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

DAPE-HRR

2 May 2014

MEMORANDUM FOR CHIEF OF STAFF, ARMY

SUBJECT: Annual Report of the Chief of Staff, Army Retiree Council

1. The fifty-fourth meeting of the Chief of Staff, Army Retiree Council (CSARC) was held at the Pentagon, 28 April – 2 May 2014. The Council is established in accordance with Army Regulation 600-8-7, *Retirement Services Program*, and administered under a charter approved by the Secretary of the Army. The Council represents slightly over one million Retired Soldiers and Surviving Spouses.

2. The Council extends its gratitude to GEN Raymond Odierno, Chief of Staff of the Army, SMA Raymond Chandler III, Sergeant Major of the Army and other distinguished Flag Officers and Civilians for their strong support of the Retiree Council and their update on issues impacting current and future Retired Soldiers and their Families.

3. The Council reviewed 22 issues nominated by Installation and Army Service Component Command Retiree Councils. Six involved health care issues, 7 related to benefits or entitlements, and 9 concerned enterprise level communications, Retired Soldier, or other areas. Each issue was reviewed by the Council and is discussed in detail in the Installation Report that is attached as Enclosure 4 to this report. Below are some of the key concerns and the Council's recommendations for how the Army should address them.

4. Health Care Concerns. The cost and access to health care remains the greatest concern of the retired community. We believe recent policy initiatives and new laws have put TRICARE on a sustainable financial footing. Key recommendations include:

a. Support welcoming Medicare-eligible Retired Soldiers (Tricare Plus) and their Families within the Army healthcare community. The office of The Surgeon General supports the provision of primary care to Medicare-eligible Retired Soldiers. In addition to being critical to graduate medical education programs and improved medical readiness, keeping the retired population within the military healthcare community maintains the trust and the promise to provide lifelong care. Treating more beneficiaries within Army medical facilities is a good business practice in that it is the least costly alternative. This action should also increase the available pool of providers for CONUS Retired Soldiers, thereby decreasing Medicare reimbursement concerns.

b. Support the maintenance of Express Scripts co-pays for generic drugs at no cost and at minimal co-pay increases for brand name pharmaceuticals. Also, support that co-pays never be raised more than the current year COLA. Maintaining co-pays at a minimal level will encourage utilization of the more cost effective mail order process. The result will be an economic benefit to the user as well as to the military. The Council recognizes that Congress mandates these fees.

5. Benefits and entitlements Concerns. The Council acknowledges the cost of providing benefits and entitlements to the retired community has grown over the last decade. Most importantly, they are part of a life-long contract Retired Soldiers and their Families agreed to and expected when they committed to serving, fighting, and winning our Nation's wars. Changing benefits without grandfathering currently

serving Soldiers and Retired Soldiers would adversely affect future recruiting and retention and break faith with the one percent who answered our Nation's call. Key recommendations include:

a. Retain the commissary benefit. Concur with CSA recommendation for a new DeCA business model that includes generic name brand products to reduce the DOD and Army subsidy. The subsidy reduction currently is less than 0.2% of the DOD Total Obligation Authority for 2014. Shifting the increased costs of maintaining commissaries will negatively impact Soldiers, Retirees, and Families quality of life and significantly impact junior members. Reductions in programs like the commissary, coupled with increased costs and pay reductions in other areas, targeted towards the serving military and retired populations creates doubt and commitment by the government to care for those who served. These impacts will subsequently impact the quality of the force and the ability to recruit the future all volunteer force.

b. Support of legislation that maintains the current COLA methodology vs. chained Consumer Price Index. Implementing the chained CPI proposal would be disproportional to the most vulnerable of our population, our disabled Veterans. Recommend an Army Staff proponent be designated to provide oversight of this and similar issues and information, as required, on impacts to the Army.

c. Issuing permanent IDs to Spouses over 65. CSARC, again this year, strongly supports this issue. Recommend the issuance of permanent IDs for spouses and surviving spouses in accordance with the June 2012 Joint Uniformed Services Personnel Advisory Committee recommendation to OSD allowing Retired Soldiers' spouses and surviving spouses to obtain permanent ID cards at age sixty-five if they purchase Medicare Part B. Doing so will acknowledge spouses' lifelong commitment to the Army and the Army's appreciation for their support and sacrifice.

6. Retirement Services and Enterprise Level Communication Concerns: The services provided to Retired Soldiers and surviving spouses through Army Retirement Services Offices and the two-way communications between the Army and Retired Soldiers is critical to making them Soldiers for Life. Key recommendations include:

a. Our Army's Soldier For Life program celebrates not only the richness of a full Army career, but also a rich and meaningful life as a Retired Soldier. Retiree Appreciation Days (RAD) are an integral means of keeping Retired Soldiers and their Families connected with the Active Army and informed on current issues. Retiree Appreciation Days can be supported with appropriated funds. However, in these days of diminishing funds the challenge becomes how to fully fund the Soldier For Life program. An independent regulatory review should be conducted to consider all sources of funding (e.g. appropriated, non-appropriated and commercial) to identify specific funding sources to support RADs.

b. Institutionalizing the Soldier For Life program through the creation of a Table of Distribution and Allowances and funding appropriately, strengthening the strategic SFL/RSO communication efforts internally and externally, and integrate and inculcate the mindset that Once a Soldier, Always a Soldier ... A Soldier For Life into initial military training.

7. Council members recognize the significant resource challenges facing our Army due to declining budgets and the resulting impact on personnel and programs. As part of the Army team, the retired community will continue to do its part in telling the Army story and supporting wherever and whenever needed. The ongoing contributions and volunteer service of so many of the one million plus Retired Soldiers and Surviving Spouses demonstrates our commitment to our Army, its Retired Soldiers, and Family Members

8. Council Members extend their thanks and appreciation for the outstanding support and assistance provided by Mr. John Radke, Department of Army Retirement Services Office, and his staff during the Council meeting. We also extend our thanks to the entire group of distinguished guest speakers listed at Enclosure 1 for the invaluable information and insight they provided.

KENNETH O. PRESTON
Sergeant Major of the Army
U.S. Army, Retired
Co-Chairman

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

Enclosures
1. Guest Speakers
2. Council Members
3. Unresolved Issues
4. CSA Retiree Council Installation Report

GUEST SPEAKERS

General Raymond T. Odierno, Chief of Staff, United States Army

Sergeant Major of the Army Raymond F. Chandler III

Lieutenant General Howard B. Bromberg, Deputy Chief of Staff, G-1, United States Army

Lieutenant General David Halverson, CG, Installation Management Command/ASCIM

Lieutenant General Robert Ferrell, Army CIO/G6

Major General Richard Thomas, Dir, Healthcare Operations & Chief Medical Officer, Defense Health Agency

Major General Marcia M. Anderson, Deputy Chief, Army Reserve, Office of the Chief, Army Reserve

Major General Gary J. Volesky, Chief of Public Affairs, United States Army

Major General Joseph S. Ward, USAF, Deputy Commander, AAFES

Brigadier General Van Coots, Assistant Surgeon General for Force Projection and Deputy Commanding General for Support

Brigadier General Ryan F. Gonsalves, Director of Operations, Readiness and Mobilization, Army G3/5/7, United States Army

Brigadier General Lester Simpson, Special Assistant to the Director, Army National Guard

Colonel Adam Rocke, Director, Soldier For Life Program

Sergeant Major Shane Chapman, Soldier For Life Program

Sergeant Major Anthony Moore, Executive NCO to the CSM, Army National Guard

Mr. Danny Devine, Project Executive, Disability and Medical Assessments, VA

Mr. John W. Radke, Chief, Army Retirement Services, Office of the Deputy Chief of Staff, G-1, United States Army

Mr. Thomas McKenna, Deputy Director, Retired and Annuity Pay, Defense Finance and Accounting Service

2014 CSA RETIREE COUNCIL ROSTER
CURRENT MEMBERS

NAME	IMCOM REGION	INSTALLATION
Co-Chairmen:		
LTG James J. Lovelace, Jr.	At-Large	At-Large
SMA Kenneth O. Preston	At-Large	At-Large
Members:		
COL Michael R. Molosso	Atlantic	Fort Jackson
COL Gerald Thompson	Atlantic	Fort Stewart
COL Michael Zang	Atlantic	Carlisle Barracks
MAJ Edwin S. Stone	Central	Fort Bliss
MAJ James R. Cunningham	Central	Fort Sam Houston
CW5 Robert L. Huffman	Atlantic	Fort Campbell
CSM Elijah King Jr.	Central	Fort Hood
CSM Joel Jenkins	Pacific	Schofield Barracks
CSM Tommy Williams	Atlantic	Fort Stewart
CSM Albert McFarland	Korea	USAG, Yongsan
SGM David B. Stewart	Europe	USAREUR HQs
SFC Susan J. Woods	Central	JB Lewis-McChord

ONGOING INITIATIVES

1. Continue to support the ongoing efforts between the Department of Defense and the Department of Veterans Affairs to improve the compatibility of the two health care systems to preserve and improve the benefits for all beneficiary groups.

