retirees age 65 and older (about \$1 billion). The council pointed out that military retirees are the only federal retirees excluded from the FEHBP.

Establishment of a national mail order pharmacy program for Medicare-eligible military beneficiaries: Downsizing and budget cuts have left Medicare-eligible retirees without access to prescription drugs at military facilities. The FY 99 Defense Authorization Act expands the DoD National Mail Order Pharmacy Program and directs DoD to submit to Congress an expansion plan for including all military beneficiaries age 65 and older. The council said it was disappointed with DoD's failure to submit its plan to Congress by the March 1, 1999 submission date and is concerned that the rescheduled submission date of May 1 will further delay implementation of this program. The council urged DoD to vigorously support prompt implementation of this program.

The council also raised as a potential issue the decrease in the federal government's contribution to the Survivor Benefit Plan (SBP). Under the public law which established SBP in 1972, the government contributed a 40 percent subsidy, the retiree paid the remaining 60 percent. The government's share has fallen to about 30 percent. The council recommended a review of this cost share to return it closer to the original distribution.

The council presented these concerns to the Chief. Army council co-chairs meet with the Chief of Staff, Army, twice a year for updates on the progress on council issues.

To present the unified voice of the Army, Air Force, Navy/Marine Corps and Coast Guard retiree councils concerning health affairs, the CSA Council co-chairs joined with the chairs of the other Service retiree councils in presenting retiree concerns to the Honorable Rudy DeLeon, Under Secretary of Defense for Personnel and Readiness.

How Do Retiree Councils Represent You?

What is the Chief of Staff, Army (CSA) Retiree Council and how does it represent your interests?

The CSA Retiree Council, co-chaired by retired LTG Ellis D. Parker and retired SMA Richard A. Kidd, is made up of 14 Army retirees, seven retired officers and seven retired enlisted soldiers. Prospective members are nominated by their installation retiree council and approved by the CSA. At its annual meeting, the council reviews issues forwarded by installation councils and determines which should be reported to the CSA and which can be addressed at the installation level. All issues are answered and reported. This year, almost half of the 49 issues submitted concerned health care. So the way to make your voice heard by the CSA Retiree Council is to by getting involved with your installation retiree council. Installation retiree councils are made up of retirees in the area served by the installation. These councils review issues surfaced by the retirees in their area. Issues that affect only that installation are handled at the installation level. Issues that affect retirees and families Army-wide are forwarded to the CSA Retiree Council. Installation council activities are usually reported in the installation Retirement Services (RSO) newsletter and at the installation Retiree Appreciation Day (RAD). If you haven't heard about your Retiree Council recently, you can contact your RSO for more information on getting involved with your installation council.

Besides reading your *Army Echoes* and your RSO's installation newsletter, what's another way to keep on top of issues affecting retirees and families? Visit home pages through your computer at home or computers available to the public at your local library or community college. Of course,

we suggest our home page at <http://www.odcsper.army.mil/retire/retire1.asp>. Other good sources include the Army home page <http://www.army.mil>; your installation home page (if you don't have the address, use the search option on the Army home page); the TRICARE home page <http://www.tricare.osd.mil>; the Defense Finance and Accounting Service's home page <http://www.dfas.mil>; the Department of Veterans Affairs home page <http://www.va.gov>; and the Social Security Administration home page <http://www.ssa.gov>.

Highlights From Headquarters

Our office has just concluded a busy period supporting the Chief of Staff, Army Retiree Council; the DoD Retiree Advisory Council and participating in the Navy/ Marine Corps Retiree Council meeting. In October, we will attend the Air Force Retiree Council and continue our work with the Coast Guard Retiree Advisory Council. We have developed excellent inter-service cooperation on retiree issues which has resulted in an improved record of success. All of these organizations, in conjunction with the Military Coalition and the National Military and Veterans Alliance, have been actively involved in identifying retiree concerns and supporting or working legislative proposals with Congress to affect changes. The article on pages 1 and 4 talks specifically to what our CSA Retiree Council and the combined DoD Service Retiree Council has done to address our concerns. We all are aware that medical issues dominate the list of concerns and all Service Retiree Councils and the Associations continue maximum effort toward addressing those needs. We are making progress, albeit slow. Those of us who work these issues daily remember that, not many years ago, few would listen when we approached with concerns about the "broken promises" on health care; the need to address concurrent receipt of retired pay and veterans disability payments; or other issues of concern to our retired community. We are now finally seeing Congressional legislation introduced to address some of these issues. We also know that these "fixes" won't cover all our needs nor will they come quickly enough. Your support is key. We need you to get or stay involved. The article on page 4 tells you about the CSA Retiree Council and how you can work with us in some of these processes.

Many great soldiers and family members will be joining our retired ranks in the next few months, including the Chief of Staff of the Army and Mrs. Dennis J. Reimer. General and Mrs. Reimer have been exceptionally strong supporters of retired soldiers and retiree issues and their great concern and efforts have been instrumental in our success. We thank them, and all our retiring soldiers and family members, for their dedicated service to our nation and welcome them to the ranks of those "Still Serving" in America's Army.

