Wounded, Ill, and/or Injured Compensation and Benefits Handbook

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Introduction

Welcome to the U.S. Department of Defense (DoD) Wounded, Ill, and/or Injured Compensation and Benefits Handbook for Service members of the Armed Forces. The purpose of this handbook is to provide Service members and their support networks with a reference guide to answer some of the most pressing questions that arise for wounded, ill, and/or injured Service members.

The linked Table of Contents will take you to specific locations in the handbook; the hyperlinked words throughout the handbook will direct you to related external websites, where you'll find more detailed information. Additionally, whenever you want to navigate back to the Table of Contents, click the 'Back to Table of Contents' button in the upper right-hand corner of the page.

This handbook is a living document, updated annually by the DoD in collaboration with U.S. Department of Veterans Affairs (VA), U.S. Department of Labor (DoL), U.S. Department of Education (ED), the U.S. Social Security Administration (SSA), and the U.S. Military Services.

CHAPTERS

We restructured the handbook to flow from point of wound, injury, and/or illness to when you return to duty or transition to the civilian community. Chapters 1 – 5 cover the immediate needs of both you and your family members; Chapters 6 – 10 cover disability compensation, disability benefits, and information regarding transitioning from military service.

CHAPTER 1: RECOVERY

This chapter is organized into four sections – Recovery Team, Service Wounded Warrior Programs, Care Coordinators, and Service Dogs – related to support available to you and your family throughout the continuum of care from point of injury, wound, and/or illness to transition.

CHAPTER 2: YOUR MEDICAL CARE

This chapter introduces the TRICARE plans and programs, as well as provides you with travel information to/from medical treatment facilities for you and your family. *Appendix A* provides detailed information on the TRICARE plans and programs; *Appendix B* provides information on your health care privacy protections.

CHAPTER 3: FAMILY AND CAREGIVER SUPPORT

This chapter provides an extensive list of military support services and resources to help Service members, as well as their families and caregivers, through the complexities of recovery.

Appendix C includes information about accessing the National Resource Directory (NRD), which provides access to thousands of services and resources at the national, state, and local levels to support recovery, rehabilitation, and reintegration.

Appendix D includes a listing of DoD-approved Military Service Organizations (MSOs), Veteran Service Organizations (VSOs), and nonprofits to support you and your family from recovery and beyond.

CHAPTER 4: DOD PAY AND ALLOWANCES

This chapter covers the various types of military pay and allowances during your recovery and beyond, including savings plans.

CHAPTER 5: DISABILITY EVALUATION

This chapter summarizes the Integrated Disability Evaluation System (IDES) process, a joint DoD/VA process; the Legacy Disability Evaluation System (LDES) process, a DoD-only evaluation process; and, circumstances where a Service member may not be eligible for disability evaluation referral.

CHAPTER 6: DOD DISABILITY COMPENSATION

This chapter summarizes the different types of DoD disability compensation for which you may be eligible.

CHAPTER 7: SOCIAL SECURITY BENEFITS

This chapter covers the Social Security benefits that may be available to you and/or your family.

CHAPTER 8: SURVIVOR BENEFITS

This chapter summarizes the various federal benefits, privileges, and entitlements available for families of Service members who die while serving on active duty or certain reserve statuses.

Appendix E provides information on the Survivor Benefits Plan (SBP) beneficiary categories.

CHAPTER 9: REINTEGRATION INTO CIVILIAN LIFE

This chapter will discuss the DoD Transition Assistance Program (TAP), as well as multiple Federal Government programs, that provide you with available resources and services to assist you with your transition.

Appendix F provides a consolidated list of the resources available to assist with your transition.

CHAPTER 10: DEPARTMENT OF VETERANS AFFAIRS (VA) BENEFITS

This chapter covers the various VA benefits and resources (e.g., health, education, vocational rehabilitation, loans, etc.) that may be available to you and/or your family.

APPENDICES

- **Appendix A:** TRICARE Plans & Programs
- **Appendix B:** Health Care Privacy Protections
- **Appendix C:** National Resource Directory
- **Appendix D:** DoD-Approved Military Service Organizations, Veterans Service Organizations, and Military-Supporting Nonprofits
- **Appendix E:** SBP Beneficiary Categories
- **Appendix F:** Reintegration to Civilian Life Resources
- **Appendix G:** VA-Recognized Service Organizations
- **Appendix H:** Useful Links
- **Appendix I:** Acronyms

For feedback and/or questions regarding this handbook, please contact Office of the Assistant Secretary of Defense for Health Affairs (OASD(HA)):

Call: 1-703-604-5619

Email: osd.warriorcare@mail.mil
(Subject line: Compensation & Benefits Handbook)

Mail:

2345 Crystal Drive, Suite 120
Arlington, VA 22202

BACK to TOC

Chapter 1: Recovery

This chapter is organized into four sections – Section 1: Recovery Team, Section 2: Service Wounded Warrior Programs, Section 3: Care Coordinators, and Section 4: Service Dogs – related to support available to you and your family throughout the continuum of care from point of injury, wound, and/or illness to return to duty or transition to the civilian community.

SECTION 1: RECOVERY TEAM STRUCTURE

When a Service member becomes wounded, ill, and/or injured, a recovery team, embedded within each Military Service, will support your medical and non-medical needs from point of injury to your reintegration and transition back to military service or to civilian life. Each Military Service's recovery team may consist of but is not limited to:

- **Primary Care Manager (PCM)**
- **Nurse Case Manager (NCM)**
- **Medical Care Case Manager (MCCM)**
- **Non-Medical Care Manager (NMCM)**
- **Recovery Care Coordinator (RCC)**
- **Service Command Leadership**
- **Other Non-Medical Support Personnel** (usually part of your Military Service)

SECTION 2: MILITARY SERVICE WOUNDED WARRIOR PROGRAMS

Each Military Service, as well as the United States Special Operations Command (USSOCOM), operates wounded warrior programs to help wounded, ill, and/or injured Service members during recovery, rehabilitation, and reintegration either back to active duty or to civilian life. They primarily assist with non-medical support issues such as:

- Child and youth programs
- Commissary and Exchange access
- Education and training benefits
- Family support programs
- Invitational Travel Orders
- Legal and guardianship issues
- Lodging and housing adaptation
- Pay and personnel matters
- Post-Traumatic Stress (PTS) and Traumatic Brain Injury (TBI) support services
- Respite care
- Transportation needs
- Other non-medical support services

Following are descriptions of these Service-specific programs:

U.S. Army Recovery Care Program (ARCP)

The ARCP's top priority is the welfare of Soldiers and their families through commitment to the best care and treatment of wounded, ill, and injured Soldiers and commitment to education, training, and careers. The major elements of the ARCP are the Soldier Recovery Units (SRU) and the Recovery Care Coordinators (RCCs).

MEDCOM, Deputy Chief of Staff (DCS), Army Recovery Care Program (ARCP) serves as the US Army proponent to oversee and synchronize policy, advocacy, budget, and force structure planning for warrior care initiatives

as an enabler of Army Readiness. DCS, ARCP is dedicated to Wounded, Ill, and Injured (WII) Soldiers, Veterans, and their Families/Caregivers, providing a Comprehensive Recovery Plan (CRP) for successful reintegration back to unit formations or into the civilian community with dignity, respect, and self-determination.

Solider Recovery Units (SRUs) were developed in 2007 to provide better care and management to wounded, ill, and injured Soldiers and their families. Soldiers assigned to SRUs include active duty Soldiers who require at least six months of rehabilitative care and complex medical management and Reserve Component Soldiers who require definitive medical care. While SRUs resemble a traditional Army unit, their singular mission is to provide comprehensive outpatient management that allows Soldiers to successfully heal and transition. Within the SRUs, Soldiers receive personalized support from a **Triad of Care** that includes a NCM, a Squad Leader, and a PCM. The Triad of Care coordinates clinical and non-clinical issues to successfully transition Soldiers and their families either back to the force or back to civilian life.

As ARCP moves forward, it will continue to evolve to meet the changing needs of its population, as well as the Army. Warrior care remains an Army priority and a sacred obligation.

The ARCP assists and advocates for the Army's most severely wounded, ill and injured Soldiers, Veterans, and their families wherever they are located, regardless of their military status. Soldiers will be assigned a Recovery Care Coordinator as soon as possible after arriving at the SRU. Through the local support of the RCC, ARCP strives to foster the Soldier's independence.

Contact Information	**Official website:** https://wct.army.mil/contactUs.html

U.S. Marine Corps Wounded Warrior Regiment (WWR)

WWR, headquartered in Quantico, Virginia, commands the operation of two Wounded Warrior Battalions and multiple detachments in locations around the globe, including major military treatment facilities and VA Polytrauma Rehabilitation Centers. It provides and facilitates non-medical care to combat and non-combat wounded, ill, and injured Marines, as well as Sailors attached to or in direct support of Marine units, and their family members, to assist them as they return to duty or transition to civilian life. Regardless of location, WWR serves active, Reserve, and Veteran Marines.

The Regiment's support ranges from section leaders and RCCs supporting active duty Marines to the **District Injured Support Coordinators (DISCs) / Field Support Representatives** and call center representatives assisting Reserve and Veteran Marines.

WWR also offers the support of **Clinical Care Advocates (CCA)** – licensed clinical social workers, registered nurses, nurse practitioners, or physician assistants – who are located at the WWR and Battalions and who work closely with wounded, ill, and/or injured Marines, Marines' families, and medical staff to help determine the most appropriate resources for medical and psychological issues. CCAs are available to assist throughout all levels of support.

Contact Information	**Official website:** http://www.woundedwarrior.marines.mil/ **Phone:** 1-877-4USMCWW (1-877-487-6299) – available 365/24/7

U.S. Navy Wounded Warrior

Navy Wounded Warrior is the Navy's non-medical care management program supporting seriously wounded, ill, and injured Sailors and their families. It also collaborates with the U.S. Coast Guard to support Coast Guardsmen and their families.

Navy Wounded Warrior RCCs and NMCMs are located at major Navy treatment facilities throughout the United States, VA Polytrauma Centers, and other medical treatment centers. They provide support to Sailors with combat-related wounds or injuries, as well as those who are seriously injured in shipboard or liberty accidents (e.g., motor vehicle or motorcycle accidents), or incur a serious illness, whether physical or psychological. Non-medical care management support is individually tailored to meet the unique needs of Service members and their families.

Contact Information	**Official website:** http://www.navywoundedwarrior.com **Phone:** 1-855-628-9997

U.S. Air Force Wounded Warrior Program (AFW2)

The AFW2 Program provides personalized care, services, and advocacy for seriously wounded, ill, or injured Total Force Airmen, their caregivers, and families. The program is open to Airmen with both combat wounds and non-combat related injuries and illnesses, which includes those who suffer from invisible wounds like post traumatic stress (PTS), TBI, and mental health challenges. Eligible Airmen who wish to be enrolled should visit the AFW2 website: http://www.woundedwarrior.af.mil, or call for information and enrollment instructions.

Once enrolled, each Wounded Warrior will be assigned a local Recovery Team consisting of an RCC, NMCM, **Medical Case Manager (MCM)**, and additional members, as required, to address specific needs. This team will guide the Wounded Warrior through a 7-Phase Continuum of Care from enrollment to reintegration. The Recovery Teams ensure accessibility to resources and care, minimize delays and gaps in service, and are specially trained to anticipate the needs of a wounded, ill, and/or injured Service member. Together the Recovery Team and Wounded Warrior will address a variety of situations throughout the recovery process, ensuring the member, caregiver and their family are well-equipped to manage challenges as a result of their wounds, injuries, or illnesses. This Recovery Team aims to retain highly skilled Service members; but if retention is not possible, they will ensure support through retirement or separation, and beyond.

Contact Information	**Official website:** www.woundedwarrior.af.mil **Phone:** 1-800-581-9437 (6:30 AM. – 5:00 PM Central Time)

U.S. Special Operations Command (USSOCOM) Warrior Care Program (Care Coalition)

The USSOCOM Warrior Care Program (Care Coalition) supports Special Operations Forces (SOF) wounded, ill, or injured Service members and their families, providing a model advocacy program in order to enhance their quality of life and strengthen the overall readiness of Special Operations. Central to this mission is comprehensive non-medical recovery services for SOF wounded, ill, or injured warriors and their families.

The Care Coalition provides a system of support and advocacy to guide and assist SOF warriors and family or designated caregivers through treatment, rehabilitation, return to duty, or military retirement and transition into the civilian community.

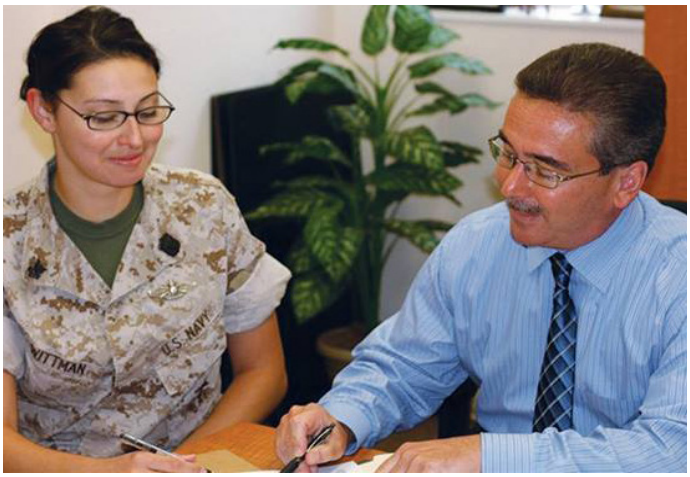
SOF wounded, ill, or injured warriors (active duty, reserve, and veterans) and their families can count on the USSOCOM Care Coalition to aggressively advocate on their behalf in coordination with the Military Services to ensure their best interests are represented.

Contact Information	**Official website:** http://www.socom.mil/care-coalition **Phone:** 1-877-672-3039/1-813-826-8888

SECTION 3: CARE COORDINATORS

If you are seriously wounded, ill, and/or injured, you will have personalized help to guide you through the recovery process. An **RCC** and potentially **Federal Recovery Consultant (FRC)** will be assigned to help you in your non-medical case management. These individuals will provide oversight, assistance, and consultation, identifying gaps in your non-medical services, to address everything from home adaptation, transportation, and finances to child care and educational goals. They will work with your other care providers to ensure that you are connected with the appropriate federal, state, local, non-profit, and private sector programs to meet your goals.