2. Support efforts to provide full concurrent receipt of military retired pay and disability compensation to all eligible military retirees regardless of disability rating or years of service.

3. Support the DFAS initiative to forgive any overpayment of retired pay for any period after the date of death of a Retired Soldier through the last day of the month in which death occurs.

4. Support a test program under which Retired Soldiers who are supported by APOs in Germany be allowed to send and receive parcels weighing up to 5 pounds, for the purpose of quantifying impacts. The three Service Retiree Councils have repeatedly supported a test program and senior leaders in Europe (USAREUR and USEUCOM) and Korea (USFK) have requested the amendment of Military Postal System (MPS) rules to authorize mail privileges for Box R (military retirees) for parcels up to 5 pounds. However, OSD has disapproved those requests citing assumed increases in cost and workload. This issue remains the top quality of life issue, after health care, for military retirees residing in Europe and the Pacific.

5. Support the recommendation for issuance of permanent IDs for spouses and surviving spouses IAW the June 2012 Joint Uniformed Services Personnel Advisory Committee recommendation to OSD allowing Retired Soldiers' spouses and surviving spouses to obtain permanent ID cards at age sixty-five if they purchase Medicare Part B. This was addressed in our Memorandum to the CSA last year. Although we considered the comments submitted this year by US Army Human Resources Command, we non-concur and remain firm in our position from last year, which said: "Acknowledge spouses' long-term commitment to the Army by issuing them an indefinite ID card at age 65. We request HRC provides any metrics or other data that justifies maintaining the age for a permanent ID card at 75. Otherwise, recommend action immediately be taken to reduce the age to 65 in recognition of the long term commitment of our spouses and to send the clear message that like their Soldiers their association with the Army is for Life.

6. Support USAREUR and 8th Army in collaborating and developing a consolidated position and recommendation for increasing mail for overseas retirees and widows. The CSARC will reconsider this issue once a consolidated position is provided.

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300 ARMY PENTAGON
WASHINGTON, DC 20310-0300

DAPE-HRR 2 May 2014

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Chief of Staff, Army Retiree Council Report

1. The fifty-fourth meeting of the Chief of Staff, Army, Retiree Council was held at the Pentagon, 28 April through 2 May 2014. The Council is established in accordance with Army Regulation 600-8-7, "Retirement Services Program" and is administered in accordance with its charter, which is approved by the Secretary of the Army. The Council represents slightly over one million by Retired Soldiers and Surviving Spouses.

2. The Council members reviewed and discussed 22 issues submitted by 7 Installation Retiree Councils. The issues submitted by Installation Retiree Councils, with Chief of Staff, Army Retiree Council comments are at Enclosure 1.

KENNETH O. PRESTON
Sergeant Major of the Army
U.S. Army, Retired
Co-Chairman

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

Enclosures
1. Installation Report

DISTRIBUTION:
SPECIAL

ISSUE: 01-01-2014

INSTALLATION COUNCIL: Joint Base San Antonio, Ft. Sam Houston Retiree Council

SUBJECT: Retired Soldier access to Primary Care Physicians (PCPs) at Military Medical Facilities after age 65

DISCUSSION: Upon a Retired Soldier's attaining age 65, going onto Medicare and utilizing TRICARE Plus, many are required to go to the civilian market for medical care. While there are some exceptions to this if the Retired Soldier is part of internal medicine or is being treated in a specialty clinic, more often than not they are finding themselves relegated to the civilian medical community. This causes the Retired Soldier, who is forced to leave, excessive stress finding and establishing a relationship with a civilian physician who is not privy to their medical history. While some changes to this policy have occurred on an individual basis, it is still being practiced. It would behoove the Army to change this policy to publicize that Retired Soldiers can stay and can utilize the military medical treatment facilities (MTFs) as opposed to civilian facilities. This would help the Army medical community in terms of training, utilization of facilities and resources, and the Army/DOD budget in not having to pay additional higher costs of 65+ Retired Soldiers using the civilian medical community. This really is probably only applicable to those Retired Soldier's who are close to a military medical facility such as SAAMC or BAMC.

RECOMMENDATION: Recommend that DA/DoD continue to study the cost effectiveness for 65+ Retired Soldiers being able to use local military medical facilities, their PCP's and specialists as opposed to being forced to go to the civilian medical community. An effort should also be put in place to advertise the fact that the MTF facilities are available to Retired Soldiers as many do not and will not know that they are.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
BG (Ret) Daniel F. Perugini, Chairman, Ft. Sam Houston Retiree Council
CSM (Ret) James Hardin, Co-Chairman, Ft. Sam Houston Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The Council supports reengaging Medicare-eligible Retired Soldiers (TRICARE Plus) and their Families within the Army healthcare community. The office of The Surgeon General supports provision of primary care to Medicare-eligible Retired Soldiers. The Council appreciates The Surgeon General's initiative in that this has been a long-term issue within the retired community. In addition to being critical to graduate medical education programs and improved medical readiness, keeping the retired population within the military healthcare community maintains the trust and the promise to provide lifelong care. Treating more beneficiaries within Army medical facilities is also good business sense in that it is the least costly alternative. This action should also increase the available pool of providers available for Retired Soldiers in CONUS, thereby decreasing Medicare reimbursement concerns.

ISSUE: 01-02-2014

INSTALLATION COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Express Scripts

DISCUSSION: Express Scripts is designed to promote optimal healthcare by conveniently receiving medication via mail, in a timely manner at two thirds cost savings over neighborhood pharmacies. Once enrolled, home delivery automatic refills are delivered to your mailbox, a big plus for anyone taking medications for a chronic long term condition. E-mails are sent notifying the Retired Soldier that their refills are due and their medications are being shipped.

For twenty plus years the Express Scripts program has been providing outstanding service and quality medications to its beneficiaries, though it has appeared to suffer lately due to the Affordable Care Act (ACA). Co-pays are escalating and more name brand medications are being replaced with generic ones. Also, the lack of customer service has driven many long-term military Retired Soldiers away when assistance was requested by phone for clarification of prescriptions.

RECOMMENDATION: Annually, over ten million Retired Soldier prescriptions are being filled through Express Scripts, relieving the base pharmacies of work load and a savings of sixty-six percent over neighborhood pharmacies in a time of declining budget. Express Scripts is a win, win solution. Express Scripts is proven to be an asset to the Department of Defense and its Retired Soldiers.

1 - Co-pays should be non-existent or minimal and never raised more than the current year's COLA.
2- In cases where name brand medications are prescribed by a physician/provider and a medical justification has been provided that a generic is unsuitable, then the script should be filled as written.
3- Customer service should be improved to provide true customer service, this is a key to any successful business. Our retired military have served our country with distinction and deserve the best customer care delivered by knowledgeable, professional people.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: The Council supports the recommendation that co-pays for Express Scripts be maintained at a minimal level and never raised more than the current year COLA. For generic drugs the current and projected near term co-pay is zero. However, for brand name pharmaceuticals the co-pay is projected to double in FY15 and increase at a rate of approximately 10% in the out years until FY18 when increases will be indexed to COLA. Keeping co-pays at a minimal level will encourage use of the more cost effective mail order process. The result will be an economic benefit to the user as well as to the military. The Council recognizes that these fees are mandated by Congress.