Thanks for your support,

Gary F. Smith
Chief, Army Retirement Services

Attention Soldiers with 19+ Years, Retirement Is Coming

If you're an active duty soldier who just started receiving *Army Echoes*, don't panic, the Army is not trying to get rid of you. We are trying to send *Echoes* to all soldiers with 19+ years of active duty to help you prepare for retirement, whenever you decide to make that move. Reading *Echoes* and visiting your Retirement Services Officer (RSO) can help you and your family prepare for one of the biggest transitions in your life, from active duty to retirement.

The computer tape used to mail *Echoes* to soldiers with 19+ years is drawn from your personnel file. Home addresses are maintained for officers and unit addresses for NCOs. If you know anyone with 19+ years of service who isn't getting *Echoes*, suggest they visit the RSO to get a copy and visit their personnel office to check their address. We're also looking into using DEERS as the source of our addresses, so make sure your address is up-to-date with them.

Also be sure to visit the Army Career and Alumni Program (ACAP) office at your installation for help with getting a job.

SBP Open Enrollment – What Are Your Options?

Issue I announced that Public Law 105-261 called for a Survivor Benefit Plan (SBP) Open Enrollment period to be conducted from Mar. 1, 1999 through Feb. 29, 2000. Following is a summary of Open Season "can's" and "cannot's."

If You Have This Now...	You May Do This...
Full SBP & full SSBP	Nothing
Full SBP & no/partial SSBP	Add/Increase Supplemental SBP (SSBP) (up to 20%)
Spouse/FS only (full base amount)	Add child*; add SSBP
Child only (full base amount)	Add spouse/former spouse (FS); add SSBP
Spouse/FS (reduced base amount)	Add child*; raise base; if raised to full base, add SSBP
Child only (reduced base amount)	Add spouse/FS; raise base; if raised to full base, add SSBP
Insurable Interest	Nothing

No coverage	Cover any eligible beneficiary, at any base amount; if for full spouse, add SSBP
No eligible beneficiary	Nothing (Note: to enroll, you must take action within one year of gaining one.)

* Child coverage when with a former spouse election covers only children of the retiree's marriage to that former spouse.

If You Have This Now...	You May Do This...
Option A (decline)	Option B or C*
Option B (defer)	Option C*
Option C (immediate)	Option C*

* Note: The same election, base amount & SSBP options listed above are also available in Reserve Component SBP (RCSBP).

Cannot decrease the base amount.
Cannot decrease the RC-SBP option (C to B or A; B to A)
Cannot switch spouse to former spouse or former spouse to spouse
Cannot cover spouse and former spouse concurrently.
Cannot cover the children to a current spouse under the former spouse & child option.

Cannot elect for an insurable interest person if you were married at retirement or any time after.

Cannot add SSBP without covering full retired pay as the base amount.

Cannot elect SSBP for anyone other than a spouse/former spouse.

Cannot be ordered by a court to participate in the Open Season.

Cannot opt out of making monthly payments of the buy-in premium owed as part of enrollment.

Cannot deem an election, if a former spouse.

Cannot terminate coverage (per P.L. 105-85).

Cannot benefit from use of the pre-March 90 premium calculation, even if more advantageous.

Cannot benefit from the Social Security Offset method of annuity calculation; only the Two-Tiered System is available.

* For more open season information (and forms), call your RSO

DoD Prepares for Korean War Anniversary

From June 25, 2000, through July 27, 2003, DoD will commemorate the 50th anniversary of the Korean War. Special events are already being planned both in the U.S. and Korea. You can get involved in remembering this anniversary by becoming a Commemorative Community (see below). More information on the anniversary commemoration will be available at the home page: <http://korea50.army.mil>, or by contacting Department of Defense; 50th Anniversary of the Korean War; Commemoration Committee; 1213 Jefferson Davis Hwy, Ste 702; Arlington, VA 22202-4303, phone (703) 604-0831.

How to Get Involved

Military and civilian communities can become a Commemorative Community (C2) when they agree to develop annual programs and host a minimum of three events each year that honor veterans and their families, or support school programs in teaching the history of this era. Groups should file an application outlining their commemorative plans and provide Activity Reports

following the event or activity. DoD will provide educational and historical information to assist the groups in designing and implementing their programs.

Some possible activities include: commemorating the key historical events of the war; publishing service, ship, unit or activity history brochures; dedicating or re-dedicating an armory, Reserve Center or other facility to honor a Korean War veteran; participating in local parades with color guard or marching unit in Korean War uniforms; developing Korean War themes for graduation ceremonies, festivals, balls, races, runs and organization days and organizing volunteer groups – military and civilian – to visit veterans homes, hospitals and assist schools with Korean War commemorative and education programs.

C2s receive a certificate of designation from the Secretary of Defense; the Korean War Commemorative Flag; and use of the 50th Anniversary of the Korean War logo for approved purposes.

You can get an application to be a C2 by using the home page, address or phone number listed at the beginning of this article.