Lead Coordinators (LCs)



A **Lead Coordinator (LC)**, assigned to a Service member who requires complex care coordination, will be an existing member of your **Care Management Team (CMT)** who coordinates the development and oversees the execution of the *Interagency Comprehensive Plan (ICP)*. The LC facilitates communication and serves as the primary point of contact to you, your family, and/or caregiver, as well as the rest of the CMT, in order to avoid or reduce confusion. Your LC can be clinical or non-clinical, and is co-located with the wounded, ill, and/or injured Service member when feasible. However, the LC is not responsible for the actual delivery of care beyond their scope or practice.

Recovery Care Coordinators (RCCs)

The Recovery Coordination Program (RCP) provides RCCs to help wounded, ill, and/or injured Service members, their caregivers, and their families navigate the recovery, rehabilitation, and reintegration process. They help ensure a smooth transition from a recovery and rehabilitation setting back into the civilian community or, in some instances, back to military duty. An RCC is the first point of contact within each of the Military Services' wounded warrior programs. RCCs are located at various military installations and regionalized throughout the country and overseas. Referral to RCCs can come from the Service member, a caregiver, a family member, medical personnel, or a wounded warrior program.

The RCC develops an ICP with the Service member, caregivers, family members, and the Recovery Team to identify goals and resources needed to achieve those goals, such as assistive technology, education, employment, or housing. The RCC works closely with the Recovery Team, comprised of the Medical Care Case Manager, NMCM, Commander, and any other care providers supporting the wounded, ill, and/or injured Service member. The Recovery Team works together to develop, implement, and adjust the Recovery Plan; and provides access to the services required during recovery, rehabilitation, and reintegration. With the Commander, the RCC has ultimate responsibility for ensuring full development and implementation of the ICP. If the Service member transitions to VA care, the ICP goes with him/her and continues to be used and updated by the VA. Defense Health Agency is responsible for oversight and policy of the Recovery Coordination Program, and standardized training for all RCCs. Each Military Service implements its own RCP in accordance with DoD policy.

Non-Medical Care Managers (NMCMs)

Like RCCs, NMCMs are members of your Service's Wounded Warrior Program team typically assigned to seriously wounded, ill, and/or injured Service members whose medical conditions are expected to last at least 180 days. They also work with you to develop the ICP.

Federal Recovery Consultants (FRCs)

The VA's **Federal Recovery Consultation Office (FRCO)** provides care coordination for severely wounded, ill, and/or injured Service members, Veterans, and their families via FRCs. FRCs consult on ICP development and support the CMT. They collaborate with the Service member or Veteran to ensure the Service member or Veteran has necessary access to both DoD and VA benefits and health care, as well as other government and private sector resources when appropriate. FRCs identify barriers to care coordination and identify resolutions.

Think of your Recovery Team, your Service Wounded Warrior Program, and your care Coordinators (LC, RCC/AW2 Advocate, NMCM, and/or FRC) as your own Command Center, making sure you get the right care by the right people at the right time.

SECTION 4: SERVICE DOGS

Service members who have medical conditions that require the assistance of a service dog for activities of daily living may utilize service dogs on DoD installations while on active duty.

Eligibility and Suitability Determination

1. A Service member's **CMT** evaluates and determines that a service dog may mitigate the Service member's disability. A Service member with a disability consults with his/her PCM and specialty care provider if the Service member does not have access to a CMT.
2. The Service member's CMT, PCM, or chain of command, as established by Service-specific policy, may authorize and approve the Service member's assignment of a service dog pending the outcome of a suitability assessment by an accredited service dog organization.
3. The CMT or PCM then refers the Service member to an accredited service dog organization in order to evaluate his or her suitability for a service dog.
4. The accredited service dog organization conducts a suitability assessment of the Service member for a service dog. This assessment determines whether the accredited service dog organization will provide a service dog to the Service member.

If a Service member is not approved for a service dog by their chain of command and/or CMT or PCM, the decision will be reviewed by the first general, flag officer, or Senior Executive in the Service member's chain of command. The decision may then be overturned or upheld. If upheld, a final appeal can be made to the respective Military Department's Assistant Secretary for Manpower and Reserve Affairs.

Note: *Some military working dogs adopted by Service members and any dogs not obtained from an accredited service dog organization approved by the VA do not meet the qualifications for service dogs.*

For more information, visit the DoD Instruction (DODI) 1300.27, Guidance on the Use of Service Dogs by Service Members, published January 7, 2016.

***Service Dog Definition*:**

A dog obtained from an accredited service dog organization approved by the VA that is individually trained to do work or perform tasks for the benefit of an individual with a physical or mental disability. The dog is trained to respond to a verbal command or condition of the qualified Service member. Other species of animals, whether wild or domestic, trained or untrained, are not service dogs for the purposes of this definition. Dogs that are "in training" or whose sole function is to provide emotional support, comfort, therapy, or companionship are not service dogs.

Military Adaptive Sports Program

Defense Health Agency (DHA) oversees the Military Adaptive Sports Program (MASP), which provides reconditioning activities and competitive athletic opportunities to all wounded, ill, and injured Service members to improve their physical and mental quality of life throughout the continuum of recovery and transition. For more information, please visit: http://warriorcare.dodlive.mil/carecoordination/masp.

BACK to TOC

Chapter 2: Your Medical Care

While you are on active duty, your medical care is provided under a health care program called TRICARE at the closest medical facility to your location that best meets your needs. Additionally, your medical care is primarily delivered by your team of recovery providers which may consist of, but is not limited to, the following types of providers:

Primary Care Manager (PCM) or Doctor
Provides and/or coordinates medical care, maintains health records, and refers Service members to specialty care.

Specialty Care Provider (Specialty Medicine)
Provides specialty medical care such as, but not limited to, orthopedics, neurosurgery, or occupational health.

Medical Case Manager (MCM)
Brings together all the medical practitioners who support the Service member's treatment and helps coordinate access to specialists and non-routine medical services. This individual is either a registered nurse or licensed clinical social worker.

Mental Health Provider (Psychologist/Psychiatrist)
Specializes in diagnosis and treatment of mental health injuries such as Post Traumatic Stress (PTS).

Social Worker
Professional trained to help individuals, families, and groups improve their individual and collective well-being.

If you medically retire from the military, your medical care may continue to be provided by TRICARE, and you may also be eligible to receive medical care from the VA *(see Chapter 10: Department of Veterans Affairs (VA) Benefits).*

SECTION 1: TRICARE

TRICARE is a health care program for over 9.4 million Uniformed Services members (Active Duty, Reserves, National Guard, or Retired) and their families. It provides comprehensive coverage to all beneficiaries, including health plans, special programs, prescriptions, and dental plans.

Not sure about your TRICARE coverage?

If so, you can check coverage for yourself and your family members by logging into the MilConnect portal at https://milconnect.dmdc.osd.mil/milconnect/using your valid CAC or DS Logon ID.

If that does not work, contact your regional contractor; they have additional tools to confirm your status. If you want to change your TRICARE enrollment status (e.g., enroll in Prime), the regional contractor can help you with that change. If you do not already have TRICARE benefits, you will need to contact your military service to confirm the status and dates of your orders.

Table 1 and Table 2 provide a quick overview of the TRICARE plans, programs, and eligibility for Service members. For the most current information on all TRICARE plans and programs, including respective eligibility visit: http://www.tricare.mil/Plans.

Table 1: TRICARE Plans Eligibility for Service Members Only

TRICARE Plans	Active	Guard	Reserve	Retired	Other
TRICARE Prime	X			X	
TRICARE Prime Remote	X				
TRICARE Prime Overseas	X				
TRICARE Prime Remote Overseas	X				
TRICARE Select		X	X	X	X
TRICARE Select Overseas		X	X	X	X
TRICARE For Life					X
TRICARE Reserve Select		X	X		
TRICARE Retired Reserve				X	X
TRICARE Young Adult					X
US Family Health Plan			X	X	X

Note: *TRICARE Prime, TRICARE Prime Remote, TRICARE Prime Overseas, and TRICARE Prime*

Remote Overseas may be available to eligible activated Reserve and National Guard members who are called or ordered to active duty service for more than 30 days in a row and their families.

Table 2: TRICARE Programs Eligibility for Service Members Only

TRICARE Plans	Active	Guard	Reserve	Retired	Other
TRICARE Active Duty Dental Program	X	X	X		
TRICARE Dental Program		X	X		X
Office of Personnel Management's Federal Employee Dental and Vision Insurance Program (FEDVIP)				X	X
TRICARE and Medicare				X	X
TRICARE Transitional Assistance Management Program (TAMP)					X

For more information on TRICARE plans, programs, and eligibility, please refer to Appendix A (TRICARE Plans and Programs) of this handbook or the TRICARE website at www.tricare.mil for comprehensive information. Additionally, if you are a National Guard or Reserve member, review the Choices for National Guard and Reserve Fact Sheet and the TRICARE Choices for National Guard and Reserve Handbook for more information.

Please keep in mind that eligibility to receive care under any TRICARE plan is dependent on you and your dependents being registered in the DEERS. Active duty and retired Service members are automatically registered in DEERS, but they must ensure that their eligible family members are registered. It is critical that family members be accurately registered in DEERS because approval of TRICARE claims for their health care expenses depends on it.

Most personnel offices that issue military ID cards can verify and update your information in DEERS. You can also call the DEERS Support Office at 1-800-538-9552 (TTY/TTD: 1-866-363-2883 for persons with hearing impairments).

An Important Note about TRICARE Program Information

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. Military hospital and clinic guidelines and policies may be different than those outlined in this publication. For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.

SECTION 2: TRAVEL AUTHORIZATIONS

As an active duty Service member, if you become wounded, ill, and/or injured and require inpatient or outpatient care at an MTF or other medical facility, you are entitled to specific pay benefits. Additionally, your family members or designated individuals may be eligible to receive travel orders, which authorize per diem to offset those individuals' costs for lodging, meals, and incidental expenses while they support your recovery.

Travel Pay for Medical Treatments

You are entitled to certain pay benefits when medically evacuated from a combat zone. To receive payment, you will have to file a travel voucher *(DD Form 1351-2)* through your Services' administrative support section. Types of pay for which you may be eligible include travel pay (i.e., lodging, meals, and incidentals); calculation of payment amounts is based on the per diem rates by location.

If you are a Reserve Component Service member (Guard or Reserve), who becomes wounded, ill, and/or injured in the line of duty (LOD), you are entitled to travel and transportation allowances, or monetary allowances in place thereof, for necessary travel incident to medical and dental treatment resulting from a LOD determination.

The Army travel pay is handled by the Defense Finance Accounting Service (DFAS) Casualty Travel office. The Navy, Air Force, and Marine Corps handle travel pay at their local finance offices.

For additional information regarding travel entitlements refer to *Defense Travel Management Office (DTMO)* at http://www.defensetravel.dod.mil/site/perdiem.cfm.

Travel for Your Family

If you are an inpatient at a location that is away from your family, up to three immediate family members may be eligible to travel at the Government's expense. The Service member may change any or all of the designated individuals eligible to travel during the duration of the inpatient treatment. If you are inpatient at an OCONUS location and your family member does not possess a passport, your service casualty office will coordinate with the Department of State for the issuance of an emergency passport. This may include travel at Government expense to the closest consulate who can issue the emergency passport.

When you become an outpatient, you may be able to designate one individual (either an immediate family or designated person) to be your non-medical attendant (NMA). This individual, recommended by a medical authority, can remain with you during your recovery. Contact your local MTF or regional Service administrative section with any questions about the NMA authorization.

Depending on your Service, travel authorizations come in the form of Invitational Travel Authorizations (ITA) or Emergency Family Member Travel (EFMT) orders. Like your travel orders, incremental payments and extensions to the orders may be needed if your stay as an inpatient or outpatient at the medical facility is extended. These travel orders will cover the cost of travel, hotels, and meals and some incidentals up to a maximum daily amount determined by your location. Some expenses are not reimbursable.

Each Service handles the process of issuing orders and reimbursing expenses in a slightly different manner. Contact your Service administrative personnel for details and assistance with submitting a travel voucher for payment.

- **U.S. Army:** The Wounded Warrior Pay Management Team (WWPMT) at the local finance office or your AW2 Advocate will help your family complete the travel vouchers needed to pay expenses. For additional information, you can call the DFAS Travel Pay customer service center toll-free at 1-888-332-7366.
- **U.S. Navy:** The Service member's parent command will help your family complete the travel vouchers and answer any questions about the maximum amount authorized for the location. Additionally, your Navy Wounded Warrior program advocate can help get your family to your bedside. For additional information, you can call the DFAS Travel Pay customer service center toll-free at 1-888-332-7366.
- **U.S. Marine Corps:** The Marine Detachment Team (MarDet) or the Inspector-Instructor (I-I) will give your family members their ITAs and can explain the maximum amounts of per diem at your location. The MarDet or I-I will also provide extensions for the orders if needed, help with filing travel vouchers every 30 days to receive payment, help fill out requests for advances, and answer any questions your family members may have. You can call the Marine Corps Casualty Branch toll-free at 1-800-847-1597 or 1-703-784-9512.
- **U.S. Air Force:** An Air Force Family Liaison Officer (FLO), who is appointed to each Air Force member who suffers a combat-related wound, illness, or injury, will provide your family with the EFMT paperwork needed to get them to your location and will answer any questions they may have. If you or your family have any unresolved issues or need more information on EFMT, call toll-free at 1-800-433-0048 or 1-210-565-3505.
- **U.S. Special Operations:** Defer to your parent Service for more information.

Travel for Follow-Up Medical Care

As an active duty Service member, your command will provide you with travel orders that authorize funding for transportation expenses. Your travel orders will authorize per diem to offset your costs for lodging, meals, and incidental expenses. Additionally, you may be authorized to have an attendant (appointed by a medical authority) or an escort (appointed by your command), if you are incapable of traveling alone.

SECTION 3: FAMILY AND MEDICAL LEAVE ACT (FMLA)

Under the FMLA, your family may have job protection when they take time off work to care for you. Eligible employees of covered employers are entitled to take 26 workweeks of leave during a single 12-month period for a covered Service member, including a member of the National Guard or Reserves, with a serious injury or illness, if the eligible employee is the Service member's spouse, son, daughter, parent, or next of kin (this is called military caregiver leave). This applies to Service members with a serious injury and/or illness that requires medical treatment, recuperation, and/or therapy in outpatient status and applies to Service members retired due to disability. Visit www.dol.gov/whd/fmla for information on eligibility.

Health Care Privacy Protections

Your privacy will be protected at all times throughout your medical care. For information on your health care privacy protections, go to Appendix B.

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Chapter 3: Family and Caregiver Support

This chapter provides an extensive list of organizations, military support, compensation, benefits, and information to help guide and support Service members and, particularly, their families and caregivers through the complexities of recovery.