The recommendation regarding brand name pharmaceuticals may be the result of lack of complete information. When an authorized health care provider specifies a brand name, Express Scripts fills the prescription with the brand, if available. While the provider may write the medication's brand name on the prescription, unless he or she indicates "Brand Necessary" or "Dispense as Written," Express Scripts, as well as military pharmacies and most civilian pharmacies, are authorized to dispense the lower cost generic. The Council recommends continued communication (*Echoes*, TRICARE Newsletters, etc) to the retired community to explain how the Express Scripts program works.

The Council agrees that Express Scripts could improve its customer service feedback process. There is no obvious option for customer service when calling the Express Scripts automated access system. Customer service can eventually be reached but it is not intuitive. Nor is there a customer service link on the Express Scripts web site. The Council recommends that the appropriate agency note these deficiencies to Express Scripts.

01-03-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Affordable Care Act: How does it impact the TRICARE Program?

DISCUSSION: What impact should TRICARE beneficiaries expect from the implementation of the Affordable Care Act (ACA)? There has been much confusion, misinformation and new interpretations of the law, leaving more questions than ever on HOW the ACA affects TRICARE enrollees. This past summer, TRICARE beneficiaries received a letter stating the TRICARE Program met ACA requirements, however the facts and details of how TRICARE meets or does not meet ACA parameters were not laid out. It is anticipated there will be more changes to include changes to mental health treatment, weight management, and potentially even issues on whether enrollees can keep their TRICARE health plan and provider.

While TRICARE is viewed as a comprehensive health care program, there are disparities between TRICARE and the ACA's requirements of private insurers, state exchanges and Health Insurance Marketplace entities. Additional changes may be needed, especially in the area of pregnancy and substance abuse, to bring the TRICARE Program in line with the ACA.

There are also rumors surrounding the ACA, such as higher premiums and co-pays, mandated benefits, and regulations that could result in changes to benefits and potentially loss of policy coverage. These rumors and the information gleaned from the media, is causing a serious breach of trust for military and Veteran families. It appears that major promises about the new health-care reform (e.g., that you can keep your doctor, premiums will go down, and overall health spending will decline) have been found not to be true as originally promised.

TRICARE beneficiaries are a savvy community because they watch the news, read journals/newspapers, and most recently were able to view the Congressional hearings occurring with the roll-out of the ACA. TRICARE HELP has been hearing from a lot of beneficiaries who are worried about how the ACA will change their coverage, but the questions and issues have only just started to surface

RECOMMENDATION: Many military and Retired Soldier families are worried about their TRICARE benefits, and there is a need to unscramble the confusion centering on TRICARE and ACA requirements. There is a need for the Department of Army (DA) to do more to reassure TRICARE enrollees that the medical benefits they have worked so long and hard for are safe in light of the roll-out of the ACA.

All media avenues (i.e.: AKO, Army Echoes and other electronic and print media) available to DA must be employed to provide awareness, information and education to allay fears regarding healthcare benefits and resulting changes due to the ACA. An awareness and education effort will result in a more informed TRICARE consumer, and also aid in squelching rumors and mis-information and reassuring beneficiaries on what to expect with the TRICARE Program as the ACA is implemented in 2014.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: Except for a very small number of military beneficiaries who are only authorized care in only a Military Treatment Facility (MTF), all TRICARE beneficiaries meet the critical requirement of the Affordable Care Act (ACA) of having "... *minimum essential coverage.*" Therefore, there is no immediate impact. However, the social media is rife with unsubstantiated information that purports significant impact. The Council fully supports the recommendation that Department of the Army proactively use all available means to increase awareness and to allay existing fears regarding health care benefits as it relates to the ACA.

ISSUE: 01-04-2014

INSTALLATION: Army in Europe

SUBJECT: Expansion of TRICARE Preferred Provider Network Program Overseas

DISCUSSION: Base closures in Europe continue to significantly reduce the number of medical treatment facilities (MTFs) and hence the availability of military medical practioners in areas where Retired Soldiers and their Families have settled. The limited availability of TRICARE Plus for Retired Soldiers at remaining MTFs restricts, even more, their access to military medicine. This has forced an increasing number of Retired Soldiers and their Family members to seek care from host nation practitioners and facilities.

Consequently, Retired Soldiers must assume the responsibility to fully reimburse the host nation health care provider for the full cost. Upon receiving treatment, the beneficiary then files a TRICARE claim to receive reimbursement for the cost of TRICARE covered services less the annual deductible amount and cost-shares. This entails what could be an extended period of time from the filing of the claim to the receipt of the reimbursement.

As a result, there have been an increasing number of instances in Europe when host nation health care providers and facilities have required payment in full before they render treatment. For even routine inpatient services and many outpatient services, this could be a substantial amount of money.

TRICARE already manages the TRICARE Preferred Provider Network Program. Host nation health care providers and facilities enrolled in the program provide cashless, claimless services to beneficiaries, submit the appropriate claim forms on behalf of the TRICARE beneficiaries they treat, and provide medical services in line with TRICARE policy. Beneficiaries feel confident that they are receiving quality care, because network provider credentials have been reviewed and confirmed. In addition, network providers are authorized to write prescriptions that are honored at an MTF. Having a prescription filled at an MTF costs the government less than reimbursing a TRICARE claim for medications obtained at a host nation pharmacy.

Currently, TRICARE efforts to identify and enroll qualified host nation health care providers and facilities in the Preferred Provider Network Program in Europe have been limited to those areas where active-duty Soldiers and their Families are located. While Retired Soldiers and the Families living in those areas can use a network provider, the available of local network providers is limited and will become even more limited as the result of future force reductions.

RECOMMENDATION: The Chief of Staff, Army, urges:

a. Expansion of the TRICARE Preferred Provider Network Program in overseas areas with a substantial Retired Soldier Community but where no or few preferred providers are located, and

b. Maintenance of the program in overseas areas with a substantial Retired Soldier Community where preferred providers have already been enrolled.

APPROVED BY ARMY SERVICE COMPONENT COMMAND CHAIRPERSON:
COL, US Army (Ret), Robert Mentell, President. Army in Europe Retiree Council

CSA RETIREE COUNCIL COMMENTS: The Council agrees that military retirees in OCONUS communities should have access to more health care providers on the local economy. This issue impacts both CONUS and OCONUS Retired Soldiers. The Council understands the constraints of the Department of Defense and TRICARE. The Council agrees with the DOD and Defense Health Agency plan to re-look the 40-mile radius policy by conducting a military health case study. The Council recommends that DOD and TRICARE initiate a review to address the shortage of providers in OCONUS areas with a retired population that warrants the need for an expanded TRICARE Preferred Provider Network Program.

ISSUE: 01-05-2014

INSTALLATION COUNCIL: Carlisle Barracks, Carlisle PA

SUBJECT: Closure of all TRICARE Service Centers in the U.S.A.

DISCUSSION: TRICARE Service Centers (TSC) are scheduled to close early 2014. It is more beneficial for Retired Soldiers, Family members and Survivors to work with a Beneficiary Service Representative face-to-face who can explain the different TRICARE options and help choose a TRICARE plan that suits the family. The TSC also provides benefits interpretation, enrollment assistance, Primary Care Manager selections, claims status and claims resolution, appeals and fraud resolution assistance. There is also a large "Grey Area" military Retiree community, Family members and Survivors that become eligible for TRICARE benefits without any idea of their benefits. It is claimed that the TRICARE Service Centers are inefficient and that customers would be better serviced with a toll-free number or online. It is also claimed that they are "making beneficiaries come to them rather than taking the customer services to the beneficiaries." The reality is that it gives our retired military community the option of speaking to a human and not working 30 minutes through an automated service in order speak to a representative for only several minutes because there is a prescribed amount of time allowed to each caller.

RECOMMENDATION: If there are service centers that handle very few clients, then yes, they need to be closed, or if there are several centers open in a close distance, again, close them. As a compromise, we recommend that each state has one TRICARE Service Center co-located in a military treatment facility.