50th Anniversary Commem./Conf	University of Pittsburgh	3 June
Hostilities Commence (National)	Washington, DC	25 June
Hostilities Commence (International)	Seoul, South Korea	25 June
Korean Service Women's Commem.	Arlington National Cemetery	25 June
Task Force Smith	Suwon, South Korea	5 July
Task Force Smith	Arlington National Cemetery	7 July
Korean War Vets Ceremony	Korean War Memorial	27 July

40th ID Korean War Memorial Dedication	Vanderberg AFB, CA	1 September
Breakout of Pusan Perimeter	Taegu, South Korea	13 September
Inchon Landing	Norfolk, VA/Inchon, South Korea	15-17 September
Defense of/Breakout of Pusan	Washington, DC/Pusan, South Korea	16 September
Changjin (Chosin) Reservoir	Washington, DC/Demil. Zone, South Korea	25 October
Nations Parade	New York City	11 November
Evacuation of Hungman	Navy Memorial, Washington, DC/Pusan, South Korea	10 December

Remains of U.S. Soldiers Recovered in North Korea

WASHINGTON (AFP) — Remains believed to be those of six American soldiers were repatriated from North Korea across the demilitarized zone at Panmunjom May 14. A joint U.S.-N. Korean team operating for a month in Kujang County along the Chong Chon river, 100 miles north of Pyongyang, recovered the remains. This area is the site of November 1950 battles between the U.S. Eighth Army (2nd and 25th Infantry Divisions) and Chinese communist forces. This is the first joint remains-recovery operation in North Korea this year, and the 10th overall since these joint recoveries began in 1996. Since July 1996, these joint teams have recovered what are believed to be the remains of 35 soldiers. Three have been identified. These operations are the result of negotiated agreements between the governments of the Democratic People's Republic of Korea and the U.S.

CSA Council Chairs Take Part In New Health Council

GEN Eric K. Shinseki, the new Chief of Staff, Army (CSA), has formed a special council to report on health care issues to the Under Secretary of the Army and the Vice Chief of Staff of the Army. The Army Health Advisory Council (AHAC) will deal with issues affecting the entire Army – active, guard, Reserve, retiree and family members. The co-chairs of the CSA Retiree Council, retired LTG Ellis D. Parker and retired SMA Richard A. Kidd, are members of the AHAC.

AHAC meetings are called by the Director of the Army Staff who is the oversight chair of the group. The council met for the first time June 16. Another meeting is scheduled for late July

The Army Surgeon General is the Army Lead Agent for the group. Input from the AHAC will ensure that the Army Surgeon General can completely represent the Army position when dealing with the Assistant Secretary of Defense for Health Affairs. Other members include the Assistant Secretary of the Army (Manpower and Reserve Affairs); the General Counsel; the Deputy Chief of Staff for Personnel; the Deputy Chief of Staff for Operations and Plans; the Assistant Chief of Staff for Installation Management; the Director of Program Analysis and Evaluation; the Director of Management; and the Sergeant Major of the Army.

DoD Proposal for Funeral Honors

WASHINGTON — A DoD plan to improve the availability and delivery of military funeral honors for deceased veterans went before Congress April 19 for approval. When we went to press, the plan was still being reviewed by a congressional committee as part of the proposed FY 2000 DoD Authorization bill. The plan responds to a requirement in the fiscal 1999 Defense Authorization Act for DoD either to submit a funeral honors plan acceptable to Congress or, starting Jan. 1, 2000, to provide a three-person honor guard and the ability to play "Taps" at the funeral of any veteran. The presence of the uniformed military member for the flag presentation is the key difference. The current legislation doesn't require anyone in the honor guard to be uniformed.

We will give you an update on this topic in the next issue of *Echoes*.

A Source of Help in Central Florida

The Orlando Florida Military Retired Activities Office (RAO) has moved to the Defense Finance and Accounting Service building at the closed Naval Training Center in Orlando. The RAO, manned by volunteers from all services, is open Monday – Friday from 1000-1400 to serve retirees and family members of all services in Central Florida with questions on retiree benefits and entitlements. The RAO is in the DFAS-OR building, room 125, at 2500 Leahy Avenue, Orlando, FL 32893-1660, phone (407) 646-5575, FAX 5773, email RAO8@juno.com.

Census Bureau Wants You

Uncle Sam needs you – again – not the Department of Defense, but the Department of Commerce's Census Bureau. The Census Bureau needs your help with Census 2000.

Officials at the Census Bureau expect to hire more than 600,000 workers in what is traditionally called, "America's largest peacetime mobilization," our once-a-decade national headcount.

"We are opening hundreds of local census offices across the country and will have many management positions available," Clifton J. Taylor, national director of recruiting for the Census Bureau, said, "In addition, we will have thousands of field jobs. Former military members have many of the skills we're looking for."

Most of the Census Bureau jobs are for only a few weeks, but some management jobs will be through the summer of 2000. The largest number of positions available are census takers. Hiring for most census takers will begin January 2000.

Census takers are locally hired people who work in their own neighborhoods, locating addresses and interviewing household members. They will be paid weekly based on the average wage for the area and activity. Applicants for census jobs should be U.S. citizens, 18 years old, and should not be employed as a tax collector/assessor or law enforcement official. Male applicants born Jan. 1, 1960 and after must be registered with the Selective Service.