SECTION 1: MILITARY ONESOURCE

Military OneSource is your 24/7 connection to information, answers and support – one source for your best MilLife. As a DoD-funded program, their mission is to advance the wellbeing of Service members and the immediate families of active duty, National Guard and Reserve (regardless of activation status), Coast Guard when activated for the Navy, DoD expeditionary civilians, and survivors. Veterans including Coast Guard, are eligible for Military OneSource up to 365 days past separation or retirement.

Their confidential support services include specialty consultations on topics including financial counseling, wounded warrior resources, relocation support, and spouse education and career opportunities. When you just need to talk, experts trained in military life provide private, non-medical counseling to help you through improving relationships at home and work, job stress, marital and communication issues, grief or loss, deployment difficulties, and more. You can rely on Military OneSource for worldwide access, anytime, to receive free support. Connect with an expert today by visiting MilitaryOneSource.mil or calling 800-342-9647.

** **Note:** Military OneSource is available to Coast Guard members and their families when activated on Title 10 orders with the Navy.*

SECTION 2: MILITARY AND FAMILY SUPPORT CENTERS

In addition to providing information and referral to other forms of support, military and family support centers assist Service members and their families with maintaining healthy relationships and lifestyles, strengthening interpersonal competencies and problem-solving skills, and managing finances. Services are available face-to-face and by phone. For more information visit: https://installations.militaryonesource.mil/.

Additionally, Family Assistance Centers (FACs) are located in every state to serve geographically dispersed military families. FACs provide information, outreach, and referrals to services in your community and serve active, Reserve, and National Guard Service members, as well as their families. To find the nearest FAC, use the Service Provider Network: https://www.militaryonesource.mil/national-guard/joint-services-support-program.

SECTION 3: COAST GUARD SUPPORT

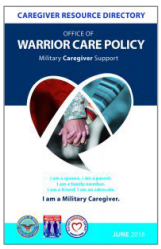
Coast Guard Support (CG SUPRT) is a comprehensive employee assistance program for Coast Guard members, civilians, members of the Selected Reserves, and their family members. It offers a suite of no-cost services available 24/7 that includes:

- Non-medical counseling
- Health and wellness coaching
- Home and work balancing
- Financial wellness coaching
- Career counseling for dependents

- Legal and financial assistance
- Document translation
- Child/Adult care services
- Summer camps and schools
- Self-assessments

For more information call 1-855-CG SUPRT (1-855-247-8778), or visit www.cgsuprt.com.

SECTION 4: CAREGIVER RESOURCES



DHA developed the **Caregiver Resource Directory (CRD)** to empower military caregivers with information about national-level resources and programs that are available to support them. Topics include: helplines, advocacy and benefit information, career transitions and employment, military caregiver support, children's needs, education and training, financial support, and rest and relaxation.

You can download the CRD online: https://warriorcare.dodlive.mil/caregiver-resources/. To request a paper copy of the directory, please email osd.caregiver@mail.mil or mail your request to Defense Health Agency, Attention: Recovery Coordination Program, 2345 Crystal City Drive, Suite 120, Arlington, VA 22202. Make sure to include the number of CRDs requested, a shipping address, and your name.

Additionally, DHA hosts Military Caregiver PEER Forums (in person and virtually) throughout the year. To find a Military Caregiver PEER Forum near you, visit: http://warriorcare.dodlive.mil/peer-forums-states. If an in-person PEER Forum is not offered in your area, you can attend a virtual PEER Forum every fourth Thursday of the month by RSVP'ing at OSD.Caregiver@mail.mil.

Additional Caregiver Reference:
See Chapter 10, Section 13 for information on the VA's Family Caregiver Support Program.

SECTION 5: MILITARY AND FAMILY LIFE COUNSELING (MFLC) PROGRAM

The Military and Family Life Counseling Program supports Service members, their families, and survivors with face-to-face non-medical counseling services worldwide. Trained to work with the military community, military and family life counselors deliver flexible, non-medical counseling and presentations at locations on and off the installation. Counseling services with child and youth behavioral counselors are also available for military children.

Counselors can help you improve your skills to manage military and family life. They provide support to individuals, couples, families, and groups for a range of issues including, but not limited to: deployment stress, reintegration, relocation adjustment, separation, anger management, caregiving, conflict resolution, parenting, parent/child communication, relationship issues, coping skills, homesickness, and grief and loss.

Military and Family Life Counseling services are confidential; however, counselors are mandated reporters of situations that include harm to self or others and other duty to warn situations.

Discover what the program offers by visiting: https://www.militaryonesource.mil/confidential-help/non-medical-counseling/military-and-family-life-counseling.

SECTION 6: CHILD CARE FEE ASSISTANCE

Each of the Military Services provide fee assistance programs to offset the cost of community based child care for Service members who have children from birth through 12 years. The DoD Child Care Fee Assistance Program is administered through Child Care Aware of America. Information and eligibility requirements can be found by visiting https://usa.childcareaware.org/feeassistancerespite/military-families/. Fee assistance programs include:

- **Military Childcare in Your Neighborhood (MCCYN):** Provides fee assistance for families of active duty Sponsors, Civilians, Guard/Reservist, and Guard/Reserve Technicians who are unable to access on-installation child care.
- **Operation Military Child Care (OMCC):** Provides fee assistance for families of Service members with a status of Deployed, Recruiter, or Deployed Guard/Recruiter.
- **Respite Child Care Program:** This is free hourly child care to support the unique child care needs for families of eligible Service members.

Select your branch of service for more information on eligible programs and assistance.

- **Army:** https://usa.childcareaware.org/fee-assistancerespite/military-families/army/
- **Navy:** https://usa.childcareaware.org/fee-assistancerespite/military-families/navy/
- **Marine Corps:** https://usa.childcareaware.org/fee-assistancerespite/military-families/marines/
- **Air Force:** https://usa.childcareaware.org/fee-assistancerespite/military-families/air-force/

For additional programs that may apply to your family, visit: https://usa.childcareaware.org/fee-assistancerespite/military-families/.

SECTION 7: FAMILY ADVOCACY PROGRAM (FAP)

The FAP provides comprehensive prevention services, advocacy, risk and safety assessments, and treatment for Service members and their families who have experienced incidents of child abuse and neglect , problematic sexual behavior in children and youth, and domestic abuse. FAP's goal is to strengthen families by focusing on resiliency and helping families build healthy relationships. Information on the FAP can be obtained at an installation's FAP offices or through Military OneSource.

The FAP works to prevent domestic abuse, problematic sexual behavior in children and youth, and child abuse and neglect by providing education and awareness through the following programs:

- **The New Parent Support Program (NPSP):** This no-cost program is designed to meet the needs of expectant active duty military personnel, their spouses, and those families with children under the age of 4. The program was created to provide prenatal and parenting skills education to active duty Service members and their families. NPSH-VP's primary goal is to enhance their quality of life by empowering them to meet the challenges of parenthood, while maintaining a military lifestyle.

The program, which is housed at the Fleet and Family Support centers, offers a variety of services including prenatal health and nutrition consultation, breastfeeding education, early child development education, parenting skills, and home visitation services.

NPSHVP professionals know that raising a family is very rewarding and can sometimes be challenging. Home visitors are trained and experiences in early child development education, nursing, social work, and/or marriage and family support services. They are committed to helping active duty parents and their children maintain a strong and healthy family.

Families are referred for support services through self-referrals, command leadership, MTF Pediatrics and OB-GYN clinic staff, Child Development Centers, ombudsmen, and other programs that provide support services to active duty families.

- **Classes, workshops, and seminars:** Couples communication, anger management, stress management, effective parenting, and conflict resolution are just a few of the educational programs available to help military families learn how to build positive relationships.
- **Counseling:** One-on-one support helps parents develop positive parenting techniques, manage anger, and learn communication skills.
- **Public awareness campaigns:** The FAP works to help communities learn to recognize domestic and child abuse, as well as problematic sexual behavior in children and youth, where and how to report it, and how victims can get help.

SECTION 8: LEGAL ASSISTANCE

It is important to establish basic legal arrangements that will support you throughout your recovery into your transition, including:

- **Preparing a will:** This provides specific guidance on your wishes in the event of your death.
- **Establishing a durable power of attorney:** This provides a designated individual specified authority to act on your behalf in the event you are incapacitated.

For legal assistance, contact either your Service Wounded Warrior program office (or administrative section) or the MTF legal section. You may also utilize Military OneSource, the National Resource Directory (NRD) (see Appendix C), and the DHA CRD for non-military legal assistance resources.

SECTION 9: EXTENDED CARE HEALTH OPTION (ECHO)

The TRICARE Extended Care Health Option (ECHO) provides supplemental services to active duty family members with qualifying mental or physical disabilities (e.g., family member who's diagnosed with moderate or severe intellectual disability, a serious physical disability, or an extraordinary physical or psychological condition. Support includes, but is not limited to:

- Assistive services
- Durable equipment
- Expanded in-home medical services
- Rehabilitative services
- Respite care
- Training in use of special education and assistive technology devices
- Institutional care in private nonprofit, public, and State institutions/facilities
- Transportation to/from such institutions/facilities

To use ECHO, qualified beneficiaries must be enrolled in the Exceptional Family Member Program and register through ECHO case managers. For more information, visit: http://www.tricare.mil/Plans/SpecialPrograms/ECHO.aspx.

SECTION 10: ECHO HOME HEALTH CARE (EHHC)

An ECHO-registered beneficiary may qualify for EHHC when he or she is homebound and requires skilled services beyond the level of coverage provided by the TRICARE Home Health Care Prospective Payment System. The Service member's PCM or attending physician will determine if the Service member is eligible for EHHC services and will develop a plan of care which will be reviewed every 90 days or when there is a change in the Service member's condition.

A TRICARE-authorized home health agency may provide the following services in the beneficiary's home: skilled nursing care from a registered nurse or by a licensed or vocational nurse under direct supervision of a registered nurse; services provided by a home health aide under direct supervision of a registered nurse; physical therapy, occupational therapy, and speech-language pathology services; medical social services under the direction of a physician; teaching and training activities; and medical supplies.

The EHHC benefit is only available in the United States, District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. For more information, visit: http://www.tricare.mil/ Plans/SpecialPrograms/ECHO/EHHC.aspx.

SECTION 11: MY CAREER ADVANCEMENT ACCOUNT (MyCAA) SCHOLARSHIP

The MyCAA is a workforce development program that provides eligible military spouses with $4,000 of tuition assistance. The scholarship supports military spouses pursuing licenses, certificates, certifications, or associate's degrees necessary to gain employment in high-demand, high-growth, and portable career fields and occupations.

This program is available to spouses of active duty Service members in pay grades E1-E5, W1-W2, and O1-O2 (including the spouses of activated Guard and Reserve members within those pay grades), who successfully completed high school. Additionally, spouses must be able to start and complete their courses while their sponsor is on Title 10 military orders (i.e., active duty orders).

For more information, including eligibility criteria/exclusions and program benefits/exclusions, visit: https://www.afpc.af.mil/Benefits-and-Entitlements/Spouse-Education-and-Career-Opportunities/.

SECTION 12: SPOUSE EDUCATION AND CAREER OPPORTUNITIES (SECO)

The SECO program provides education and career guidance to military spouses worldwide, offering comprehensive resources and tools related to career exploration, education, training and licensing, employment readiness, and career connections.

The Military Spouse Employment Partnership (MSEP) is a component of the SECO program that helps military spouses connect with employers who have committed to recruiting, hiring, promoting, and retaining military spouses in careers that fit the mobile military life.

For more information, visit https://myseco.militaryonesource.mil.

To contact a SECO Counselor, call 1-800-342-9647 or visit Military OneSource at www.militaryonesource.mil/seco.

SECTION 13: TRICARE MENTAL HEALTH CARE AND SUBSTANCE USE DISORDER BENEFITS

TRICARE mental health care and substance use disorder (SUD) services are available for you and your family during times of stress, depression, grief, anxiety, mental health crisis, or misuse or abuse of alcohol or drugs.

Covered Outpatient Services include:

- Psychotherapy (individual, family, group)
- Psychoanalysis
- Psychological testing and assessment
- Medication Assisted Treatment
- Intensive Outpatient Program
- Partial Hospitalization Program
- Medication management

Covered Inpatient Services include:

- Acute inpatient psychiatric care
- Psychiatric residential treatment center care

Other Services include:

- Telemedicine Services
- Inpatient and residential SUD rehabilitation facility care
- Suicide prevention

Active duty Service members have no costs for mental health care from or authorized by the Military Health System. Non-active duty members can minimize costs by seeking care at military hospitals or clinics, when available, or from TRICARE network providers. For more information, visit: http://tricare.mil/CoveredServices/Mental.aspx.

SECTION 14: TRICARE RESPITE CARE PROGRAM

This program offers short term care exclusively to active duty Service members, as well as Guard and Reserve members, who are injured in the line of duty, who have a serious injury and/or an injury that has resulted in or may result in a physical disability or an extraordinary physical or psychological condition. The program provides a "break" for primary caregivers who have been caring for the patient at home and assisting with activities of daily living.

Respite care benefits are limited to eight hours/day for five days/week. Service members do not incur any out-of-pocket expenses for these services and there is no benefit cap.

Respite care must be provided by a TRICARE-authorized Home Health Agency. The Service member's primary Care Physician or Medical Case Manager who works with the Primary Care Physician to get approving authorities to review and approve respite care when the care plan includes frequent primary caregiver interventions (e.g., more than two during the eight-hour period per day that the primary caregiver would normally be sleeping).

For more information, visit: https://tricare.mil/respite.

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Chapter 4: DoD Pay and Allowances

There are various types of military pay. Basic pay is received by all Service members and is the main component of your salary. The other pays, often referred to as special and incentive pays, are for specific qualifications or events.

Allowances are the second most important element of military pay. Allowances are moneys provided for specific needs, such as food or housing. Monetary allowances are provided when the government does not provide for that specific need.

Contact your chain of command or your Service's administrative support section with any pay or allowance questions, as well as to determine your specific pay and allowance eligibility.

SECTION 1: YOUR PAY WHILE RECOVERING

Defense Finance and Accounting Service (DFAS)

DFAS provides finance and accounting services for the civilian and military members of the DoD. The DFAS myPay site allows users to manage pay information, leave and earning statements, and W-2s. For further information, visit: https://mypay.dfas.mil/mypay.aspx.

In addition to your personal account, you have the ability to create a Limited Access Account that may be given to others so that they can view your pay and tax statements without allowing them to create any pay changes. You may delete your designated person's Limited Access at any time.

To create the Limited Access Account, access the myPay Personal Settings page, where you will create a Limited Access Login ID and Password. Your designated person(s) will gain access by logging into myPay using the Login ID and Password that you create on your personal settings page.