APPROVED BY ISTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
CDR (RET) TED KELLEY, ACTING-CHAIR Carlisle Barracks Retiree Council

CSA RETIREE COUNCIL COMMENTS: The Council concurs with the closure of TRICARE Service Centers. The reductions in spending under sequestration made it necessary to find efficiencies. All functions that TRICARE Service Centers previously provided can be performed more efficiently online. The Council recommends that TRICARE continue to build a website that is customer friendly and establish a survey to measure the effectiveness of online services. In that this program only became operational 1 April 2014, the Council would appreciate an update at the 2015 Council meeting.

ISSUE: 01-06-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: TRICARE Reimbursement Rates

DISCUSSION: The TRICARE reimbursement rate for medical treatment, which is tied to MEDICARE's rates, are in many cases below market rates and increasingly doctors are refusing to accept TRICARE. This reduces the available pool of providers available to Veterans and in some cases limits Veteran accessibility to quality care. Finding doctors who accept TRICARE is increasingly a problem for Retired Soldiers.

RECOMMENDATION: Retiree Council supports reform of the statutory payment formula to reflect current market rates and actual cost of providing care in order to maintain sufficient provider participation nationwide.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: The Council supports the issue concerning TRICARE Reimbursement Rates in principle however, there is no actionable process by which the Army could affect change with the Health and Human Services Medicare/Medicaid reimbursement rate formula. A partial solution for this issue is to support re-engagement of the retired population back into the Army MTFs.

ISSUE: 02-07-2014

INSTALLATION/GARRISON/ASCC Council: EUSA Retiree Council, Yongsan, Korea; Fort Sill, OK Retiree Council; Fort Bragg, NC Retiree Council

SUBJECT: Maintain CONUS Commissaries for Military, Retired Soldiers, and Widows

DISCUSSION: Commissaries have always been part of the military and Retired Soldier benefit package that the US Government has stated, in part, was an offset for lesser pay. In the annual military compensation statement Commissary usage is part of the benefits that are earned. The military quotes the 30% savings as part of the military benefit for serving that will be carried into retirement.

Closing stateside commissaries will put Retired Soldiers on pensions at a disadvantage causing them to now shop at local stores which will increase their monthly food cost by 30%. The military and government has always said that the commissary and exchange were benefits that are part of their families' lifetime benefits for serving and offsetting their lower pay. Removing this important earned benefit will send the wrong message that the military member's service is not appreciated nor is the military's or governments word credible.

DOD officials have recently asked Defense Commissary Agency (DeCA) to develop a plan to close all U.S. commissaries which comprise three-fourths of all of its stores. This plan was discussed with members of the Joint Staff and the Pentagon Comptroller's Office in preparation for the fiscal 2015 DOD budget due in February 2014. Again, the commissaries are being seen as "low hanging fruit" and an easy target for budget cuts.

DeCA has 178 commissaries in the U.S., including Alaska and Hawaii. Almost 70 stores operate overseas and account for 35 percent of DeCA's budget and 16 percent of total worldwide sales. DeCA receives nearly $1.4 billion in annual taxpayer subsidies. It has reduced its annual funding requirement by $700 million over the last 20 years. Some potential ways to increase revenue is to increase surcharge fees from 5% to 10% and raise prices from 2% to 3% to cover overseas shipping costs. Bottom line, Steve Rosetti, Director of Gov't Affairs for the American Logistics Association stated that, "commissaries are seen as one of the most valued benefits and for what it costs DOD, they get a huge return." (Source Military Times article by Karen Jowers, dated 21 Nov 2013 as reported in Army Times issue dated 2 Dec 2013).

While the cost of living has increased, the salaries of Soldiers and the retirement benefits of our Veterans have not increased commensurate with the local community. As a result, the benefits our commissaries provide have been growing in significance. If the commissaries were closed, our Soldiers and Veterans would not be able to afford the quantity and quality of food they currently consume if they had to shop at civilian supermarkets. Additionally, closing commissaries would hurt Family Members and Veterans by depriving them of badly needed jobs, as most to these positions are filled Veterans and their Families.

RECOMMENDATION: Maintain CONUS commissaries for active duty, Retired Soldiers, and widows. If not, increase retired pay to offset the loss of this lifetime benefit that promised.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
CSM (Ret) Bob Henault, Chairman EUSA Retiree Council & Vice Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Charles Woods, Chairman Area III Retiree Council, Korea
LTC (Ret) G. Allen Shell, Co-Chairman, Fort Sill, OK Retiree Council
CSM (Ret) David J. Kantor, Co-Chairman, Fort Sill, OK Retiree Council
COL (Ret) Donald D. Latella, Co-Chairman Fort Bragg, NC, Retiree Council
CSM(R) Steven R. England, Co-Chairman Fort Bragg, NC, Retiree Council

CSA RETIRED SOLDIER COUNCIL COMMENTS: The CSARC concurs with and strongly supports this recommendation. We greatly appreciate the CSA's comments and strongly agree regarding the need for a more efficient commissary business model and the requirement to reduce the supplemental cost to the Army. To achieve those savings, we suggest DeCA be required to execute a new business model immediately, to include, the addition of generic products with the objective of achieving savings over a 5-year period. This strategy ultimately reduces the Army's burden and does not impact the savings Soldiers, Retired Soldiers, and their Families currently enjoy. We believe that shifting the burden of maintaining commissaries to Soldiers, Retired Soldiers, and Families already taxed with growing personal expenses and shrinking incomes is shortsighted and can adversely affect retention and enlistments, especially given that savings are less than 0.2% of DOD's TOA in FY14. Actions, such as this, coupled with the drawdown of the force, other programs targeted at our serving military and retired populations will eventually impact the propensity of those seeking to enlist as well as those who influence them to do so. In addition, there is inherent danger in the second order effects associated with reducing the flow of shoppers in the commissary. Proposed cuts in commissary funding could not only drive shoppers away because of price increases, but also create a serious ripple effect on installation morale, welfare and recreation programs. We believe commissaries, exchanges and MWR programs are inextricably linked and if higher commissary prices drive shoppers away, that could likely impact customer traffic at base exchanges that are already seeing a decline in sales. MWR programs, partially funded by exchange profits, could be significantly affected.

ISSUE: 02-08-2014

INSTALLATION/GARRISON/ASCC Council: EUSA Retiree Council, Yongsan, Korea

SUBJECT: Increase Mail for Overseas Retired Soldiers and Widows

DISCUSSION: Currently mail for Retired Soldiers and widows is limited to 16 ounces, with the exception of TRICARE medications. However, this does not take into account the many other health and welfare items that are needed by Retired Soldiers and widows. While some may be obtained locally, the cost is usually double when purchased locally. While the cost is then absorbed by TRICARE, the quality of many of the local items are substandard. So while there appears to be a cost savings for the Army, there actually is an overall cost increase to DOD (via TRICARE).

Many items that get blocked from delivery are:
- Voting materials from the state side home of record (which helps to maintain their residency)
- Claim packets to and from the Department of Veterans Affairs
- Medication and supplements
- Medical supplies – CPAP expendable items, etc.
- Medical clothing – support garments, compression socks, orthotic footwear, etc.
- Medical appliances – canes, walkers, braces, etc.
- Clothing that is unavailable from the Exchange or local economy
- Books

RECOMMENDATION: Increase mail for overseas Retired Soldiers and widows to 10 pounds (in and out) so that they may receive and send health and welfare items. Initially allow a one-year test to locally track the added cost.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
CSM (Ret) Bob Henault, Chairman EUSA Retiree Council and Vice Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Charles Woods, Chairman Area III Retiree Council, Korea

CSA RETIREE COUNCIL COMMENTS: The CSARC recommends this issue be tabled to provide USAREUR and 8th Army the opportunity to collaborate and develop a consolidated position and recommendation for consideration. The CSARC will consider this issue once a consolidated position is provided.

ISSUE: 02-09-2014

INSTALLATION COUNCIL: Joint Base San Antonio, Ft. Sam Houston Retiree Committee

SUBJECT: Space A Travel on Military Aircraft for Surviving Spouses

DISCUSSION: Upon a Retired Soldier's death, the surviving spouse is no longer eligible to travel on military aircraft as a Space A traveler.