For information, call, toll-free, 1-888-325-7733

Army Takes Lead in AFRH Donations

The U.S. Soldiers' and Airmen's Home and the U.S. Naval Home, jointly called the Armed Forces Retirement Home (AFRH), want to thank the more than 2,200 Army retirees who recently set up allotments to the homes. The next highest number of retiree respondents come from the Air Force with just over 300 people contributing. To date, the AFRH has realized more than \$111,000 in voluntary retiree allotments, 81 percent coming from the Army.

The Voluntary Retiree Allotments are important to the future of the Homes, which have had a serious funding deficit due to Congressionally-mandated military downsizing. Since 1990, active duty funding from the 50 cents a month withholding and fines and forfeitures has dropped 39.1 percent, a total of approximately \$142 million.

As little as \$1 a month, \$12 a year, will help ensure that the AFRH does not vanish. All the money you donate goes directly to the AFRH Trust Fund, which supports the homes. There is no overhead and your money is tax deductible.

Just send a letter to DFAS-CL/FR, PO Box 99191, Cleveland, OH 44199-1126; with your name, social security number, and the amount of the allotment made to: Armed Forces Retirement Home, 3700 North Capitol St., Washington, DC 20317 (Blanket Code L-68).

For those with Internet capabilities, there is a form that can be downloaded from the Home's web site: <http://www.AFRH.com>. Retirees can also call 1-800-422-9988 to have a form sent to them.

What do you get for your money? You get security. The AFRH is your personal nest egg — a cheap long-term care insurance policy. Although you may not need the homes now, the future holds no guarantees, or you may just want to come for the activities, camaraderie and peace of mind. You can! The homes are for you.

Who's Eligible

Veterans are eligible to become a resident of either the U.S. Soldiers' and Airmen's Home or the U.S. Naval Home if their active duty service in the military is at least 50 percent enlisted, warrant officer, or limited duty officer (Navy category) and they are:

- Retirees with 20 or more years of active duty service and are at least 60 years old, or
- Veterans unable to earn a livelihood due to a service-connected disability, or
- Veterans unable to earn a livelihood due to non service-connected disability, and who served in a war theater or received hostile fire pay, or

- Female veterans who served prior to 1948.

Get Involved with Army Family Action Plan

The next HQDA Army Family Action Planning (AFAP) Conference is set for November 13-19, 1999, in the Washington, DC area. The AFAP program looks to soldiers, retirees and families to let leadership know what their concerns are with the quality of life they are experiencing on and after active duty. The AFAP process ensures that issues selected by soldier and family member delegates are formally addressed and worked toward resolution.

The process leading to the Army-wide conference begins at the grass roots level, when symposia are held at installations, and soldiers, retirees, Department of the Army civilians and family members discuss their concerns about critical quality of life issues affecting America's Army.

You can make your voice heard by attending local AFAP seminars. It's here that the Army will find out about your concerns. It's here at the local level that many problems are solved. This is where the AFAP process begins, and it is up to you to speak out and make a difference for your community and the Army.

How do you participate in AFAP? Contact your local Director of Personnel and Community Affairs (DPCA), your Army Community Service (ACS) office, or your Family Support Group coordinator. Volunteers are needed and welcomed. You can contribute your good ideas for quality of life issues. You can put your efforts toward assisting with planning and supporting conferences. Or you can participate as a delegate actually developing issues.

If you have prior AFAP experience, you may be eligible to participate in the HQDA conference as a delegate. Volunteers are also needed to fill conference work group management team positions. Delegate candidates need AFAP experience in order to be familiar with the process, but experience at the local or MACOM level, not HQDA. If you are interested, contact your MACOM AFAP Coordinator and let them know.

Commissaries Phase in 1% Price Hike

Commissaries will adjust prices on grocery department items to recover total cost of products. This will be phased in from July 1 through Oct. 1, 1999. The Defense Commissary Agency (DeCA) provided this list of questions (and answers) that commissary customers have been asking.

Why is DeCA Changing Prices Now?

We have to recover our resale operating losses. DeCA accumulates about \$50 million a year in operating losses. DoD policy has always required the commissary to recover operating losses from the customer, as with any business. In the past, this recovery was not necessary because of sufficient stock fund cash levels in DoD. In 1993, defense cash fund levels were reduced to support weapon modernization. Today's commissary cash stock fund is not large enough to absorb losses.

What Are You Doing To Reduce the Impact On Commissary Shoppers?

It's our everyday job to pursue best prices from our suppliers, so we can pass on the best savings possible to our customers.

How Will DeCA Recover Its Losses?

DeCA has always recovered total product costs when we price items in our meat and produce departments. We will phase in total cost recovery for grocery department items, starting July 1 and becoming fully effective Oct. 1, 1999, by adding 1 percent to the price of the items. Cost recovery is consistent with the commissary mission to sell grocery items at cost to support military quality of life.

How Do Commissary Losses Compare To Civilian Supermarket Losses?