Pay and Allowance Continuation (PAC)

The PAC program allows for the continuation of any incentive pay, bonus, or similar benefits to include the travel incidentals of the temporary additional duty (TAD) or temporary duty (TDY) per diem allowance for members serving in a combat operation, combat zone, or hostile fire area while exposed to a hostile fire event.

If you are hospitalized for treatment from a wound, illness, and/or injury you received in a combat operation, combat zone, hostile fire area, or from being exposed to a hostile fire event (regardless of location), you may continue to receive some of the pay and allowances (including any bonuses, Hardship Duty Pay-Location (HDP-L), Hostile Fire Pay (HFP), special and incentive pays, or similar benefits) that you were receiving when you were wounded, injured, and/or became ill.

Your PAC payment will continue until the following occurs:

- You reach one year after the date on which you are first hospitalized for the treatment of the qualifying event; it may be extended under extraordinary circumstances in six month increments by the Deputy Under Secretary for Personnel and Readiness.
- You return for assignment to other than a medical or patient unit for duty.

- You are discharged, separated, or retired (including temporary disability retirement) from the Uniformed Services or you are absent without leave (AWOL)/confined.

The Combat Zone Tax Exclusion and Family Separation Allowance are not included in PAC entitlements, and have separate eligibility requirements.

Basic Allowance for Subsistence (BAS)

BAS is meant to offset costs for your meals, but it is not intended to offset the costs of meals for your family members. All enlisted members receive full BAS, but pay for their meals (including those provided by the government). Each year BAS is adjusted based upon the increase of the price of food as measured by the U.S. Department of Agriculture (USDA) food cost index.

If you are hospitalized, you will continue to receive your BAS at the standard rate while you are an inpatient. When you become an outpatient, you will continue to receive BAS as long as you are not issued a meal card to eat in a military dining facility.

For more information, visit:
http://militarypay.defense.gov/Pay/Allowances/BAS.aspx.

Basic Allowance for Housing (BAH)

BAH is an allowance to offset the cost of housing when you do not receive government-provided housing. This compensation depends upon your location, pay grade, and whether you have dependents. For the Active Component, it is based on the zip code of your permanent duty station (PDS). For the Reserve Component, it is based on the zip code of your home of record (HOR). It is payable at a rate based on your assigned PDS when government quarters are not provided for you or your dependents, or when you are temporarily residing away from your PDS or deployed. You will continue receiving BAH throughout your medical treatment based on your dependency status and your PDS. It will not change or terminate while you are being treated in an MTF unless you receive Permanent Change of Station (PCS) orders. The current JTR 100401 rate protection only applies as long as you do not PCS (as mentioned), but it can change based on a reduction in grade or change in dependency status. So, if a Service member gets married or has a child while in a MTF, he could receive a lower "with dependents" rate than his previous rate at "without dependents" if the current BAH rate has decreased.

For more information, visit:
https://www.defensetravel.dod.mil/site/bah.cfm.

180-Day Family Housing Extension

If you are occupying family housing and separate from active duty, you would normally be required to vacate family housing as soon as you separate. If you are separating due to a medical condition, you may be eligible for an extension that will allow you to remain in family housing for up to 180 days beyond your transition date. Housing extensions are made on a space-available basis. Call your installation office and ask for details.

Family Separation Allowance (FSA)

If you have dependents and serve in an unaccompanied tour of duty, you may be entitled to an FSA of $250 per month. FSA accrues from the day of departure from the home station and ends the day prior to arrival at the home station.

This allowance is in addition to any per diem or other entitlements you receive if you are away from your PDS for more than 30 days for TAD/TDY or on a temporary change of station (TCS). If you were receiving FSA while deployed and were then sent to a MTF in a location other than your PDS for Active Component or your HOR for Reserve Component, you will continue to be paid FSA unless all your dependents come to stay at your location for more than 30 days.

The pay stops on the 31st day all your dependents are in your location or the day before you return to your permanent duty location or home of record.

For more information, visit:
http://militarypay.defense.gov/PAY/Allowances/fsa.aspx.

Hardship Duty Pay Location (HDP-L)

HDP-L is paid to you if you serve in designated hardship locations. These locations have living conditions that are well below the standard most members in the U.S. would generally experience. HDP-L recognizes arduous living conditions, excessive physical hardship, and/or unhealthful conditions that exist in a location or assignment. This entitlement stops on the day you leave the hardship location, unless you are covered by PAC (see above for an explanation of PAC). You must serve for 30 days in a designated area to receive HDP-L, however PAC eligibility applies to HDP-L if you are evacuated during the first 30 days.

For more information, visit: http://militarypay.defense.gov/Pay/Special-and-Incentive-Pays/HDP/.

Hostile Fire Pay/Imminent Danger Pay (HFP/IDP)

HFP/IDP are special pays that compensate for physical danger. You can collect one or the other, but not both at the same time.

HFP is paid if you take hostile fire or are exposed to a mine explosion(s) which endanger the member. IDP is paid if you are in a foreign area, as designated by the Secretary of Defense, with a threat of physical harm or imminent danger because of civil insurrection, civil war, terrorism, or wartime conditions. This entitlement stops on the day you leave the designated location, unless you are covered by PAC (see above for an explanation of PAC).

For more information, visit: http://militarypay.defense.gov/Pay/Special-and-Incentive-Pays/HFP_IDP/.

Incapacitation Pay

A Reserve Component member who is unable to perform military duties, as determined by the Secretary of the Military Department concerned, due to an injury, illness, and/or disease incurred or aggravated in the line of duty is entitled to full pay and allowances, including all incentive and special pays if otherwise eligible.

Additionally, a Reserve Component member who is able to perform military duties and who is no longer on active duty orders is entitled to a portion of incapacitation pay, upon request, if he or she demonstrates a loss of earned income from non-military employment or self-employment as a result of an injury, illness, and/or disease incurred or aggravated in the line of duty. *(**Note:** Incapacitation Pay will not be offset by VA benefits received.)*

For more information, visit: http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/124101p.pdf.

Special Compensation for Assistance with Activities of Daily Living (SCAADL)

SCAADL monthly compensation is paid to eligible Service members with a permanent catastrophic injury and/or illness, incurred or aggravated in the line of duty, to offset the economic burden borne by their primary caregivers providing non-medical care, support, and assistance. In the absence of caregiver assistance, a Service member would require hospitalization, nursing home care, or other institutional care.

The amount of SCAADL compensation a Service member receives is based on a three-tier system that reflects care required by the Service member and provided by his or her caregiver:

- Tier 1 reflects a need of at least 10-24 hours of caregiver services per week
- Tier 2 reflects a need of at least 25-39 hours of caregiver services per week
- Tier 3 reflects a need of at least 40 hours, or full-time, caregiver services per week

The amount of SCAADL compensation is also based on the Department of Labor's Bureau of Labor Statistics wage rate for a home health aide in the Service member's geographical location. For example, a Service member receiving a Tier 1 compensation level in Montgomery, Alabama may receive a different amount of monthly compensation than a Service member receiving a Tier 1 compensation level in Los Angeles, California due to the different wage rates in those geographic areas.

Additional SCAADL information and guidance can be found at the following website: http://warriorcare.dodlive.mil/benefits/scaadl.

Access to Special / Partial / Casual Pays

If you are being treated at a location that makes it difficult for you to get to your bank, you may be eligible for a special payment to cover incidental costs that arise during your treatment. The Army calls these "casual pays," the Air Force calls them "partial pays," and the Navy/Marine Corps call them "special pays." This is an advance on your end-of-month paycheck, and will be automatically deducted from your pay during subsequent pay periods until the advanced amount is paid back. The finance office closest to where you are located can help you with this request as can your Service administrative section.

SECTION 2: UNIFORMED SERVICES SAVINGS DEPOSIT PROGRAM (USSDP)

The USSDP, also commonly known as the Savings Deposit Plan, was established to provide the opportunity to build financial savings for members of the uniformed services who serve in a combat zone, direct support location, or a qualified hazardous duty location while the members are also receiving imminent danger pay or hostile fire pay. Amounts up to $10,000.00 may be deposited, earning 10% interest annually (applied quarterly at 2.5%). To participate in the program, you must be receiving HDP/IDP and be deployed for at least 30 consecutive days or one day in each of three consecutive months.

If you are medically evacuated, you may withdraw that money from your USSDP account should you need the funds for immediate expenses. If you do not wish to withdraw right away, DFAS will automatically transfer the balance of your USSDP into your regular military pay 120 days after you leave the combat zone. Keep in mind that your USSDP will continue to accrue interest for 90 days after you leave the combat zone, so withdrawal before that point will reduce the interest you receive on your savings.

Information on USSDP and withdrawal instructions can be found at: http://militarypay.defense.gov/Benefits/Savings-Deposit-Program/.

For more information, contact the USSDP Help Line toll-free at 1-888-332-7411.

SECTION 3: FEDERAL THRIFT SAVINGS PLAN (TSP)

The TSP is a Federal Government-sponsored retirement savings and investment plan which offers the same type of savings and tax benefits that many private corporations offer their employees under 401K plans. The retirement income that you receive from your TSP account will depend on how much you have contributed to your account during your working years and the earnings on those contributions.

If you have been participating in the TSP, you may leave your account intact even if you separate from active duty. You would still be able to manage your account investments, but you would not be able to make any future contributions. You may, however, transfer any pre-tax eligible rollover distribution (as determined by the Internal Revenue Service) into your TSP account after your discharge from the service.

You can choose to withdraw all or a portion of your account value, but you will have to pay taxes on the withdrawal, and you may be subject to an additional 10% tax penalty if you are under age 59½. If you do not wish to leave your funds invested with the TSP, a better option for some than withdrawing your funds is to roll over your TSP account balance into an Individual Retirement Account (IRA) with any financial institution of your choosing. Also, if you become employed with an employer who offers a 401K, you may be able to transfer your account balance into your new 401K. Your customer service representative at your financial institution or your new employer will provide you the paperwork needed to do this. To learn more about your options with the TSP, including Roth contributions and non-taxable withdrawals, visit the TSP website at https://www.tsp.gov/.

SECTION 4: TUITION ASSISTANCE (TA) PROGRAM

If you are thinking that the time is right to pursue Off-duty education, you can get started at your installation's education office or your Service's virtual education center. Under the TA program, you may be eligible to receive up to $4,500 per fiscal year ($250 per semester hour or equivalent credit hour). The TA Program funds 100% of institutional charges for tuition, up to the amounts listed above, at the certificate, associate's, bachelor's, or master's level. However, books and fees are not covered. TA payments are not authorized for courses leading to a lateral or lower-level degree that you might already have (i.e., a second associate's or bachelor's degree), and all TA is subject to Service-specific eligibility requirements. Active duty members may elect to use GI Bill "Top-Up" programs in addition to TA to cover costs that might exceed what TA will pay. Rules for the use of TA differ for members of the Reserve Component.

For more information about TA Top-Up, visit: http://www.benefits.va.gov/gibill/tuition_assistance.asp.

For more information, you should contact your Service's education counselor or visit your Service's website:

- **Army:** https://www.goarmyed.com/
- **Navy:** https://www.navycollege.navy.mil
- **Marine Corps:** https://www.marines.com/being-a-marine/benefits.html
- **Air Force:** https://www.airforce.com/careers/pay-and-benefits

SECTION 5: TRAUMATIC SERVICE MEMBERS' GROUP LIFE INSURANCE (TSGLI)

If you have **Service Members' Group Life Insurance (SGLI)** you are automatically enrolled in the TSGLI program which provides you with traumatic injury protection. Information on SGLI and TSGLI can be found at: http://militarypay.defense.gov/Benefits/ServicemembersGroupLifeInsurance.aspx.

TSGLI provides for payment up to $100,000 to you if you incur a qualifying loss as the result of a traumatic injury (on or off duty). TSGLI payments are designed to help you and your family with financial burdens associated with recovering from a severe injury (such as travel, temporary housing, and/or the loss of income). Payments range from $25,000 to $100,000 in increments of $25,000. TSGLI payments are a one-time, tax-free, lump sum payment per traumatic injury; it is not ongoing income replacement. The amount you would receive depends on your injury.

Qualifying injuries and payment amounts are listed in the TSGLI Schedule of Losses, which you can find on the VA website at: https://benefits.va.gov/INSURANCE/tsgli_schedule_Schedule.asp.

All qualifying losses that are a result of a traumatic injury must occur within 730 days of an identifiable traumatic injury. There are certain circumstances under which a traumatic injury will not be covered by TSGLI.

If you feel that you qualify for TSGLI payment, you can obtain a TSGLI claim form (SGLV 8600) by visiting https://www.benefits.va.gov/INSURANCE/forms/TSGLI-Form.htm or contacting the TSGLI point of contact for your Service:

- **Army:** 1-800-237-1336
- **Navy:** 1-833-330-6622
- **Marine Corps:** 1-877-216-0825 or 1-703-432-9277
- **Air Force:** 1-800-433-0048
- **Air National Guard:** 1-240-612-9151
- **Air Force Reserve:** 1-800-525-0102
- **Coast Guard:** 1-202-795-6638
- **National Oceanic and Atmospheric Administration (NOAA) Corps:** 1-301-713-3444
- **Public Health Services:** 1-240-276-8799

For additional information about TSGLI, visit http://benefits.va.gov/insurance/tsgli.asp.

See Section 3 of Chapter 10 (VA Benefits) for additional information on SGLI and TSGLI, as well as **Veterans' Group Life Insurance (VGLI)**.

SECTION 6: EXCESS LEAVE OR PERMISSIVE TEMPORARY DUTY (PTDY)

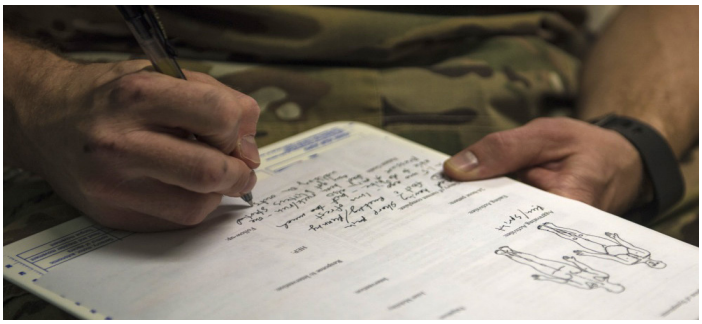
Your eligibility for excess leave or PTDY is dependent on the conditions under which you leave active duty. If you are leaving voluntarily, you are not eligible for excess leave or PTDY. Retirees are also ineligible for excess leave but are eligible for PTDY (20 days for retirees stationed within the continental U.S. and 30 days for retirees stationed outside the continental U.S.) for the purpose of job/house hunting and other relocation-related activities. If you are leaving active duty under involuntary conditions, you may also be eligible for excess leave or PTDY and should check with your personnel office for details. Excess leave and PTDY require approval by your commander.