RECOMMENDATION: The NDAA 2013, required the Comptroller General to conduct a study of the feasibility of such a change. Results of that study have not been seen, but we would continue to request that the policy be changed to allow unremarried surviving spouses of Retired Soldiers to fly Space A on military aircraft at Category VI.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
BG (Ret) Daniel F. Perugini, Chairman, Ft. Sam Houston Retired Soldier Committee;
CSM (Ret) James Hardin, Co-Chairman, Ft. Sam Houston Retired Soldier Committee.

CSA RETIREE COUNCIL COMMENTS: The CSARC, again this year, strongly supports this recommendation. This issue is recurring and was addressed in last year's CSARC Memorandum to the CSA. We remain committed to our comments from last year, which said "Recognize the contributions of surviving spouses by authorizing space available air travel. Congress has directed DOD in the FY13 NDAA to do a space A Travel Study, in which surviving spouses were specifically required to be addressed. We are hopeful this foretells a positive result." The sooner this initiative can be adopted the better. This will send a strong message that surviving spouses' support of the Army will not be forgotten after the death of their Soldiers and their association with the Army is also for life. To facilitate action, recommend a proponent on the Army Staff be identified and tasked to provide feedback to the Co-chairs on progress within the next 180 days.

ISSUE: 02-10-2014

INSTALLATION COUNCIL: Joint Base San Antonio, Ft. Sam Houston Retiree Council

SUBJECT: Permanent IDs for spouses and surviving spouses

DISCUSSION: Present policy allows a spouse or surviving spouse of a Retired Soldier to obtain a permanent ID upon their 75th birthday. Given that most spouses are retiring at age 65, applying for Social Security, Medicare, TRICARE for Life, etc. This would be the logical time for them to also go to a permanent ID.

RECOMMENDATION: The 2013 Retired Soldier Council recommended that the Joint Uniformed Services Personnel Advisory Committee of 2012s recommendation to OSD relative to the issuance of permanent IDs for spouses attaining age 65 and subscribing to Medicare Part B, should be implemented. Thus far it has not been, so we would continue to recommend that the ID policy be changed as soon as possible to allow a spouse or surviving spouse to obtain a permanent ID upon their 65th birthday.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
BG (Ret) Daniel F. Perugini, Chairman, Ft. Sam Houston Retiree Council
CSM (Ret) James Hardin, Co-Chairman, Ft. Sam Houston Retiree Council

CSA RETIREE COUNCIL COMMENTS: The CSARC, again this year, strongly supports this issue. It is a recurring issue and was addressed in our Memorandum to the CSA last year. Although we considered the comments submitted this year by HRC, we non-concur and remain firm in our position from last year which said: "Acknowledge spouses' long-term commitment to the Army by issuing them an indefinite ID card at age 65. The CSA Retiree Council recommends the issuance of permanent IDs for spouses and surviving spouses IAW the June 2012 Joint Uniformed Services Personnel Advisory Committee recommendation to OSD allowing Retired Soldiers' spouses and surviving spouses to obtain permanent ID cards at age sixty-five if they purchase Medicare Part B. Those spouses and surviving spouses who do not purchase Medicare Part B at age sixty-five will still have to renew their ID cards until they reach age seventy-five because the recertification process decreases the probability and extent of fraud." Request HRC provide any metrics or other data that justifies the need to keep age for permanent ID card at 75. Otherwise, recommend action immediately be taken to reduce the age to 65 in recognition of the long term commitment of our spouses and to send the clear message that, like their Soldiers, their association with the Army is for life.

ISSUE: 02-11-2014

INSTALLATION COUNCIL: Joint Base San Antonio, Ft. Sam Houston Retiree Council

SUBJECT: Inequities of COLA applications to Retired Soldier Groups

DISCUSSION: With the passage of a budget at the end of 2013, the Congress did some serious harm to military Retirees in three different areas by reducing COLA increases by 1%. First, Military Retirees who took the Career Status Bonus and who already were taking a 1% reduction in COLA until age 62 will essentially have another 1% reduction and will get no increase. Second, if a Retired Soldier dies prior to age 62 and the surviving spouse is collecting SBP, their, in many cases, low income from retirement, will be reduced another 1% possibly making them become burden to the country because of having to utilized services that they might not otherwise have had to use. Lastly, medically retired individuals, who again are probably struggling to maintain their existence, will have their retirements reduced by 1% and potentially will then become a greater burden due to utilization of services that they might not otherwise have had to use.

RECOMMENDATION: After evaluation, the Retiree Council should recommend to the DOD that it promote possible legislation to relieve the burden of COLA reductions to these three Retired Soldier groups given the undue burden it puts on them. It would also negate to a great degree the possible addition burden that might be presented by the use of additional resources, which might not otherwise be used by these three groups.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
BG (Ret) Daniel F. Perugini, Chairman, Ft. Sam Houston Retiree Committee
CSM (Ret) James Hardin, Co-Chairman, Ft. Sam Houston Retiree Committee

CSA RETIREE COUNCIL COMMENTS: The CSARC fully concurs and supports this recommendation. We acknowledge the issue has been rectified for currently serving Soldiers and Retirees through amended Congressional legislation. We recommend final action be taken to ensure all future Soldiers are not burdened by this reduction. We would like to thank all agencies responsible for advising and convincing Congress to amend the legislation and ask continued vigilance to ensure the 1% COLA reduction is completely eliminated. Finally, recommend an Army Staff proponent be designated to provide oversight and information to Army constituencies.

ISSUE: 02-12-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: DFAS Password Requirements

DISCUSSION: The Defense Finance and Accounting Service (DFAS) announced new password requirements for accessing MyPay that are much more stringent and that will be very cumbersome for Retired Soldiers. The new guidelines require changing the password every 60 days and have the following stipulations:

Length of passwords are increased to 15-30 characters. Must contain two uppercase, two lowercase, two numbers, and two special characters. Must change at least four characters from previous password.

These new requirements will adversely impact Retired Soldiers, especially those who are older and less likely to be comfortable with technology. The changes will limit these Retired Soldiers from having access to vital information related to their pay and benefits.

RECOMMENDATION: DFAS should explore options that protect the security of the system while not placing additional and in some cases insurmountable burdens on the end users. Ample examples currently exist, particularly among commercial financial institutions that cater to the military/Retiree population, such as USAA or Bank of America.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: The CSARC understands and appreciates the need for information assurance and Internet security. It also appreciates the obvious concern DFAS has in protecting the personal information and pay of the retired community. We concur with DFAS's action to reduce the password to 9 characters and the extension of the requirement to reset every 150 days vs every 60. We thank DFAS for listening and taking quick and decisive action to mitigate the issue.

ISSUE: 02-13-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Disproportionate Impact of Chained CPI on All Veterans and their Families

DISCUSSION: The ongoing U.S. budget deficit discussions and the proposal to incorporate the chained CPI as a means to reduce it would be detrimental to all Veterans and their Families. Such action would reduce disbursement of benefits/funds, to include any COLA. Average military compensation cannot be considered excessive or generous by U.S. standards. As such, implementing the chained CPI proposal would be disproportional to the most vulnerable of our population. For disabled Veterans the core feature of chained CPI is the reduction of COLA over time. Most disabled Veterans are younger and such cumulative reduction of benefits would be disastrous over time as compared to other recipients. Under the chained CPI, the longer one remains under the concept, the greater the reduction of income. Social Security benefits would also be lower. Therefore, a disabled Veteran will suffer by having a lower disability benefit and a lower Social Security benefit under the chained CPI concept. Many Veterans relying on these benefits also live on fixed incomes and tight budgets. For them, every dollar is important toward meeting the requirements to satisfy their basic needs. Bottom Line - The chained CPI would force Veterans to reduce their standard of living at a disproportionate rate when compared to a regular wage earner by having to compete with their purchasing power. An example would serve to illustrate - as wages rise, so will rents, taxes, etc. Consequently, the Veteran will be driven to substandard housing, relying on housing subsidies, or worse, homeless because of the inability to keep up with other wage earners.