Very favorably. Our losses run about half of the average for civilian supermarkets. All supermarkets stores suffer inventory losses due to factors such as accounting errors, theft, damage or spoilage. The small fraction of losses not collectible is known as "shrink." Commercial industry standards for shrink averaged 2.08 % over the last five years ending 1997, as reported by the National Supermarket Research Group. DeCA has averaged 0.96% over the three fiscal years ending 1998, a performance attributable to our shrink awareness program, pricing and accounting automation and other business process improvements.

Why Can't You Pay For This With the Commissary Appropriation and Minimize Impact On the Shopper?

The law directs us to establish selling prices for commissary items that recover the total product costs, including losses. Commissary items are purchased from a revolving stock fund which is replenished when the items are sold, separate from the appropriation.

Is This An Increase in The Surcharge?

No, it's pricing items at the shelf to recover total cost of products, just as commercial supermarkets do.

I Can Get A Lot Of Things Cheaper Downtown. With This Happening, Why Should I Keep Shopping At The Commissary?

You will continue to save money! Your overall grocery savings will be higher if you regularly shop at your commissary. Downtown retailers can sell certain items at or below their cost to get your attention, but they make up the difference on other items and profit by charging you higher prices throughout their stores. DeCA doesn't make a profit. When you shop your commissary, you're getting the best overall prices.

Consumer Advocate

FT LEE, VA. — DeCA has named Kaye Fannin as consumer advocate for commissary shoppers.

"I believe that any business gets better when it listens to its customers," said Fannin. "I am excited by this opportunity to work closely with commissary shoppers, and voice their suggestions and concerns to the DeCA management."

Fannin has worked with commissaries since the beginning of her civil service career nearly 20 years ago. You can call her at 1-800-699-5063, ext. 48772, email her at fanninpf@hqlee.deca.mil, or write to her at DeCA; 1300 E Ave.; Ft Lee, VA 23801-1800.

Bad Check Fees

FT LEE, VA – Customers who write bad checks in commissaries now pay an administrative fee as the result of a recent federal law.

"The great majority of our customers write good checks," said Richard Beale, Jr., DeCA director. "In fact, more than 99.8 % of checks written to commissaries clear just fine. For the very few that don't, this puts our collection procedures in line with other retailers."

Correction

In "DeCA convenes first Retiree Council", in Issue 1, 1999, we omitted retired Army MG William Gourley from the list of members. MG Gourley was instrumental in working with DeCA and AAFES to initiate these councils. We apologize for this omission and appreciate his support and effort on behalf of the retired community.

How To Apply For An ID Card By Mail

If you need a new ID card, but can't get to the ID card issuing facility because you live far from a military facility; are physically handicapped; have no means of transportation; or are hospitalized or sick; you can request an ID card by mail from the nearest military installation.

All military installations that have ID card issuing facilities are located on the internet at <http://www.dmdc.osd.mil/rs!/>. If you don't have access to the internet, check the government section of your phone book or call the Retirement Services Officer for your area (see pgs 9-10 of any *Echoes*).

If you're not enrolled in the Defense Enrollment Eligibility Reporting System (DEERS), you can call the nearest military installation to see what documents they need to process your application. Any documentation required to enroll a person in DEERS such as a marriage certificate, birth certificate or Social Security card must be an original or a certified true copy.

If you're enrolled in DEERS and need to renew your ID card, you will need an 8" x 10" portrait-type photograph (head and shoulders) when you send in your application. This photograph must be notarized on the back.

You can call or write the ID Card Facility to ask for an ID card application. The facility will notify you of eligibility and enrollment for DEERS. When you write, you should include a written description of physical characteristics (i.e., height, weight, color of hair, color of eyes) so that the facility can include it on the application they send you. They will send a DD Form 1172, Application for Uniformed Services Identification Card DEERS Enrollment, with instructions for obtaining an ID card.

Follow all instructions and mail the DD Form 1172 and photograph back to the ID Card Facility. The facility will send the ID card back for your signature. You then mail the card back to the

facility. The facility will laminate and send the completed ID card back to you by certified mail. They will also return the original photograph and any original source documents.

New Name for Space-A Commercial Charter

SCOTT AFB, IL(AFPS) — Don't be puzzled when you're poring over schedules looking for free space-available military flights and run across the term "Patriot Express." That's Air Mobility Command's (AMC) new name for its commercial charter flights.

"We felt 'Cat B' gave military travelers the feeling they were receiving a lower standard of service," said CPT Charlene Purtee, chief of AMC passenger commercial services. "These flights have never been what you would consider 'second class.' We're trying to make more people aware that 'Patriot Express' is a cost-effective and convenient way to travel."

AMC contracts charters with commercial carriers because it's an economical, efficient way of moving large numbers of personnel, Purtee said. Contracting also frees Air Force planes for primary military missions.

Charter seats not filled by official fliers are assigned free to space-available travelers, who include active and reserve component members on leave, retirees and academy cadets.

From the travelers' standpoint, the charters eliminate the hardships incurred when higher priority missions divert military aircraft, she said. Personnel also can plan moves and leisure travel months ahead because flight schedules are set well in advance.