SECTION 7: COMMISSARY AND EXCHANGE BENEFITS

Congress extended Commissary and Exchange access privileges for Service members who are involuntarily separated from active duty during the period beginning on October 1, 2007, and ending on December 31, 2018, so that you can continue to use Commissary and exchange stores for a two-year period beginning on the date of the involuntary separation, in the same manner as a member on active duty. DoD Instruction 1330.17, published June 18, 2014, references Title 10, U.S.C., Section 1146 to permit this access. For more information regarding the Defense Commissary System visit: https://www.commissaries.com.

BACK to TOC

Chapter 5: Disability Evaluation



This chapter summarizes the Integrated Disability Evaluation System (IDES), a joint DoD/VA process; the Legacy Disability Evaluation System (LDES), a DoD-only evaluation process; and circumstances where a Service member may not be eligible for a disability evaluation and compensation.

Note: *It is DoD policy for Service members to process through the IDES unless a compelling and individualized reason for process through the LDES is approved by the Secretary of the Military Department concerned.*

SECTION 1: INTEGRATED DISABILITY EVALUATION SYSTEM (IDES)

The IDES is the primary DoD process to determine if you are fit for continued military service in the event you incur or aggravate an injury or illness in the line of duty. Service members undergoing disability evaluation can expect three potential outcomes: return to duty, medically separate, or medically retire (either temporarily or permanently). If you are found unfit for continued military service, the IDES provides both your DoD and proposed VA disability ratings prior to discharge.

> ***NOTE:*** *Veterans Benefits Administration (VBA) provides the proposed disability rating separate from the Veterans Health Administration (VHA) that provides actual health care.*

Your respective Military Service assigns a disability rating to the condition(s) determined to be unfitting and compensable. The combined rating for the unfitting condition(s), in general, determines whether the Service member is medically separated or retired.

In the IDES, you simultaneously complete DoD and VA disability processing, using one set of medical examinations, conducted by the VA, to determine your fitness for duty and, if unfit, the appropriate level of disability compensation (disability rating). DoD evaluates Service members and determines whether they should return to duty, medically separate, or medically retire due to disability. VA conducts medical evaluations and provides disability ratings use by both Departments. DoD only compensates for unfitting conditions and VA compensates for all service-connected conditions. At a minimum, the IDES consists of the following process steps:

- **Multi-Disciplinary Briefing (MDB):** Establishes your expectations. Prepares you for each stage of the IDES process. Informs you of what is expected of you during the IDES process.
- **Medical Evaluation Board (MEB):** Documents medical status and duty limitations of Service members. Determines whether your medical condition(s) may prevent you from performing the duties of your office, grade, rank, or rating.
- **Service Member Counseling:** A separate step in the process to inform you of the disability process, possible outcomes, and the significance and consequences of the determinations, including associated rights, benefits, and entitlements.

- **Physical Evaluation Board (PEB):** Determines whether you are fit for continued military service. If determined unfit, the PEB also determines your eligibility for disability compensation.
- **Final Disposition:** A Secretarial designee of your respective Military Department finalizes the findings and recommendation of the PEB.

Although all Military Departments utilize the same general steps, each Military Department uses a slightly different method to determine how you will enter The IDES.

The Military Departments utilize the following processes:

1. The **Army** uses a physical profile system that measures a Soldier's physical limitations in six areas using a scale of 1 (fully healthy) to 4 (severely limited). If you receive a permanent level 3 (P3) but meet medical retention standards, the physician will recommend evaluation by the Military Occupational Specialty (MOS) Administrative Retention Review (MAR2). If you receive a permanent level 3 (P3) or 4 (P4) in any area and no longer meet Army Retention Standards, the physician will refer you into the IDES.
2. The **Air Force's** Initial-Review-in-Lieu-Of (I-RILO) process helps determine if medical conditions limit your ability to perform duties, deploy or to be assigned (PCS) worldwide. Through the I-RILO process, and depending on the medical condition(s), the Air Force may return you to duty with an assignment limitation code. In this situation, you are available for worldwide duty, but you will undergo additional medical review before you deploy or PCS. If you are not returned to duty through the I-RILO process, you will be referred into the IDES.
3. The **Navy and Marine Corps** begin IDES referral when a Service member's physician determines that, even with further treatment, he/she is unlikely to return to duty **within 12 months**. In consultation with the Service member's commander, and with approval by the MEB convening authority, a military medical care provider will refer a Service member into the IDES.

Additionally, because of unique missions and job classifications, each Service's approach varies. It is recommended that you speak with your chain of command and physicians to determine how your Service initiates the IDES.

NOTE: *The DoD considers a disability to be any im- pairment condition due to disease or injury, regardless of degree, that reduces or prevents an individual's actual or presumed ability to engage in gainful employment or normal activity. The term "disability" or "physical disability" includes mental disease, but not such inherent defects as developmental or behavioral disorders. A medical impairment condition, mental disease, or physical defect standing alone does not constitute a disability. To constitute a disability, the medical impairment condition, mental disease, or physical defect must be severe enough to interfere with the Service member's ability to adequately perform his or her duties.* ***(See Directive-Type Memorandum-18-004, page 8)****.*

Step 1: The Referral and Claim Development Process

Every Service member's case is different; therefore, a physician will wait to refer you into the IDES until he or she sees how you respond to treatment and rehabilitation therapy. However, when the course of further recovery is relatively predictable or within one year of diagnosis, whichever is sooner, medical authorities will refer you into the IDES. To qualify for referral, you must have one or more medical conditions that may, individually or collectively, prevent you from reasonably performing the duties of your office, grade, rank, or rating including those duties remaining on a Reserve obligation for more than 1 year after diagnosis; have a medical condition that represents an obvious medical risk to your health or to the health or safety of other members; or have a medical condition that imposes unreasonable requirements on the military. During referral, your physician will identify the condition(s) that they believe are potentially unfitting for your continued service.

After referral into the IDES, the MTF administrative staff will assign a **Physical Evaluation Board Liaison Officer (PEBLO)** to manage your case as you progress through the process. The PEBLO will counsel you on the process, explain the sequence of events that will occur, and tell you what your responsibilities are while in the IDES. The PEBLO will work with you to gather all of your medical records, including records of any treatment you may have received from a civilian doctor. It is your responsibility to ensure that the PEBLO has all relevant

military and civilian medical documentation prior to your case being forwarded to the VA. After collection of all necessary documents, the PEBLO will refer your case to a local **VA Military Service Coordinator (MSC)**.

The MSC will review your medical records with you and help you identify any potentially compensable conditions that occurred during, or were aggravated by, your military service. Working together, you will complete the Application for Disability Compensation and Related Compensation Benefits claim form (VA Form 21-526ez), noting all conditions that may be eligible for a VA disability rating, not just those that the referring physician identified as potentially unfitting for continued service. Once complete, the MSC will request the appropriate medical examinations to evaluate all of your conditions, which the Veterans Benefits Administration (VBA) will conduct.

The MSC will provide your PEBLO with a copy of the examination request. When you are scheduled for your appointments, your PEBLO will brief both you and your chain of command on the estimated timeframe for completing the DES at your installation. At this point, your medical examinations are your appointed place of duty for the given day and time.

Step 2: The Medical Examination and Medical Evaluation Board (MEB) Process

A VA-certified physician will perform your disability examination. After completion of those exams, an MEB may use the examination results and other medical evidence to determine whether you have a medical condition(s) that prevent you from reasonably performing your military duties. DoD and VA may make every effort to conduct the examinations at a location close to your duty station (or your home if you are a Reserve Component (RC) member). When your examinations are complete, the VA physician makes the results available to the VA MSC, who in turn provides them to your PEBLO.

Once the MSC provides your examination results, your PEBLO will coordinate with administrative staff at your MTF to convene an MEB. The PEBLO will build a case file of information containing:

1. Your medical records;
2. A narrative summary (NARSUM) of your medical condition(s);
3. Results from tests and disability examination(s) performed related to your condition(s);
4. Letters from your chain of command describing how the injury and/or illness impacts your ability to perform your duties; and
5. Other information that the MEB may require (including Service administrative documents).

The MEB will review this information and determine whether you have medical conditions that prevent you from reasonably performing the duties of your office grade, rank, or rating. The MEB will be made up of two or more medical care providers. In cases involving behavioral health diagnoses, the MEB will also include at least one psychiatrist or psychologist with a doctorate in psychology.

When the MEB reviews your case, they only document medical conditions that may prevent you from reasonably performing the duties of your office, grade, rank, or rating. The MEB does not determine whether you are fit for continued military service nor your level of disability.

- If the MEB determines you are able to perform your military duties, you will be returned to full duty in your current occupational specialty.
- Otherwise, you will be referred to a PEB. This action is based on an MEB report, which identifies the medical condition(s) that prevent you from reasonably performing your duties.

After notification of the MEB findings, you may elect to receive an Impartial Medical Review, performed by an independent physician, to review the MEB findings and provide advice and counsel. You may also present a rebuttal to the results of the MEB in coordination with your PEBLO and legal counsel, if applicable. Government legal counsel is available to consult (in person, by telephone, or other means) with you regarding your rights and elections (choices).

Step 3: The Physical Evaluation Board (PEB)

The PEB determines if a Service member with medical conditions is fit to perform his or her military duties. For Service members determined unfit for duty-related conditions, the PEB determines eligibility for disability compensation.

Once convened, the PEB will first meet informally to review your case. Service members do not attend this review. This is called the **Informal PEB (IPEB)**. Using the MEB report, the IPEB will review:

1. The MEB report recommendation (to include any rebuttal/Service response, and impartial medical review if provided to the MEB);
2. Your medical records;
3. Your NARSUM; and
4. Letters from your commander; and
5. Other information that the PEB may require.

In lieu of a letter, Army uses a DA Form 7652, Disability Evaluation System (DES) Commander's Performance and Functional Statement, to document the commander's evaluation and the Soldier's administrative status.

If the IPEB determines that your condition(s) do not prevent you from performing your required military duties, the board will find you fit and will return you to duty. However, if the IPEB determines one or more of your medical conditions, either individually or collectively, make you unfit for continued service, they will forward your case to the **VA Disability Rating Activity Site (DRAS)**. The VA will assign ratings to all referred and claimed conditions and provide the recommended ratings to your Military Department upon completion. The IPEB will then determine your disposition in one of the following categories: medical separation or medical retirement (permanent or temporary).

The PEBLO will notify you of the IPEB findings, and you must choose to accept the IPEB findings or demand a **Formal PEB (FPEB)**. Government legal counsel is available for you to consult (in person, by telephone, or other means) regarding your rights and elections (choices) following receipt of the decision from the IPEB. You may also retain private counsel at your own expense or obtain assistance from a VA-accredited service organization representative (see Appendix G).

If you request an FPEB, you will be provided the opportunity to appear before the board and argue your position in formal proceedings. You can also provide them additional information related to your condition(s), which you deem important to your case. Additionally, you have a right to be represented by legal counsel at the FPEB, have witnesses testify on your behalf, to remain silent, and to make sworn or unsworn statements. Members found fit by the PEB cannot later be separated by their Service as unsuitable for continued military service for the same medical condition(s) without approval from the Secretary of Defense.

DoD policy lists minimum requirements for the membership of a PEB but allows the Military Department to determine exactly who sits on the board. The IPEB will be comprised of at least two military personnel at field grade or civilian equivalent or higher. The FPEB must be comprised of at least three members and may be made up of military and civilian personnel representatives. The three required members include a president (also known as presiding officer), a line officer (or non-commissioned officer at the E-9 level for enlisted cases), and a medical officer. DoD civilian equivalents may be used.

Step 4: PEB Disposition Findings

There are several possible outcomes upon PEB consideration. The determinations available from the PEB are:

1. **Fit; Return to Duty**

   You will be returned to duty if your conditions are not considered severe enough to prevent you from performing your required military duties and/or don't impose unreasonable requirements on your Service to manage your medical condition or to protect you from yourself or others. No DoD disability compensation will be paid while you continue to serve, but you may be eligible for VA disability benefits after you leave the military.

2. **Unfit**

- **Unfit; Separate without Benefits**: Some injuries or illnesses are determined to have been incurred or aggravated "*not in the line of duty*." These are injuries or illnesses which are a result of intentional misconduct, willful negligence, or took place when you were not on orders if you are an RC Service member. If your injury is found to be "*not in the line of duty*" but is "*unfitting*," you could be separated without benefits for those injuries to include being separated administratively for disability that is the result of misconduct or willful negligence.

  If your injury or illness resulted from an existing medical condition that you had before you entered service and the injury or illness was not aggravated by your service, you could also be separated without benefits. There are special rules

for this situation. Service members ordered to active duty for more than 30 days are presumed to have entered their current period of military service in sound condition unless the disability was noted on their entrance physical or unless clear and unmistakable evidence demonstrates that the disability existed before the Service members entered their current period of active duty and the condition was not aggravated in service. Additionally, once a member obtains a career total of eight years of active service, any unfitting pre-existing condition that is determined to have been incurred before the member's current period of active duty is deemed a duty-related condition. Medical conditions incurred in line of duty during prior service are not considered pre-existing conditions unless an intervening event between periods of active duty or duty status is the cause of unfitness for that medical condition. Your legal counsel can help you understand the rules for separation without disability benefits.