RECOMMENDATION: Advocate no support for chained CPI due to the potential adverse and disproportional impact on quality of life for all Veterans and their Families.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: The CSARC concurs and recommends support of legislation that maintains the current COLA methodology. Recommend an Army Staff proponent be designated to provide oversight of this and similar issues and information, as required, on impacts to the Army and its' constituencies.

ISSUE: 03-14-2014

INSTALLATION/GARRISON/ASCC Council: Fort Gordon, GA Retiree Council

SUBJECT: Sponsorship for Support of Retired Soldier Appreciation Days

DISCUSSION: AR 600-8-7, Retirement Services Program, Chapter 5, paragraph 5-1, states "Retiree Appreciation Day (RAD) is conducted by installation and RC RSOs to keep retirees and their Families up-to-date on changes in their retirement rights, benefits, and privileges and to foster good will between the retired and active duty communities. Paragraph 5-2 of this regulation states that garrison commanders should coordinate with the IMCOM region, the ASCC and the installation retiree council leadership to determine the best way to support the retiree population based on resources, population, availability of services and mission requirements. In view of resource limitations and interpretation of regulatory guidance, Garrison Commanders are limited or restricted from providing such things as refreshments, lunches, door prizes etc. for Retired Soldiers and their Family Members in order to show true appreciation to Retired Soldiers.

Experience has shown that local communities, businesses and organizations are quite willing and eager to support RADs with money and or door prize items if requested to do so, however local interpretations of regulatory guidance is that Commanders are prohibited from soliciting this type of support. As an alternative at one installation, a private military association (a local AUSA chapter) has graciously stepped up to the plate and volunteered to sponsor a fund raising effort as a means of soliciting support from communities, businesses and organizations. Prior to this, funds that had been raised from local businesses organizations by individual Retired Soldier efforts were held in a separate account by the installation Directorate of Family, Morale, Welfare, Recreation Program (DFMWR). Unfortunately, local interpretation of current regulatory guidance by the installation DFMWR is that DFMWR is prohibited from holding these funds. While this fund raising support has worked at this installation (feedback says that this installation conducts "one of the best appreciation days in the Army"), it is not the most appropriate way to enable communities to support and express appreciation that is so richly deserved for our Retired Soldiers.

AR 215-1, Military Morale, Welfare, and Recreation Programs and Nonappropriated Fund Instrumentalities, Chapter 1, Paragraph 1-9a states "Directorate of Family, Morale, Welfare and Recreation programs are designed to meet the needs of the garrison community. This includes Soldiers, units, retirees, civilian employees and families". Paragraphs 11-6 and 11-7 of this regulation provides for solicitation for commercial sponsorship for DFMWR programs and events. Since DFMWR programs include meeting the needs of Retired Soldiers (par 1-9a) it would be appropriate to allow for commercial sponsorship of military RADs. This would certainly provide an appropriate and proper way for local communities, businesses and organizations to provide support and show appreciation to our deserving Retired Soldiers and also serve as a useful vehicle for promoting community relations with military installations. However, local interpretation of this regulation is that commercial sponsorship for RADs is not authorized under this DFMWR regulation.

The bottom line is that given resource constraints, the Army should take advantage of support for RADs that could be available from local communities, businesses and associations so as to provide top notch RADs for our deserving Retired Soldiers.

RECOMMENDATION: That Department of the Army provides regulatory guidance and or clarification of existing regulations regarding sponsorship of RADs under the provisions of AR 215 and AR 600-8-7 so that installations and ASCCs can provide the best possible appreciation days for our Retired Soldiers and their families.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
Everett Greenwood, COL (USA Retired), Co-chair, Fort Gordon Retiree Council
Richard Downs, SGM (USA Retired), Co-chair, Fort Gordon Retiree Council

CSA RETIREE COUNCIL COMMENTS: CSARC supports this issue. Our Army's Soldier For Life (SFL) program celebrates the richness of a full Army career and our Retired Soldiers. Retiree Appreciation Days are an integral means of keeping Retired Soldiers and their Families connected with the Army and informed on current issues. This is an appropriated funds issue and event. In these days of diminishing funds, the challenge becomes how to fully fund the Soldier For Life program. An independent regulatory review should be conducted considering all sources of funding (e.g. appropriated, non-appropriated and commercial) to identify the aspects of a RAD where all funding sources can be used.

ISSUE: 03-15-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: Deactivation of Retiree Army Knowledge Online (AKO) Accounts

DISCUSSION: The Army is in the process of transitioning from AKO to next generation enterprise services designed to achieve better financial economies, efficiencies and security improvements. As part of the current upgrade plan, the Army will no longer authorize accounts for Retired Soldiers. The last Retired Soldier AKO accounts are scheduled to be closed on 31 Mar 2014 and only users with CAC cards will be able to access the services. The decision to restrict access was based in part on the availability of commercial options and the low percentage of Retired Soldiers using AKO.

AKO currently provides Retired Soldiers with a single web portal to the United States Army. The main use is email capabilities, but AKO also provides directory services, single sign on, blogs, file storage, instant messenger, and chat. Retired Soldiers can use AKO to access their financial records, to build pages, create file storage areas, and create and participate in discussion on the portal. While commercial options exist, certain functions are available only within the AKO system, such as access to Army web assets, tools, and services worldwide. And although, according to information on the official US Army Homepage, less than ten percent of Army Retired Soldiers use AKO email, that is still thousands of users who find the accounts to be useful. Retired Soldiers depend on AKO for stay connected to the Army, from access to E libraries to maintaining contact with former comrades. Additionally, the pending transition will affect the myPay accounts of over 350,000 Retired Soldiers whose Defense Finance and Accounting Service (DFAS) accounts include AKO email addresses that will no longer function. Unless they update their myPay accounts, these Retired Soldiers will no longer receive email communications from DFAS, including notices about monthly Retired Soldier account statements, annual income tax forms, and other important information.

RECOMMENDATION: In support of the principles of Soldier for Life, the Army should embrace support and enable Retired Soldiers by including them in relevant modes of communication and connectivity. In recognition of the fact that many Retired Soldiers continue to serve the Army and our Veterans, and that they benefit from staying closely connected with the active force, upgrades to the AKO system should include the option of access by Retired Soldiers. Recommend the establishment a of a CAC card access option for those Retired Soldiers who benefit from and desire continued access.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retiree Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retiree Council

CSA RETIREE COUNCIL COMMENTS: It is imperative that the Army keeps its ambassadors in communities throughout the world – their Retired Soldiers – informed on issues confronting their Army and the actions being taken to resolve them. We are cautiously optimistic in the Solder For Life website that is being developed to replace AKO for Retired Soldiers is providing them with the information they need to know not only for their personal well-being but for their ambassador-function as well. Within phase II development of the SFL website, many of the communication functions of AKO servicing Retired Soldiers and annuitants will be created. There exists adequate means to obtain free email accounts. Since October 2013, DFAS has actively informed Retired Soldiers, Annuitants & Surviving Spouses of the requirement to update their email addresses.

ISSUE: 03-16-2014

INSTALLATION/GARRISON/ASCC Council: EUSA Retiree Council, Yongsan, Korea

SUBJECT: Retain Army Retiree and Widow Email Accounts

DISCUSSION:

The Retired Soldier and widow community was notified that their AKO service would be discontinued in March 2014. Since then, the EUSA Retiree Council has received numerous inquiries from our Retired Soldier community in Korea that there is grave concern in such a mandate and that we should seek to retain Retired Soldier email service in AKO or any new information system.

Retired Soldiers have sacrificed themselves for our Nation and continue to serve in many non-traditional ways. It is imperative that the Army continue to support services promised as the Army transitions and modernizes to sustain our freedoms. As a benefit, Retired Soldiers and their widows were earmarked as vital members of the Army Family. It would place this group to a disadvantage to exclude them from AKO or any new information system.