"We contract with established carriers and are confident we will be on time for the majority of our flights," Purtee noted. Besides scheduling benefits, Patriot Express flights have the usual amenities travelers expect — and some they might not.

"The flights are at least equal to the commercial economy class and, in some cases, a bit better," she said. For instance, travelers on some flights can expect hot towels, free movies and headsets, and more leg room than found on most commercial airlines, she noted. "Also, we are able to transport more pets than normally accommodated on commercial routes."

Patriot Express flights currently leave out of Seattle-Tacoma International, Los Angeles International, Baltimore-Washington International, Atlanta Hartsfield International and Charleston (S.C.) International.

Visit the Air Mobility Command web site <http://public.scott.af.mil/hqamc/> or call the nearest military air field or the military section of one of the airports listed above for details.

Retiree Dental Plan Cuts Premiums

As its second contract year began, Delta Dental officials reported that the number of retirees and family members enrolling has brought down the premiums for their TRICARE Retiree Dental Plan.

The plan, which began Feb. 1, 1998, now covers 426,151 retirees and family members. (Note: Although the plan is called the TRICARE Retiree Dental Plan (TRDP) , the plan is open to all

military retirees, regardless of TRICARE status, eligible family members and unremarried surviving spouses of deceased military retirees.)

Monthly rates are dropping between 42 and 70 cents for single coverage, 89 cents and \$1.43 for two-person coverage and \$1.98 and \$2.35 for family coverage. Actual reductions depend on which of the five regions the subscriber lives in, based on ZIP code.

Note: the rates could change again next year if enhancement of the retiree dental plan to make it more similar to the active duty family member plan is approved as part of the DoD Authorization Act. If that occurs, we will report it in a future issue of *Echoes*.

Those eligible include: military retirees; "gray area" Reserve retirees entitled to retired pay but not yet age 60; the surviving spouse of a retiree; the eligible child, under age 21, of a retiree; under age 23 if a full-time student or who became disabled prior to age 21 (or 23 if a full-time student); an unremarried surviving spouse or eligible child of a deceased retiree or of a soldier who died while on active duty for more than 30 days (if these active duty survivors are not eligible for the Family Member Dental Plan.) The dental plan provides services to persons throughout the United States, Puerto Rico, Canada, the U.S. Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands.

Enrollees pay the full premium for coverage. Premiums are collected from enrollees through payroll deductions from those who receive retired pay. Those who do not receive retired pay are billed directly for premiums by Delta.

Initial enrollment in the program is for at least 24 months. Enrollees must submit a payment equal to four months' worth of premiums with their initial enrollment application. After the first 24-month period, enrollees may choose to stay enrolled on a month-to-month basis.

The plan features a variety of diagnostic, preventive, restorative, endodontic, periodontic and oral surgery services, at specified levels of cost-sharing. Some services (mostly diagnostic and preventive services) do not require a payment by enrollees. Other services require enrollees to pay cost-shares of 20 or 40 percent. There is a \$50 annual deductible before cost-sharing begins.

Enrollees can maximize their benefits by choosing one of nearly 24,000 "DeltaSelect USA" dentists, or they can choose any licensed dentist. In-network dentists agree to bill Delta directly for covered services, honor Delta's fee schedule and abide by the program's processing policies. Enrollees who choose a non-network dentist first pay that dentist's regular fees, then submit a claim to be reimbursed by Delta in accordance with its out-of-network fee schedules.

If you want to request a packet and information, you can call 1-888-838-8737 . You can also enroll over the phone with a MasterCard or VISA. Another way to get information and enroll is to go to Delta's web site (<http://www.DDPdelta.org>). The web site allows members to determine their applicable premium based on input of their ZIP code and to download a copy of the enrollment form. The completed form may be mailed in, along with the 4-month premium prepayment (which is also shown on the web site) by check, money order, or MasterCard/Visa.

Note: Covered benefits are subject to certain limitations. Sealants and space maintainers are preventive services covered at 80% and apply towards the annual deductible and annual maximum. Some emergency services are covered at 80%.

There is an annual deductible per contract year (February to January) of \$50 which applies to every covered person. Delta will pay up to \$1,000 of allowable charges per enrollee per contract year. Diagnostic and some preventive procedures are not subject to the annual deductible and maximum. See covered benefits chart below.

Diagnostic	100%	No	No
Preventive	100%	No	No
Restorative	80%	Yes	Yes
Endodontic	60%	No	No
Periodontic	60%	No	No
Emergency	100%	No	No
Drugs	60%	Yes	Yes
Postsurgical	60%	Yes	Yes

Medicare-Eligibles Near 3 Closing Military Bases To Keep Pharmacy Benefit

WASHINGTON - Despite the closing of three U.S. military bases on May 1, Medicare-eligible beneficiaries, and their Medicare-eligible family members, who have been using pharmacies at those bases won't lose their pharmacy benefits.

Those who live within the service areas (also called "catchment" areas) of military hospitals at the three bases-which were closed under the Base Realignment and Closure (BRAC) authority-will be able to get their medications only from TRICARE network retail pharmacies, or from the National Mail Order Pharmacy Program (NMOP).