- **Unfit; Separate with Severance Pay**: If one or more of your conditions is considered "unfitting," the combined disability rating of all your unfitting conditions is less than 30%, and you have less than 20 years of service, you may be separated from active duty or Reserve active status and awarded severance pay. The general formula is two months basic pay for the higher of current grade, highest grade satisfactory held, or the grade to which the member would have been promoted (otherwise known as "promotion list grade") times number of years of service completed up to nineteen. Service members, to include RC members not on active duty) receive a minimum payment as though they had completed 3 or 6 years of active duty provided the disability was incurred in the line of duty. The minimum 6 years applies to Service members whose disability was incurred in a designated combat zone or incurred during the performance of duty in combat-related operations as designated in DoDI 1332.18.
- **Unfit; Permanent Retirement**: If your unfitting condition(s) resulted in a combined disability rating of 30% or higher, or you have 20 years of combined service, (i.e., combination of active duty and RC equivalent active duty) and your unfitting condition(s) is/are considered stable (meaning your disability rating is unlikely to change within three years), you will be permanently retired for disability. This provides you with disability retirement pay, access to TRICARE, commissary and exchange privileges for you and your eligible dependents, and all other benefits of regular military retirement. If you have at least 20 years of active Federal Service or 20 years of combined active service and RC equivalent active duty and your combined disability rating is 0%-20%, you will be retired for disability with your retired pay computed based upon your years of service. (For the military DES, 0% means an in LOD condition that is unfitting notwithstanding the rating is 0 percent.)
- **Unfit; Transfer to the Temporary Disability Retired List (TDRL)**: The TDRL ensures each Service Member's medical condition is stable before making a final disability determination. If you are eligible for disability retirement on or after January 1, 2017, but your condition is not considered stable (but may be permanent), you will be temporarily retired and placed on the TDRL for a maximum of three years. *(**Note:** Service members placed on the TDRL on or before December 31, 2016, may be placed on the TDRL for a maximum of five years)*. Benefits while on the TDRL are the same as those for Service members who are permanently retired for disability. You will be reevaluated at least once every eighteen months or scheduled within six months of placement on the TDRL if your condition is the result of a highly stressful, in-service event, to see if your condition has stabilized. If, while on TDRL, the Service determines that your condition is stable and that you are fit for duty, your Service will offer you the opportunity to return to duty. If your condition stabilizes but you are not able to return to duty, you will be retired, if eligible, or separated, as applicable.

  Your local finance office or the DFAS Wounded Warrior Pay Management Team will help you calculate the amount of retired pay you will receive.

Step 5: Understanding Disability Ratings and Benefits

If the PEB finds you unfit based on one or more of your conditions, the board will use VA proposed rating(s) to assign disability percentages to the unfitting condition(s) determined to be compensable (meaning in the line of duty). The DoD combined percentage rating for the unfitting compensable condition(s) determines what type of separation you receive (if you have less than 20 years of credible service) and the types of benefits you are eligible to receive from DoD.

Note that there are two categories of conditions: referred conditions and claimed conditions. Referred conditions are medical conditions that may, individually or collectively, make a Service member unfit for continued military service. The PEB determines whether each unfitting, referred condition is compensable. In general, whether a member is retired or separated for disability results depends upon the compensability determination coupled with the member's combined disability rating for the member's unfitting referred conditions. As stated previously in this chapter, a Service member with 20 years of service but rated at 0 to 20% percent will be retired for disability. However, the member must be unfit for a compensable referred condition. If the member's condition is noncompensable, the member will be eligible to request length of service retirement. If the member does not so request, the member will be separated without entitlement to benefits.

Claimed conditions are additional to referred conditions and are the Service member's medical conditions that may not impact fitness for duty. These conditions are not DoD compensable and do not contribute to a Service member's severance or DoD disability retirement pay. Both referred conditions and claimed conditions are VA compensable and will be used to determine the disability pay you receive from the VA after exiting the Service.

It is important to remember that VA ratings address all referred and claimed service-connected conditions, while DoD ratings only address unfitting referred conditions. Therefore, unfitting conditions are the only conditions included in a DoD disability rating.

Step 6: Your Right to Appeal the PEB Decision and Proposed VA Ratings

If you elected an FPEB and are not satisfied with the FPEB determination, your respective Military Department may provide you the opportunity to appeal. Your PEBLO can inform you of your options. If you are medically separated or retired and believe an error or injustice occurred during your disability evaluation, you may petition your Service's Board for Correction of Military/Naval Records (BCMR/BCNR) after discharge. To learn more about your Service's Correction Board, visit the website for your service below:

- **Army BCMR:** http://arba.army.pentagon.mil
- **Navy and Marine Corps BCNR** http://www.donhq.navy.mil/bcnr/bcnr.htm
- **Air Force BCMR:** http://www.afpc.af.mil/board-for-correction-of-military-records

You may also request a one-time rating reconsideration by the DRAS (commonly called the VA Rating Reconsideration) for each unfitting condition's proposed disability rating.

SECTION 2: LEGACY DISABILITY EVALUATION SYSTEM (LDES)

In limited circumstances, you may be directed to process through the LDES. You can also request to process through the LDES. If you request the LDES, you must acknowledge, in writing, that you had the opportunity to consult with legal counsel regarding the procedural differences between the LDES and the IDES.

The LDES process begins when a DoD physician refers you for DES Processing. After referral, your assigned PEBLO will provide you counseling regarding the LDES process, including an explanation of the benefits and entitlements related to the LDES process.

In the LDES, your respective Military Department completes a disability examination and an MEB. If the MEB determines you can reasonably perform the duties of your office, grade, rank, or rating, you will be returned to full duty in your current occupational specialty. Otherwise, you will be referred to a PEB.

After notification of the MEB findings, you may elect to receive an Impartial Medical Review, performed by an independent physician, to review the MEB findings and provide advice and counsel. You may also present a rebuttal to the results of the MEB in coordination with your PEBLO and legal counsel, if applicable. Government legal counsel is available to consult (in person, by telephone, or other means) with you regarding your rights and elections (choices).

If you are referred to the PEB, and the IPEB finds you unfit, you have the right to demand an FPEB. You can appear before the FPEB in person, through a designated representative, via videoconference, or by any other means determined practical by the Secretary of the Military Department concerned. Government legal counsel will be provided throughout the process to advise and represent you if you so choose. You may also retain private counsel at your own expense or obtain assistance from a VA-accredited service organization representative (see Appendix G).

If you are not satisfied with the FPEB determination your respective Military Department may provide you the opportunity to appeal. Your PEBLO can inform you of your options.

If determined that you will separate from military service and if you receive a separation date that is in the next 180 to 90 days, you may be able to apply for VA disability compensation before separation through the Benefits Delivery at Discharge (BDD) program. Visit https://www.va.gov/disability/how-to-file-claim/when-to-file/pre-discharge-claim/ for more information on the BDD program. Otherwise, you can apply for VA disability compensation after you separate from military service. As a Veteran, if new information arises regarding your condition, you may follow your respective Service's BCMR/BCNR procedures to request a correction of your military records. If the new information leads the VA to adjust the rating of an unfitting condition, and the change would have resulted in a different DoD disability disposition, you may also request your respective BCMR/BCNR address this issue.

- **Army BCMR:** http://arba.army.pentagon.mil
- **Navy and Marine Corps BCNR** http://www.donhq.navy.mil/bcnr/bcnr.htm
- **Air Force BCMR:** http://www.afpc.af.mil/board-for-correction-of-military-records

SECTION 3: NOT-ELIGIBLE FOR DES REFERRAL

You may be separated from your Service for a medical defect, circumstance, or condition that interferes with your performance of duty without being referred to the DES in the event such defects, circumstances, or conditions are determined to not constitute a physical disability. There are a few other reasons that will prevent referral to the DES, including:

- Pending an approved, unsuspended punitive discharge or dismissal, except as provided by Service regulations;
- Pending separation under provisions that result in a characterization of service of under other than honorable conditions, except as provided by Service regulations;
- Not physically present or accounted for (i.e., absent without leave, or AWOL); and
- Disability results from intentional misconduct or willful neglect or was incurred during a period of unauthorized absence or excess leave.
- A Service member who receives a misconduct line of duty determination after the member is referred to the MEB may be eligible to complete the DES and be separated for disability without entitlement to disability benefits. This may occur when the Service member's command does not pursue administrative separation. The 10 USC 1201© also provides eligibility for disability benefits in the following excess leave situations: On active duty but not entitled to basic pay by reason of an emergency purpose or due to authorized absence to participate in an educational program.

For more information on disability evaluation systems, visit: http://warriorcare.dodlive.mil/disability-evaluation/

Chapter 6: DoD Disability Compensation

If you receive a disposition finding of Separate with Severance Pay, Transfer to the TDRL, or Permanent Retirement, DoD will compensate you for disability. Ensure you contact your local finance or personnel office or the WWPMT member at your location to get details about your particular situation.

SECTION 1: DISABILITY SEVERANCE PAY AND VA RECOUPMENT

If you receive disability severance pay, you are not medically retired. Disability severance pay is a one-time, lump sum payment for Service members with a DoD disability rating under 30%. The amount equals two months of basic pay for each year of service which includes active service and inactive duty points, but the total service years cannot exceed 19 years. The minimum number of years required for computation purposes is three years, or six years for a disability incurred in the line of duty in a combat zone. Therefore, if you are separated after only two years of service, when calculating your severance pay, you will receive credit for three years of service, or six years if you were injured in a combat zone. Additionally, the minimum number of years required for computation purposes is three years, or six years for a combat related condition incurred in any location or any condition incurred in a combat zone.

The maximum severance multiplier for years of service is 19 because Service members with 20 or more years of service are given retirement pay regardless of their combined disability rating.

Note: *The criteria of combat-related operations does not require the disability to be incurred in combat. In general, the criteria are the same as to be awarded combat-related special compensation (minus award of the Purple Heart).*

Reference: *Title 10 United States Code (U.S.C.) §1212(d)(1); Title 26 U.S.C. §104, Title 38 Code of Federal Regulations §3.700(a)(3), 2015 Military Pay Chart as found at the Defense Finance and Accounting Service web site:* www.DFAS.mil

The VA may withhold disability compensation awarded for your disability(ies) until the net DoD severance pay is recouped. If the VA has granted you a service-connected determination for both severance and non-severance-pay disabilities, then the VA disability compensation will be paid for the non-severance-pay disability(ies). If you incur a disability in the line of duty in a combat zone or during performance of duty in combat-related operations, VA will not recoup your disability severance pay. Service members who are involuntarily recalled to active duty or full-time National Guard duty and who also incur a total service-connected disability from the requirement to repay voluntary separation pay, are subject to federal taxation unless the circumstance of incurrence meets the criteria of Section 104 of Title 26, United States Code. VA compensation is not subject to federal taxation.

SECTION 2: TEMPORARY DISABILITY RETIRED LIST (TDRL)

When the requirements for permanent disability retirement are met, except the disability is not stable and may be permanent, you will be placed on the TDRL. Placement on the TDRL occurs when a physician refers you into the DES and the PEB, using future examination requirements set by the DRAS as an indicator of stability, determines your unfitting conditions are not stable but may be permanent.

If placed on the TDRL, you will be reevaluated at least once every 18 months, to see if your condition has stabilized. If your condition is the result of a highly stressful in-service event, you will be scheduled for an examination within six months. You may be on the TDRL for a maximum of three years after placement. *(**Note:** Service members placed on the TDRL on or before December 31, 2016, may remain on the TDRL for a maximum of five years)*.

If your condition stabilizes and you are found fit for duty, and you wish to return to active duty, your Military Department will administer any additional examinations required to evaluate your fitness for duty. If you are found fit for duty, but do not wish to return to Active Duty, you may be retired or discharged without disability.

If, at the end of three years, the PEB finds you are still unfit due to the unstable condition(s) for which you were placed on TDRL, you will be separated or retired dependent on your final disability rating.

Your compensation while on TDRL will be based on the method that gives you the highest percentage of your retired pay base. Your compensation while on TDRL is determined using one of the following two methods.

First Method:

Your TDRL compensation is based on your combined disability percentage, but it can never be less than 50% of your "retired pay base." There are two categories:

- If you entered service before September 8, 1980, your retired pay base is the monthly basic pay of the grade or rank in which you were serving when placed on the TDRL, or the highest temporary grade or rank in which you served satisfactorily, or to which you were entitled, on the date before retirement or placement on the TDRL, whichever is higher.
- If you entered service after September 7, 1980, your retired pay base is the average of the highest 36 months of basic pay received. *(See DoD Financial Management Regulation 7000.14R, Volume 7B, Chapter 3, Paragraph 030201A2)*

In this first method, your disability retirement pay can never be more than 75% of your retired pay base, so a combined rating of 80%-100% will result in retirement compensation equal to 75% of your retired pay base.

Below is the breakdown of disability rating to retirement percentage:

- 30% – 40% disability rating = 50% of retired pay base
- 50% – 70% disability rating = that percentage of retired pay base
- 80% – 100% disability rating = 75% of retired pay base

Second Method:

Your retirement is based on your time in service. Under this formula, your compensation would be determined by taking 2.5% (or 2.0% if under the Blended Retirement System) multiplied by your total number of years and full months of service to come up with the percentage of retired pay.

[2.5%] (or 2.0% if under the Blended Retirement System) x [years and full months of service] = that percentage of retired pay base (including amounts exceeding 75% of retired pay base, if applicable).

SECTION 3: PERMANENT DISABILITY RETIREMENT

If your disability is found to be permanent and is rated at 30% or greater, or you have 20 or more years of service, you will be retired.

Your retired pay will be computed based on whichever method is more beneficial for you.

- Your disability percentage, referred to as Method A.
- Your years of active service, referred to as Method B.

A member who retired or became eligible to retire due to a physical disability, either on permanent disability retirement or the TDRL, on or before January 7, 2011, may not have a service gross multiplier that is the percentage of disability, not to exceed 75%. A member who first becomes eligible to retire or retires for a physical disability on or after January 8, 2011, shall not have their service gross multiplier reduced if it is in excess of 75%.

Permanent retirement *based on 20 years of service is computed differently than the years of service to qualify for eligibility for regular retirement. In general, the 20 years is the sum of active service (active duty days) and RC equivalent active duty for the Service member's membership and Inactive Duty Training Points. In summary, a total of 7200 points consisting of active duty, membership, and Inactive Duty Training results in permanent disability retirement for unfit members rated less than 30 percent. Further, RA members with previous RC service get to count their former RC service.*

SECTION 4: CONCURRENT RETIREMENT AND DISABILITY PAY (CRDP) AND COMBAT- RELATED SPECIAL COMPENSATION (CRSC)

If you are medically retired, your DoD disability retired pay will be reduced (offset or waived) by the amount of VA disability compensation you are awarded. However, to compensate for the reduction, the CRDP and CRSC programs replace all or a portion of what is offset from certain Service members. Please refer to the Special CRDP rule and Special CRSC rule for more information.

Concurrent Retirement and Disability Pay (CRDP):

Payment of CRDP replaces some or all of retired pay waived for receipt of VA disability compensation. The result is full receipt of retired pay and VA disability compensation, with the exception of CRDP based on disability retired pay, which is subject to an offset based on the difference between disability retired pay and longevity retired pay.

To be eligible for CRDP:

- You must have a VA disability rating of at least 50%
- You must have 20 years of service or Temporary Early Retirement Authority (TERA)
- You must be in receipt of or be eligible to receive longevity retired pay or disability retired pay
- You do not need to apply for CRDP; DFAS obtains information from the VA and pays it monthly as part of your retired pay.

Contact the appropriate service organization listed at the end of this chapter for additional information.