As a force multiplier, the Retired Soldier population adds value to the Army mission, particularly in recruitment and volunteerism. The best means to communicate with them is through AKO. As more and more Retired Soldiers and widows have their identity stolen and are subjected to scam and fraud, the use of AKO helps prevent such travesties. AKO is a more secure and safe system to access and communicate issues relating to their pay, benefits, and overall communications. Retired Soldiers use AKO to locate other Retired Soldiers under the "People" tab to stay in touch with their wartime comrades. Likewise, they also stay in touch with their branches (e.g., Corps of Engineers) through the "Discuss" and "Groups" tabs in AKO. As volunteers in their local communities, Retired Soldiers use their AKO accounts for coordinating their many volunteer activities. For example, the Eighth Army CY13 volunteer program receives volunteer hours due to the continual dedication of our Retired Soldiers. Local retiree councils use AKO for our principal means of communication. In numerous families, the Retired Soldier was the principal person to communicate via the internet especially overseas or when having a foreign spouse due to the English language. Again, AKO affords a standard and safe system for their use.

The security provided by a DS Logon (with a password that has to be changed every 150 days like AKO) that are now used by Retired Soldiers and widows to access their personal records on DOD and VA websites is comparable to the security provided by a CAC. The security of Retired Soldiers' personal information on DOD and VA websites need not be as stringent as Army FOUO. Otherwise Retired Soldiers would need a CAC to access their personal records online.

RECOMMENDATION: Do NOT exclude the DOD Retiree and widow community from the new AKO systems, allowing Retired Soldiers and widows to keep a military email account. Maintain a non-CAC/PIV login in capability for Retired Soldiers and widows or issue those that desire a CAC for Army email. Maintain a POP-like capability for the Retired Soldiers and widows to access their emails via Outlook which will reduce the need for email storage on Army servers.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
CSM (Ret) Bob Henault, Chairman EUSA Retiree Council & Vice Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Charles Woods, Chairman Area III Retiree Council, Korea

CSA RETIREE COUNCIL COMMENTS: Effective 1 May 2014, the new Soldier For Life program includes Retired Soldiers, surviving spouses and annuitants. This new website resides outside of the secure firewall at http://soldierforlife.army.mil/retirement.

It is imperative that the Army keeps its ambassadors in communities throughout the world – their Retired Soldiers – informed on issues confronting their Army and the actions being taken to resolve them. We are cautiously optimistic that the Solder For Life website being developed to replace AKO for Retired Soldiers is providing them with the information they need to know not only for their personal well-being but for their ambassador-function as well. Within phase II development of the SFL website, many of the communication functions of AKO servicing Retired Soldiers and annuitants will be created. If necessary there exists adequate means to obtain free email accounts. Since October 2013, DFAS has actively informed Retired Soldiers, Annuitants & Surviving Spouses of the requirement to update their email addresses.

ISSUE: 03-17-2014

INSTALLATION/GARRISON/ASCC Council: EUSA Retiree Council, Yongsan, Korea

SUBJECT: Five Year Rule Should Not Apply to Local Hires Overseas

DISCUSSION:

1. Local hires overseas are subject to the Five Year Rule even though they are hired locally. The overseas local hire should not be subject to the Five Year Rule since their chosen/desired home is at the overseas location. Because of their local hire status they are not eligible for Living Quarters Allowance (LQA).

2. Currently, local hires do not receive the benefits named below -

a. LQA for housing is not paid (depending on the GS rank and the benefits listed within the Job Announcement on USAJOBS.Com). (Local hire housing is paid-for "out of pocket")

b. Renewal Agreement Travel (RAT) is not received (round-trip airline tickets for member and family members from South Korea to "home base" in the United States and then returning to South Korea). (Local hire visits to the United States is paid-for "out of pocket")

c. Home Leave (30 days) is not received. (This Leave is in addition to earned Annual Leave)

d. Educational Travel is not received for dependents. (Dependents air travel Incurred by the local hire)

3. By nullifying the current 5-Year Rule for local hires overseas, the U.S. Government would receive additional financial budgetary savings such as -

a. Not shipping a POV to the United States.
b. No transportation costs for the local hire and their dependents.
c. No household goods shipment to the United States.
d. No payment of Temporary Quarters Subsistence Expense (TQSE).
e. Relocation Income Tax Allowance (RITA) need not be repaid.

RECOMMENDATION: Exempt local overseas local hires from the Five Year Rule.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
CSM (Ret) Bob Henault, Chairman EUSA Retiree Council and Vice Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Anthony Biagianti, Chairman Area I Retiree Council, Korea
SFC (USA, Ret) Carl Reed, Chairman Yongsan (Area II) Retiree Council, Korea
SFC (USA, Ret) Charles Woods, Chairman Area III Retiree Council, Korea

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue. However, we recommend that the Army G1 should refine and clarify this policy prohibiting the retention of Retired Soldiers and spouses holding positions as Local Overseas Hires.

ISSUE: 03-18-2014

INSTALLATION COUNCIL: Joint Base San Antonio, Ft. Sam Houston Retiree Council

SUBJECT: Army Echoes Electronic Delivery

DISCUSSION: Army Echoes, the official newsletter for Retired Soldiers, surviving spouses, and their Families, is now electronically delivered to Retired Soldiers through DFAS' myPay system. DFAS emails the Retired Soldiers a SmartDoc that includes links to open Army Echoes on the Army G-1's webpage. However, many Retired Soldiers encounter a security warning when they click on the links to the Army G-1's webpage. The warning screen says the security of the Army G-1's website cannot be validated and it urges Retired Soldiers avoid the web page. Many Retired Soldiers are not internet savvy, and this prevents them from getting Echoes. If they ignore the warning and navigate to the G-1's webpage, they have to figure out how to accept and download the website's security certificate before they can get Echoes. This is too hard for many Retired Soldiers to manage and many won't receive Echoes because of this.

RECOMMENDATION: Recommend that the Army post Echoes on a website that doesn't have security certificate problems for Retired Soldiers if they are going to make electronic distribution mandatory for some Retired Soldiers.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIRED SOLDIER COUNCIL CHAIRPERSON(S):
BG (Ret) Daniel F. Perugini, Chairman, Ft. Sam Houston Retired Soldier Committee;
CSM (Ret) James Hardin, Co-Chairman, Ft. Sam Houston Retired Soldier Committee.

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue and the initiative to establish a website to communicate with Retired Soldiers and annuitants. The more information that the Army can push to its Retired Soldiers, the better the Retired Soldier will be prepared to represent the Army in his or her community. We have heard the Army's Retired Soldier's concerns! Effective 1 May 2014, the new Soldier for Life program includes Retired Soldiers. This website resides outside of the secure firewall at http://soldierforlife.army.mil/retirement. The website's Retired Soldier tab contains Army *Echoes* and Army *Echoes* updates to keep the Army retired community informed.

ISSUE: 03-19-2014

INSTALLATION/GARRISON/ASCC COUNCIL: Fort Stewart, GA Retiree Council

SUBJECT: DS Logon for Retired Soldiers

DISCUSSION: Some Retired Soldiers receive a letter from TRICARE advising them to obtain a DS Logon from the nearest DEERS/RAPIDS office. In order to do so, the member must bring a beneficiary with them to get an ID Card. The system (DEERS/RAPIDS) only responds "Do you want a DS Logon?" when making a beneficiary ID Card for either spouse or child. The card must be issued and saved to DEERS for a DS Logon number to be generated and that number will be mailed to the address in DEERS/RAPIDS within 5-10 days. If the member is single, a DS Logon cannot be generated in DEERS.

The VA Regional Office also sends disabled service members to DEERS/RAPIDS for a DS Logon. Again, there is currently no way in the system to request the DS Logon for a sponsor.

RECOMMENDATION: There are two possible fixes to this problem. (1) Allow the DEERS/RAPIDS system to request a DS Logon for the sponsor when making an ID Card just as in the case of a card for a dependent. (2) Create a web site for retired and disabled service members to request a DS Logon and mail the log in number to the address in DEERS/RAPIDS.