The three bases are: Onizuka Air Station, Sunnyvale, CA; Red River Army Depot, Texarkana, TX; and Ft McClellan, Anniston, AL.

Persons affected by base closures have the same pharmacy benefit as those who use TRI-CARE Extra. They're charged 20 per cent co-pays for each prescription obtained from network retail pharmacies, and \$8 for those obtained through NMOP. There are no annual deductibles to satisfy.

Eligible persons who live outside the catchment area of one of the military hospitals on the closed bases, but were reliant on the base pharmacy at least once within the 12 months immediately before its closure, may be eligible to use the pharmacy benefit. To confirm eligibility, these persons must complete a Declaration of Reliance form, which can be obtained by calling the Defense Enrollment Eligibility Reporting System (DEERS), at 1-800-538-9552.

For more information about NMOP, call the contractor, Merck-Medco, at 1-800-903-4680, or visit the web site at <http://www.tricare.osd.mil/tricare/nmopp.html>.

Who can help

If you have a TRICARE question, call your local TRICARE Service Center, military hospital health benefits advisor (HBA) or send email to tricare_help@otsg-amedd.army.mil.

Also, if you haven't been able to solve a health care problem through other channels, Army hospitals have a retiree ombudsman to help you with these problems. If you have such a problem, contact the nearest Army medical facility and ask to speak to the retiree ombudsman.

Automatic TRICARE Prime Re-Enrollment

<**PWASHINGTON**— DoD has announced a change that will make "TRICARE Prime" repeat participation easier. The need to submit an annual TRICARE re-enrollment form is obsolete. In a phased introduction, re-enrollment is automatic unless a beneficiary declines the "Prime" option.

Dr. Sue Bailey, assistant secretary of Defense for Health Affairs said, "Automatic re-enrollment eliminates the need for a Prime beneficiary to fill out paperwork every year. The improvement will remove a burden on our beneficiary and improve the TRICARE Prime benefit by simplifying the process for our Prime enrollees."

Beneficiaries will begin receiving notification from their regional contractors about the automatic re-enrollment 30 days prior to the anniversary date of their original sign-up with the military managed care plan. The regional contractor will send written notification, and if applicable, an invoice for the annual enrollment fee. The invoice will include options for full or quarterly payments. Monthly installment payments also will be accepted via allotment or electronic funds transfer, beginning next year. A beneficiary may decline further TRICARE Prime enrollment, and may re-enroll at any time as long as he or she remains eligible. Beneficiaries covered by Prime who want to continue their coverage, but do not receive notification of automatic re-enrollment, or those with other questions about TRICARE, should contact their regional TRICARE office. Regional offices can be reached by calling the following toll-free numbers: **Northeast** (Region 1), 1-888-999-5195; **Mid-Atlantic** (Region 2), 1-800-931-9501; **Southeast** (Region 3 and 4), 1-800-444-5445; **Heartland** (Region 5), 1-800-941-4501; **Southwest**(Region 6), 1-800-406-2832; **Central** (Regions 7/8), 1-888-874-9378; **Southern California** (Region 9) and **Golden Gate** (Region 10), 1-800-242-6788; **Northwest** (Region 11), 1-800-404-0110; **Pacific** (Region 12), 1-888-777-8343; **Hawaii, Alaska**, 1-800-242-6788; and **Europe, Latin America, Canada** 1-888-777-8343.

TRICARE Senior Prime (Medicare Subvention) Test: The test is going on at San Antonio, TX; Sheppard Air Force Base (AFB), TX; Ft Sill, OK; Keesler AFB, MS; Ft Sill, OK; Sheppard AFB, TX; Ft Carson, CO; Air Force Academy, CO; Naval Medical Center, San Diego; Ft Lewis, WA; and Dover AFB, DE. No results have been reported yet. Initial results have been positive but more detailed reports will be forthcoming.

FEHBP: Enrolling up to 66,000 military retirees over age 65 in the Federal Employees Health Benefits Program (FEHBP) is still scheduled to begin during the federal employees' fall 1999 health benefits open season scheduled for November and December. The sites selected are Dover AFB, DE; Commonwealth of Puerto Rico; Ft Knox, KY; Greensboro, Winston-Salem and High Point, NC; Dallas, TX; Humboldt County Area, CA; Naval Hospital, Camp Pendleton, CA; and New Orleans, LA.

Cold War Certificate: There's a new web site address -- <http://coldwar.army.mil>. All other information from the Issue 1, 99 article is current. Because of the volume of requests received, it may take as long as four months for those requesting certificates to receive them.

SBP Disenrollment: Public Law 105-85, section 641, allows a retiree participating in the Survivor Benefit Plan (SBP) to terminate coverage between the 25th and 36th month following commencement of retired pay, with spouse concurrence. The law also called for a one-year, one-time opportunity for those who had been retired more than two years on the start date of the Open Season (May 17, 1998) the opportunity to terminate coverage. The "season" for the latter group ended on May 16, 1999, with the following termination statistics provided by the Defense Finance & Accounting Service - Cleveland Center (DFAS-CL).