Combat-Related Special Compensation (CRSC):

To be eligible for CRSC:

- You must have a disability that is compensable by the VA
- Your disability is considered combat-related by the service department. Combat-related disabilities include wounds, illnesses, and/or injuries that were:
  - awarded the Purple Heart;
  - incurred as a direct result of armed conflict;
  - incurred while engaged in hazardous service;
  - incurred in the performance of duty under conditions simulating war; or
  - incurred through an instrumentality of war

The computation method to determine payment is based on the combined evaluation of all combat-related disabilities, the amount of VA disability compensation payable based on that combined evaluation, and retired pay based on longevity. If you are in receipt of disability retired pay, the maximum CRSC payment cannot exceed retired pay based on longevity. CRSC is a tax-free entitlement paid separately from retired pay, and is not subject to the Former Spouse Protection Act (FSPA).

You cannot receive both CRDP and CRSC. The two benefits will be calculated and compared by DFAS when the member becomes entitled to both CRDP and CRSC at the same time, and the greater of the two amounts will automatically be paid to the member for their initial election only. DFAS will send you a letter and Initial Election form letting you know which election they selected on your behalf. You may choose a different entitlement than what DFAS elected by returning the Initial Election form to DFAS within 45 days.

CRDP/CRSC Open Season is generally January 1 - 31. If eligible for the Open Season, you will receive a letter in December from DFAS detailing the benefits of each entitlement. Along with the letter, you'll receive an election form, which allows you to choose the type of payment you wish to receive. You only need to make an election if you want to change from your current entitlement. If DFAS does not receive your election form, no change is made and you will continue to receive the same entitlement you were already receiving. This is called a passive election. Once the Open Season window closes, your election cannot be changed until the next Annual Open Season Election period.

The following describes the CRSC process:

- You must apply to your military branch of service.
- You must enclose evidence to show how your disability was incurred in a combat-related situation (i.e., incurred as a direct result of armed conflict; as a result of hazardous service; in the performance of duty under conditions simulating war (training); or through an instrumentality of war).

If you are approved for CRSC, your military branch of service will send an award letter to you and a copy to DFAS. After DFAS receives the approved award letter, payment will be initiated within approximately 30 days. Retroactive payments will generally be issued within 30 days of receiving the first monthly payment.

Applications should be submitted to the following addresses, as appropriate:

Army
Department of the Army
U.S. Army Human Resources Command
ATTN: AHRC-PDR-C (CRSC), Dept. 420
1600 Spearhead Division Avenue
Fort Knox, KY
40122-5402
Phone number: (888) 276-9472
Fax number: (502) 613-9550
Email: askhrc.army@us.army.mil
Website: https://www.hrc.army.mil/content/CRSC%20(Combat-Related%20Special%20Compensation)

Air Force
Combat-Related Special Compensation (CRSC) Program Office
550 C Street West
Joint Base San Antonio - Randolph, TX
78150-4708
Fax number: (210) 652-6311
Email: AFPC.DPPDC.AFCRSC@us.af.mil
Website: https://www.myairforcebenefits.us.af.mil/Benefit-Library/Federal-Benefits/Combat-Related-Special-Compensation-(CRSC)?serv=25/

Navy and Marine Corps
Department of the Navy
Secretary of the Navy Council of Review Boards (CORB)
Attn: Combat-Related Special Compensation Board (CRSCB)
720 Kennon Street SE, Suite 309
Washington Navy Yard, DC
20374-5023
Phone number: (877) 366-2772 (877-DON-CRSC)
Fax number: (202) 685-6610
Email: crsc@navy.mil
Website: http://www.secnav.navy.mil/mra/CORB/pages/crscb/default.aspx

Coast Guard
Medical Administration Branch (PSC-PSD-med) - Disability Evaluation and Medical Administrative Sections
Commander (PSC-PSD-MED)
Personnel Service Center
2703 Martin Luther King Jr. Ave SE
Washington, DC
20593-7200
Phone number: (202) 795-6631
Website: https://www.dcms.uscg.mil/Our-Organization/Assistant-Commandant-for-Human-Resources-CG-1/Personnel-Service-Center-PSC/Personnel-Services-Division-PSC-PSD/Disability-Evaluation-Branch-PSC-PSD-MED/

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Chapter 7: Social Security Benefits

SECTION 1: DISABILITY BENEFITS FOR YOU

You are probably aware that many disability benefits are available from DoD and VA sources, but you may not be aware that the Social Security Administration (SSA) may also provide disability benefits if your health prevents you from working.

The SSA provides expedited processing of disability claims filed by Veterans who have a VA Compensation rating of 100% Permanent & Total (P&T).

Note: *Receiving a 100% P&T rating does not necessarily mean you are eligible for Social Security Disability. Social Security has their own disability determination process to conclude if an applicant has a physical or mental impairment (or combination of impairments):*

- that prevents him or her from doing any substantial gainful activity (SGA), and
- has lasted or is expected to last for a continuous period of at least 12 months, or is expected to result in death.

For more information on expedited processing of Veteran's 100% disability claims, visit https://www.ssa.gov/pubs/EN-05-10565.pdf.

Being on active duty status or military pay status does not automatically prevent you from receiving Social Security disability benefits. You should still apply for Social Security if you think you are disabled. If you receive treatment at an MTF and work in a designated therapy program or are on limited duty, Social Security will evaluate your work activity to determine your eligibility for benefits.

Note: *The actual work activity is the controlling factor, not the amount of pay you receive or your military status.*

If you were injured on or after October 1, 2001, while on active duty, regardless of where your injuries occurred, you are eligible for expedited processing of your disability claim from the SSA.

The SSA pays disability benefits through two programs:

- ***Social Security Disability Insurance Program (SSDI)***
- ***Supplemental Security Income (SSI)***

To receive SSDI benefits, you or your family must be considered "insured" by the SSA. This means you have worked long enough, which varies depending on your age, and paid enough Social Security taxes to qualify.

Eligibility for SSI has nothing to do with your earnings history; it is entirely dependent on your financial need based on your income (and part of your spouse's income, if you are married) and assets, as well as your ability to work.

For more information about Social Security's disability programs, visit: https://www.ssa.gov/people/veterans/.

How to Apply for Benefits

You can apply for disability benefits while in the military or after separating from the military. This also applies if you are still hospitalized, in a rehabilitation program, or undergoing outpatient treatment at an MTF or civilian medical facility.

To apply for benefits, as well as to learn about what documentation you will need to apply, visit: https://www.ssa.gov/people/veterans/. You can also schedule an appointment at the nearest Social Security Office by calling 1-800-772-1213 (TTY: 1-800-325-0778).

How Social Security Decides to Pay Claims

Your claim is handled by the state **Disability Determination Services (DDS) office** that makes disability decisions. Medical and vocational experts from the DDS will contact your physicians and/or other facilities where you receive treatment (e.g., clinical psychologists, hospitals, clinics, etc.) to retrieve your medical records. The DDS may ask you to have an examination or medical test; you will not have to pay for these exams or tests.

What You Can Do to Expedite the Process

You can expedite the review process by being prepared for your interview. It helps to have information about your work history and contact information for physicians and other providers/facilities who have treated you. After you file a claim, it is uniquely identified as a military Service member claim and is expedited through all phases of processing (if disabled on or after October 1, 2001, while on active duty). Disability claims filed online are also expedited.

Note: *You can prevent delays in the review process by notifying SSA of any change in address or if you are being seen or treated by any new doctors, hospitals, or clinics while SSA is working on your claim.*

When Do you Receive Medicare Coverage

You will get Medicare coverage automatically after you have received disability benefits for 24 months.

Under federal law, TRICARE beneficiaries (other than active duty Service members, active duty family members, and U.S. Family Health Plan enrollees) who become entitled to Medicare Part A for any reason, regardless of age or place of residence, lose their eligibility for TRICARE unless they have Medicare Part B.

For more information on the effect of Medicare on TRICARE, visit https://www.ssa.gov/pubs/EN-05-10030.pdf (SSA Publication 05-10030: "Disability Benefits for Wounded Warriors").

Note: *Beneficiaries who are covered by an employer-sponsored group health plan may delay enrollment in Medicare Part B; unfortunately, enrollment in an employer-sponsored health care plan does not replace the need to enroll in Medicare Part B to retain TRICARE coverage. Individuals who are covered by an employer-sponsored health care plan, which includes TRICARE eligibility while the Service member is on active duty, may be eligible for a Special Enrollment Period (SEP) through the Social Security Administration (SSA) for late enrollment in Medicare Part B. This SEP is available to beneficiaries who are entitled to Medicare based on disability or age, and are covered under a group health plan based on the beneficiary's current employment or his or her spouse's current employment. This SEP allows eligible beneficiaries to apply for Medicare Part B at any time they are covered under the group health plan based on current employment, or an eight-month period beginning the month the employment ends or the coverage under the plan ends, whichever comes first. The DEERS Support Office at 1-800-538-9552 (TTY/TTD: 1-866-363-2883 for persons with hearing impairments) may assist with providing an active duty verification letter to SSA for those who meet the criteria.*

Termination of Benefits

If you receive SSDI benefits and SSA finds that you no longer meet the requirements for disability due either to work at the SGA level or medical improvement, SSA determines that your disability "ceased."

- If SSA finds that your disability ceased due to work at the SGA level, your monetary benefits may end; however, under SSA regulations and Section 202 of the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999, you may remain entitled to Medicare Part A coverage up to 8½ years after you return to work. Eligibility for Medicare under the TWWIIA does not waive the requirement to remain enrolled in Medicare Part B to retain TRICARE coverage.
- If SSA finds that your disability ceased due to medical improvement, their decision is effective in the month shown by the evidence or the month they give you written notice, if later.

In either case, SSA pays SSDI benefits for the cessation month and the following two months. They call these three months the "grace period."

SECTION 2: SOCIAL SECURITY BENEFITS FOR YOUR FAMILY

If you qualify for Social Security disability payments, certain members of your family may qualify for benefits based on your employment history. Information on family member benefits can be found at: https://www.ssa.gov/people/veterans/.

Family members who may be eligible include:

- Your spouse at any age, if he or she is caring for a child of yours who is younger than 16 or disabled
- Your unmarried child, including an adopted child (or, in some cases, a stepchild or grandchild). The child must be younger than 18 years of age or younger than 19 if in elementary school or secondary school (not college)
- Your unmarried child, age 18 or older, if he or she has a disability that started before age 22
- Your spouse, if he or she is 62 years or older

For more information, visit: www.socialsecurity.gov.

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Chapter 8: Survivor Benefits

ACTIVE DUTY BENEFITS

When Service members die while serving on active duty or certain reserve statuses, their family members may be eligible for various federal benefits, privileges, and entitlements.

Both Military OneSource and the Department of Veterans Affairs provide expansive summaries of the resources and programs available to Service members' survivors.

Military OneSource Survivor and Casualty Assistance: Support After Loss, Understanding Grief, Survivor Finances and Legal, and The Final Move https://www.militaryonesource.mil/family-relationships/survivor-casualty-assistance

VBAs Survivors and Burial Benefits Kit. https://benefits.va.gov/BENEFITS/docs/VASurvivorsKit.pdf

For information tailored to your or your loved one's Service, please go to the appropriate Service-specific benefits page:

Marine Corps
https://www.hqmc.marines.mil/hrom/Benefits/Survivor-Benefits/

Navy
https://www.public.navy.mil/bupers-npc/support/casualty/benefits/Pages/default.aspx

Army
http://soldierforlife.army.mil/retirement/home

Air Force
https://www.afpc.af.mil/Benefits-and-Entitlements/Casualty-Operations/

SECTION 1: CASUALTY ASSISTANCE OFFICER

When a Service member is declared deceased, whereabouts unknown, or missing, the Department of Defense's Casualty Assistance Program assigns a dedicated casualty assistance officer to advise and assist the primary next of kin (parents of Service member and spouse of Service member, if married).

Each military service branch has a different title for their casualty assistance officers, but the services provided are the same.

- **Army** – Casualty Assistance Officer
- **Marine Corps** – Casualty Assistance Calls Officer
- **Navy** – Casualty Assistance Calls Officer
- **Air Force** – Casualty Assistance Representative
- **Coast Guard** – Casualty Assistance Calls Officer

Shortly after the family of a Service member is notified of his or her death, a casualty assistance officer will call the family to arrange a visit to advise and assist them. The officer will ask if the family has immediate concerns, confirm their mailing addresses, and arrange to meet with the family as soon as possible, ideally within the next 24 hours.

At the meeting, the officer will confirm the family's addresses for the next 45 days; verify all known family members of the Service member, including marriages past and present, children, and child custody orders; and verify all names by which the Service member was known. The casualty assistance officer will schedule as many follow-up visits as necessary. Depending on the Service member's branch of Service, the family may also meet with a mortuary affairs officer. During these meetings, they will discuss payment of the death gratuity, preparation for the funeral, any honors due to the Service member, and any questions the family may have.

For more information, visit the Military OneSource webpage at https://www.militaryonesource.mil/family-relationships/survivor-casualty-assistance/support-after-loss/understanding-the-role-of-the-casualty-assistance-officer.

The following benefits, entitlements, and privileges are just some of the resources that exist for Service members' survivors. For additional information and resources, please visit the Military OneSource and VA websites provided above.

Note: *monetary benefits to a spouse and children are paid regardless of economic need, except where the Service member's death is found not in the line of duty.*

SECTION 2: DEATH GRATUITY

The death gratuity program provides a tax free payment of $100,000 to eligible survivors of Service members who die while on active duty or while serving in certain reserve statuses. The death gratuity is the same regardless of the cause of death. The death gratuity is also payable if an eligible Service member or former Service member dies within 120 days of release or discharge from active duty or active duty for training when the Secretary of Veterans Affairs determines that the death resulted from injury or disease incurred or aggravated during such duty.

The longstanding purpose of the death gratuity has been to provide immediate cash payment to assist survivors of deceased members of the Armed forces to meet their financial needs during the period immediately following a member's death and before other survivor benefits, if any, become available.

For more information, visit https://militarypay.defense.gov/Benefits/Death-Gratuity/.

SECTION 3: CLAIM FOR UNPAID COMPENSATION OF DECEASED SERVICE MEMBER

When a Service member dies, any unpaid pay and allowances will be paid to the beneficiary designated on the Service member's DD Form 93. Defense Finance and Accounting Service (DFAS) will audit the Service member's pay record to ensure any amount due to the Service member is paid to the designated beneficiary. If the Service member does not have a designated beneficiary, DFAS will pay the money to the first eligible recipient in the following order:

- Service member's lawful surviving spouse
- Service member's child or children and descendants of deceased children
- Service member's parents
- If none of the above, the appointed legal representative of the Service member's estate
- If none of the above, to the person(s) determined entitled under the laws of the Service member's domiciled state

For more information, visit https://www.dfas.mil/RetiredMilitary/forms/.