APPROVED BY INSTALLATION/GARRISON/ASCC RETIREE COUNCIL CHAIRPERSON(S):
COL (Ret) Eileen K. Watson, Co-Chairperson, Ft. Stewart, GA Retired Soldier Council
CSM (Ret) Tommy A. Williams, Co-Chairperson, Ft. Stewart, GA Retired Soldier Council

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue. It is in the best interest of the Army to make the process for a Retired Soldier to obtain DS Logon credentials as simple and as transparent as possible. DS Logon, which is operated by DOD, allows access to multiple DOD and VA websites using a single username and password. You sign in once, and then can get to any of the connected sites and your accounts on them. DS Logon complies with federal security guidelines and provides a secure user experience.

You must be enrolled in DEERS to obtain a DS Logon account. Soldiers (Active Duty, National Guard, US Army Reserve, and Retired Soldiers), spouses, Veterans and Family members are eligible for DS Logon accounts.

Family members' registration options include: (a) your military sponsor can request an account for you; and (b) you can ask for DS Logon account when getting your military ID card. Effective 1 May 2014, Retired Soldiers and spouses can visit http://soldierforlife.army.mil/retirement.

ISSUE: 03-20-2014

INSTALLATION: Army in Europe

SUBJECT: Support to Retired Soldiers and their Families and Survivors

DISCUSSION: The primary sources of support for Retired Solider Communities, especially in overseas areas, are the garrison Retirement Services Officers (RSOs). As a result of budget constraints, force reductions, and other factors, the number of RSOs in Europe continues to decrease dramatically and those RSOs who remain are being assigned many other duties, several of which are to take precedence over their RSO responsibilities.

At several garrisons, Retiree Volunteers have created offices generically referred to as Retiree Service Centers, in an attempt to "take care of our own." These offices are staffed exclusively by well-intentioned volunteers, but they lack formal training in the subjects on which they are advising active-duty Soldiers and Retired Soldiers and their Family members.

The garrisons have allocated office space, communications connectivity, and other administrative support to these undertakings, giving these offices the appearance of being an authorized extension of the garrison staffs, de-facto conferring on them the aura of being the source of accurate and authoritative information.

However, at many locations, this is not the case. In fact, garrisons appear to "tolerate" the existence of such offices for they relieve the garrison staff of workload but many garrisons appear to acknowledge no responsibility for what transpires in those offices.

RECOMMENDATION: The Chief of Staff, Army:

a. Reemphasize the requirement for IMCOM to establish, staff, and maintain a functioning Retirement Services Office of appropriate size and grade in each and every garrison in the Army.

b. Support the establishment of a program for the training of Retiree Volunteers to ensure that they are competent to speak to the topics brought to them and that they know the limits of what they can and cannot say.

c. Direct IMCOM to establish such "Retiree Service Centers" where the interest and need exists, and to ensure that those who staff the centers are properly trained and supervised.

APPROVED BY ARMY SERVICE COMPONENT COMMAND CHAIRPERSON:
COL, US Army (Ret), Robert Mentell, President. Army in Europe Retired Soldier Council

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue. The Army's reliance on volunteers is increasing. It also has a responsibility to ensure that those volunteers are properly trained and know what they can and cannot say and do. While there are processes and procedures in place to register and utilize volunteer services, additional emphasis needs to be placed on ensuring that the volunteers are properly trained – both initially and periodically. There are few areas as critical as advising individuals on Retirement Service matters, especially on Survivor Benefit Plan provisions and Retired Soldier and annuitant pay issues.

ISSUE: 03-21-2014

INSTALLATION: Army in Europe

SUBJECT: Retired Soldier Identification Badge for the new Army Service Uniforms

DISCUSSION: When wearing the previous generation of service uniform, specifically the Army Green Service Uniform, identification of the wearer as being a Retired Soldier was through a US Army Retiree shoulder sleeve insignia worn on the left shoulder. All Soldiers were authorized to wear a former wartime service shoulder sleeve insignia, commonly referred to as a "combat patch," on the right shoulder.

When wearing the new generation of service uniforms, specifically the Army Service Uniform (ASU), Soldiers may wear the Combat Service Identification Badge centered on the right breast pocket for male Soldiers and on the right side parallel to the waistline for female Soldiers.

However, there is no established way for Retired Soldiers to identify themselves while wearing the new ASU as being a Retired Solider as opposed to an Active-Duty Soldier.

In 2007, the Army fielded a new Retired Soldier lapel pin. It used the design of what has become known as the Army of One lapel pin to emphasize the continuing bond between the Army and its almost 885 thousand Retired Soldiers.

Currently, the Army is developing a prototype badge to identify Retired Soldiers wearing the ASU. The design of that badge is not based on the Retired Soldier version of the Army of One lapel pin that has come to be a readily recognizable means of identifying a Retired Soldier. Moreover, no guidance has been issued on how or where the new badge should be worn on the ASU.

Rather than developing an ASU pocket badge to identify Retired Soldiers based on a new design, the current Army of One design should be used. The badge should be consistent in size with the Combat Service Identification Badge. Instruction for its wear should not require that the Retired Soldier forego wearing a Combat Service Identification Badge.

RECOMMENDATION: The Chief of Staff, Army, direct the following:

a. Development of a Retired Soldier identification badge for wear on the ASU uniform that is based on the Army of One Retired Soldier lapel pin and is consistent in size with the Combat Service Identification Badge.

b. Prescribe the placement of the badge on the uniform so as not to require the foregoing of wearing a Combat Service Identification Badge.

APPROVED BY ARMY SERVICE COMPONENT COMMAND CHAIRPERSON:
COL, US Army (Ret), Robert Mentell, President. Army in Europe Retired Soldier Council

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue. Retired Soldiers should be given the means of showing their Soldier For Life pride by being able to identify themselves as being a Retired Soldier, without having to forego the wearing the patch of the unit with which they served in combat. The new AR 670-1 and DA Pam 670-1 address this issue, but does not address the request to make the badge like the current approved Retired Soldier lapel pin. Recommend that the Army officially design a Retired Soldier badge that is based on the approved Army of One lapel pin.

ISSUE: 03-22-2014

INSTALLATION COUNCIL: Joint Base Myer-Henderson Hall Retiree Council

SUBJECT: Retired Soldier Rank

DISCUSSION: Military Retirees have earned their rank after 20 or 30 or more years of service and deserved to be addressed by their rank designation when dealing with personnel associated with the military. Unfortunately, that is not happening. At hospitals in military correspondence or even dealing with personnel in the Pentagon, too often Retired Soldiers are either addressed by their first name or with the designation "Mr.", "Ms.", or "Mrs." even when the rank is known. It may well be that there is resistance to use the rank of Retired Soldiers because there is the confirmed belief that Retired Soldiers must not be confused with active duty personnel. To some extent that is understandable, but it negates the accomplishment of the Retired Soldier. If we could come to an agreement, to combine the Retired Soldier's rank designation with a prefix of suffix to indicate Retired Soldier status, there may be a change in attitude. For example use: "Ret-Staff Sergeant John Smith" or Staff Sergeant-R John Smith". For officers, similarly: "Ret-Lieutenant Colonel John Doe" or "Lieutenant Colonel-R John Doe".

RECOMMENDATION: Once the designation is determined, the official rank designation of military personnel should be changed to include the pre/suffix for all military personnel upon retirement. Thereafter, all military entities should be advised to use the new Retired Soldier rank designation when dealing with military personnel or the public. In any case, the rank of the Retired Soldier should be reflected in all official documentation and discussions.

APPROVED BY INSTALLATION RETIREE COUNCIL CHAIRPERSON(S):

COL (Ret.) Albert S. Willner, Co-Chair, Joint Base Myer-Henderson Hall, VA Retiree Council
CSM (Ret.) Andy Winfree, Co-Chair, Joint Base Myer-Henderson Hall, VA Retiree Council

CSA RETIREE COUNCIL COMMENTS: The CSARC supports this issue. Official protocol manuals already prescribe that the proper term of Retired Soldiers is the rank in which they retired. The only exception is for "dual-status" individuals who are Retired Soldiers and Department of Defense employees, who are addressed as Mister or Madam. The Army should to re-emphasize the compliance with this protocol to acknowledge the respect due to those who have served as prescribed in AR 25-50.