- Army 2,390 (about 1 percent of total participants)
- Air Force 1,932
- Navy 1,388
- Marine Corps 235

SBP Open Enrollment: Began Mar. 1, 1999 and continues until Feb. 29, 2000. For more information, read the articles in this issue and Issue 1, 1999, visit our home page at <http://www.odcsper.army.mil/retire/retire1.asp>, and/or contact your Retirement Services Officer (RSO).

Cost of Living Adjustment to Retired Pay and SBP Annuities: This figure is determined by the difference between the third quarter consumer price indices for 1998 and 1999. Since the third quarter doesn't end until the end of September 30, that figure is not available yet.

National Mail Order Pharmacy benefit for all Medicare-eligible retirees: Still being considered by Congress; however, estimated cost is now over \$400 million a year (previous estimate was \$267 million.) Higher costs will hurt chances of implementation.

VA Investigates Unprocessed Mail

WASHINGTON — As the result of an internal investigation, the Department of Veterans Affairs (VA) Board of Veterans' Appeals (BVA) recently discovered more than 1,000 pieces of mail that had been delivered to the BVA, but had not been processed. The mail ranged from several days to more than a year old. The mail came from: Illinois, Indiana, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, Oklahoma, South Dakota and Wisconsin.

"We are taking immediate steps to notify the affected veterans and their representatives," Eligah D. Clark, BVA chairman, said. While this one instance does not point to a system-wide failure, we must assure the people who depend on us that their cases are reviewed completely, and that decisions are made on all the information we should have before us."

BVA staff are evaluating the information in the mail to determine whether it includes evidence that could have due process implications or would change the outcome of a Board decision. Those cases will be reopened and readjudicated.

Correction

In Issue 1, 99, we reported that holders of Servicemember's Group Life Insurance (SGLI) or Veterans Group Life Insurance (VGLI) diagnosed as terminally ill could receive up to half the face value of their SGLI/VGLI policy if diagnosed as having a life expectancy of less than 12 months. That is incorrect. They must have been diagnosed as having a life expectancy of less than **nine** months.

Short Shots

(Note: Publications, organizations and events that may be of interest to retirees appear in this section as a service to retirees. This doesn't imply that Army Echoes endorses these publications or programs. Any problems should be directed to the specific publisher or organization.)

The **1999 Retired Military Almanac** is now available. Order directly from the publisher for \$6.95 (\$8.95 for 1st class mail) if you mention **Army Echoes** when you order. This 252 page almanac contains information on health care, legislation, veterans benefits and many other topics affecting retirees and their families. To order, write to Uniformed Services Almanac, Inc., PO Box 4144-AE, Falls Church, VA 22044, or call toll-free (888) 872-9698 for credit card orders. The **1999 Uniformed Services, Reserve Forces** and **National Guard Almanacs** are also available.

AAFES MWR Contribution Up

AAFES' 1998 dividend payment to the services is \$238.3 million or 69 percent of AAFES' FY 98 earnings. AAFES' contribution to the Army Morale, Welfare and Recreation (MWR) fund is \$142.7 million and \$88.7 million to the Air Force Services fund. This represents a soldier and airman per capita contribution of \$271.58, the highest in AAFES history. AAFES contributions to the Navy and Marine Corps are \$6.9 million. In the past 10 years, AAFES has contributed more than \$2 billion to the Services' quality of life programs.

Retirees, Keep Your Mobilization Data Current

Although retiree status and verification forms 1752 and 1752-E are no longer sent to retirees by the Army Reserve Personnel Command's (AR-PERSCOM) Mobilization Branch, retirees still have a duty to keep their computerized personnel records accurate with a current address, home and work telephone numbers, and any changes in their ability to serve if mobilized.

If changes in a retiree's health will prevent further military service, the retiree should provide the center with a description of the physical condition and a physician's statement or VA form listing the conditions and percent of disability. The statement must include a diagnosis, date of illness or injury, prognosis, and an expected date of recovery.

Retirees should continue to advise AR-PERSCOM when the following information or conditions change: Address; Phone Number (Home and Work); Ability to serve (Physical Condition).

Retirees can update their records in several ways.

Mail: **Commander**
AR-PERSCOM;
ATTN: ARPC-PSP-A
1 Reserve Way
St. Louis, MO 63132-5200

Phone: 1-800-325-2660 or (314) 592-0554

FAX: (314) 592-0582

E-Mail: jeffrey.graham@arpstl-emh2.army.mil.

Did You Change *Both* Your Addresses?

Every issue we tell you where to change your address for *Echoes* (see below). This is a reminder for those of you who change your address with your finance center (retirees and Survivor Benefit Plan (SBP) annuitants). The Defense Finance and Accounting Service (DFAS) maintains both your pay and your correspondence addresses. We have heard from retirees and annuitants who can't figure out why *Echoes* stopped coming or their 1099R didn't arrive since they changed their address with DFAS. When they go back to DFAS, sometimes they find that they changed their pay address but not their correspondence address. So, remember – when you change your address with your finance center, make sure DFAS has correct information on both addresses.