For information on how to report a Service member's death to DFAS, please visit https://www.dfas.mil/retiredmilitary/survivors/Retiree-death.html

SECTION 4: DEPENDENCY AND INDEMNITY COMPENSATION

Dependency and Indemnity Compensation (DIC) is a tax-free monetary benefit generally payable to eligible survivors of military Service members who died in the line of duty or eligible survivors of Veterans whose death resulted from a service-related injury or disease. DIC may also be paid to certain survivors of Veterans who were totally disabled from service–connected conditions at the time of death, even though their service connected disabilities did not cause their deaths. The survivor qualifies if the Veteran was:

1. Continuously rated totally disabled for a period of 10 years immediately preceding death; or
2. Continuously rated totally disabled from the date of military discharge and for at least 5 years immediately preceding death; or
3. A former POW who was continuously rated totally disabled for a period of at least one year immediately preceding death.

For more information on the compensation, as well as spouse and child eligibility, visit https://benefits.va.gov/compensation/types-dependency_and_indemnity.asp.

SECTION 5: SURVIVORS PENSION (NON-SERVICE-CONNECTED DEATH PENSION)

Survivors Pension is a tax-free benefit payable to low-income surviving spouses or children who have not married/remarried since the death of the Veteran. Survivors Pension is based on the family's yearly income, which must be less than the amount set by Congress to qualify. Survivors Pension is an income-based program, and any benefit payable is reduced by annual income from other sources, such as Social Security. If the Survivor has unreimbursed medical expenses, these costs can be deducted from countable income to increase the benefit amount (such as cost of care at an Assisted Living or Skilled Nursing Facility).

To be eligible for Survivors Pension, the deceased Veteran must have met the following requirements:

1. If the Veteran served on or before September 7, 1980, he or she must have served at least 90 days of active military service, with at least one day during a war time period.
2. If the Veteran entered active duty after September 7, 1980, the Veteran generally must have served at least 24 months or the full tour of duty with at least one day during a war time period.
3. Discharged from military service under other than dishonorable conditions.

To qualify as a surviving child of a deceased Veteran, the child must meet the following requirements: under age 18 or under age 23 if attending a VA-approved school or permanently incapable of self-support due to a disability diagnosed before age 18. Additional information on pension benefits is available at http://www.benefits.va.gov/pension/. To apply, complete VA Form 21P-534EZ and mail it to the Pension Management Center (PMC) of jurisdiction.

SECTION 6: AID AND ATTENDANCE AND HOUSEBOUND BENEFITS

Surviving spouses who are eligible for DIC or Survivors Pension may also be eligible for Aid and Attendance or Housebound benefits. An eligible individual may qualify if he or she requires the regular aid of another person in order to perform personal functions required for everyday living, or is bedridden, a patient in a nursing home due to mental or physical incapacity, blind, or permanently and substantially confined to his or her immediate premises because of a disability.

Surviving spouses who are ineligible for basic Survivors Pension based on annual income may still be eligible for Survivors Pension if they are eligible for aid and attendance or housebound benefits because a higher income limit applies. In addition, unreimbursed medical expenses for nursing-home or home-health care may be used to reduce countable annual income, which may result in a higher pension benefit.

For more information and how to apply, visit https://www.benefits.va.gov/pension/aid_attendance_house-bound.asp.

SECTION 7: SOCIAL SECURITY PAYMENTS

Social Security monthly benefits may be paid to the following individuals:

- a spouse or a divorced spouse, age 60 or over
- a spouse or divorced spouse regardless of age with dependent children under age 16 or disabled in their care and meeting social security requirements
- children until age 18 or 19 if at a primary or secondary school, or age 18 or older if disabled before age 18
- Dependent parents age 62 and older if they were more than 50 percent dependent on the deceased service member for financial support
- Spouses may receive reduced Social Security payments between ages 60 and 65

Eligible survivors may obtain more information and apply for the benefit at the nearest Social Security office. Retroactive payments made be issued for up to 12 months; therefore, Social Security recommends applying as soon as possible to ensure receipt of retroactive payments for all months it took to process the application.

For more information, visit https://www.ssa.gov/people/veterans/.

SECTION 8: SOCIAL SECURITY LUMP SUM DEATH PAYMENT

The Social Security Administration pays a lump-sum death payment, up to $255, to the surviving spouse living with the member at the time of death (or if living separately due to military orders) or to the oldest child eligible for or entitled to Social Security benefits for the month of death, based upon the deceased member's earnings.

You can receive more information and apply for the benefit at the nearest Social Security office or visit https://www.ssa.gov/planners/survivors/ifyou.html.

SECTION 9: HOUSING AND RELOCATION COSTS

Family members living in government-provided housing when the Service member dies in the line of duty may stay in the government-provided housing for 365 days. If the Service member's family moves before the 365 days end, the family will receive Basic Allowance for Housing (BAH) for the remainder of the 365 days.

If the Service member and family are not living in government housing at the time of the Service member's death, the family will receive a lump-sum payment of 365 days BAH at the current rate for the Service member's pay grade.

Should the family choose to relocate but needs time to determine details, the government will store the family's belongings for up to 365 days. The military will also pay to relocate a deceased Service member's family once within three years of the Service member's death.

For more information about housing and moving options, visit https://www.militaryonesource.mil/family-relationships/survivor-casualty-assistance/the-final-move/making-the-final-move.

SECTION 10: VA HOME LOAN GUARANTY

A VA loan guaranty to acquire a home may be available to an unmarried spouse of a Veteran or Service member who died as a result of Service-connected disabilities, to a surviving spouse who remarries after age 57, or to a spouse of a Service member officially listed as MIA or who is currently a POW for more than 90 days. Spouses of those listed MIA/POW are limited to one loan. Surviving spouses of certain totally disabled Veterans, whose disability may not have been the cause of death, may also be eligible for VA loan guaranty.

For more information, visit https://www.benefits.va.gov/homeloans/.

SECTION 11: EDUCATION BENEFITS: SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE (DEA)

Individuals may qualify for education benefits if he or she is the child or spouse of a Service member and the Service member died in the line of duty after September 10, 2001; is missing in action or was captured in the line of duty by a hostile force; was detained (held) by force while in the line of duty by a foreign government or power; is in the hospital or getting outpatient treatment for a service-connected permanent and total disability and is likely to be discharged for that disability; or if he or she is the child or spouse of a Veteran and the Veteran is permanently and totally disabled due to a service-connected disability or died while on active duty or as a result of a service-connected disability. A service-connected permanent and total disability is a disability resulting from military service that does not go away.

For more information, please reference the Fry Scholarship and Survivors' and Dependents' Educational Assistance (DEA), located in Chapter 10 of this handbook. You may also visit https://www.va.gov/education/survivor-dependent-benefits/.

SECTION 12: MEDICAL AND DENTAL COVERAGE

Deceased Service members' families will receive the active duty coverage rate for three years, after which they will receive care at the military retiree rate. Children will be covered at the active duty rate until they are 21, or age 23 if they are already a full time student. If not covered by the Dental plan, survivors can opt in.

For more information, visit https://www.tricare.mil/Plans/Eligibility/Survivors/Surv_ADSM.

SECTION 13: VA BURIAL BENEFITS

The VA pays for funeral, burial, and plot or interment benefits for eligible Service members and Veterans. The amount paid is based on whether the Service member's death was service-related or nonservice-related. For more information on monetary amounts, eligibility requirements, evidence requirements, and the application process, visit https://www.va.gov/burials-memorials/veterans-burial-allowance/.

The DoD pays for the recovery, preparation of remains for burial, including cremation, and interment at a location designated by the person designated to direct disposition of the remains, for those Service members who die on active duty or in certain reserve statuses. The amount paid is based on the location of interment and whether the Military Department or the family arranges for the preparation and casketing of remains.

SECTION 14: "NO-FEE" PASSPORTS

"No-fee" passports are available to immediate family members (spouse, children, parents, brothers and sisters) for the expressed purpose of visiting their loved one's grave or memorialization site at an American military cemetery on foreign soil. For additional information, call **703-696-6897** or visit www.abmc.gov.

SECTION 15: REVIEWS OF VA CLAIMS DECISIONS

Veterans and other claimants for VA benefits have the right to request a review of decisions made by VA. The most common issues requested for review are disability compensation, pension, education benefits, recovery of overpayments, reimbursement for unauthorized medical services, and denial of burial and memorial benefits. For most VA benefits, a Veteran or claimant must elect one of the three review lanes within one year of the date of the decision notice letter to preserve the earliest effective date to benefits. VA changed the process to request a review of decisions in February 2019, with the implementation of the Veterans Appeals Improvement and Modernization Act of 2017. The first step in the review process is for a claimant to choose which review lane to use and file a decision review request with the VA department that made the decision. Following receipt of the form, VA will furnish a decision describing what facts, laws, and regulations were used in deciding the case. If the claimant remains dissatisfied, he or she may choose another review lane.

For more information on the decision review process, visit: https://www.va.gov/decision-reviews/.

SECTION 16: VETERANS PENSION (NONSERVICE-CONNECTED PENSION)

Veterans Pension is a tax-free benefit payable to low-income wartime Veterans. Veterans Pension is based on the family's yearly income, which must be less than the amount set by Congress to qualify. Veterans Pension is an income-based program, and any benefit payable is reduced by annual income from other sources, such as Social Security. If the Veteran or eligible member of the Veterans household has un-reimbursed medical expenses, these costs can be deducted from countable income to increase the benefit amount (such as cost of care at an Assisted Living or Skilled Nursing Facility).

To be eligible for Veterans Pension, the Veteran must meet the following requirements:

1. If the Veteran served on or before September 7, 1980, he or she must have served at least 90 days of active military service, with at least one day during a war time period.
2. If the Veteran entered active duty after September 7, 1980, the Veteran generally must have served at least 24 months or the full tour of duty with at least one day during a war time period.
3. Discharged from military service under other than dishonorable conditions.

In addition to meeting minimum service requirements, the Veteran must be:

- Age 65 or older, **OR**
- Totally and permanently disabled, **OR**
- A patient in a nursing home receiving skilled nursing care, **OR**
- Receiving Social Security Disability Insurance, **OR**
- Receiving Supplemental Security Income

Additional information on Veterans pension benefits is available at: https://www.benefits.va.gov/pension/vetpen.asp. To apply, complete VA Form 21P-527EZ and mail it to the Pension Management Center (PMC) of jurisdiction.

RETIRED BENEFITS

SECTION 17: THE SURVIVOR BENEFIT PLAN (SBP)

If you are transferred to either the TDRL or retired, as appropriate, and receive disability retirement pay; or if you retire with at least 20 years of service; or if you retire under a Temporary Early Retirement Authority, you will have the opportunity to participate in a life insurance type of program called the Survivor Benefit Plan (SBP). If you wish to have an annuity based on your retired pay passed on to your surviving spouse, eligible children, or someone else, you can do so by participating in SBP.

While on active duty, you are already covered by SBP at no cost. After you retire, your participation becomes voluntary. SBP is highly subsidized by the Federal Government, but it is not free. You must pay a premium out of each monthly retirement check. SBP does not pay a lump-sum death benefit like typical life insurance; it pays a monthly, cost-of-living-adjusted income to your survivors (referred to as an "SBP annuity").

Note: *The great majority of retirees take maximum advantage of this program*.

A complete description of the SBP program is too extensive for this handbook. Detailed information is located at the DFAS Website: http://www.dfas.mil/retiredmilitary/provide/sbp.html.

Below is a summary of the key points.

Making Your SBP Election

Shortly before you retire, you must make an SBP election and submit *DD Form 2656, "Data for Payment of Retired Personnel,"* to the DFAS-Cleveland Center (DFAS-CL). You will designate the amount of your retired pay you wish to protect with SBP, and you will name your beneficiary(ies). Alternatively, you may decline to participate.

Participation in SBP is voluntary. However, if you are married or have a child, you will be automatically enrolled in SBP at the maximum level for all eligible dependents (spouse and children) unless you decline SBP or choose a reduced level of coverage. If you are married and want to decline SBP or participate at a reduced level, you must note this decision in writing before your date of retirement with your spouse's written and notarized agreement.

Once made, your SBP election should be viewed as permanent, but you may have options to change it later if the status of your dependents changes. You also have the option to terminate your election between the 24th and 36th month after you retire.

Note: *If you decline to enroll in SBP or if you terminate after you retire, you will never have the option to enroll again.*

If you are not married or have no dependent children when you retire, you may choose to enroll in SBP in the future. You have one year from the date of marriage or the date you acquire children to enroll.

Choosing Your "Base Amount"

Your SBP election is not an all-or-nothing decision; there are many levels of participation from which you can choose. When you enroll in SBP, you will select a figure called a base amount. Monthly income payments to your beneficiary(ies) are always 55% of your base amount. You can choose a base amount of as little as $300 or as much as your full retired pay.

Choosing Your Beneficiary

There are several categories of beneficiaries from which you can choose:

- Spouse Only
- Spouse and Child(ren)
- Child(ren) Only
- Special Needs Trust
- Former Spouse
- Former Spouse and Child(ren)
- Natural Person with an Insurable Interest
- No Beneficiary

Additional details can be found at the following website:
http://www.dfas.mil/retiredmilitary/provide/sbp/coverage.html.

Beneficiary Categories	Description
Spouse Only	The most common election for a retiree to make is for only his or her spouse to be covered based on full retired pay. Cost is calculated at a maximum of 6.5 percent of the elected level of coverage. If you have an eligible spouse and you choose anything less than full coverage, the spouse's notarized signature must be obtained for the election to be considered valid.
Child(ren) Only	If you're married and you choose not to cover your spouse, you must get concurrence from your spouse. If your spouse concurs by signing the form, or if you are unmarried, you can elect to cover your dependent children. The cost for this option depends on the age of the retiree and the youngest child.
Spouse and Child(ren)	With this option, all children are covered in equal shares. If you have children at the time of your election, and chose some coverage other than spouse and children, you will not be able to change that election later. An eligible dependent child under the plan must be: • Your legal child • Under the age of 18 • If older than 18, enrolled in an accredited college or university • Unmarried Children enrolled in higher education are eligible until they reach age 22 or leave school. Incapacitated or disabled children are eligible. An incapacitated or disabled child is defined as a child who is incapable of self-support because of a physical or mental disability which existed before the 18th birthday or which was incurred before age 22 while child was pursuing a full-time course of study. Adding eligible children to an SBP election will add to the cost. The additional cost depends on the age of the retiree, spouse and the youngest child.

Beneficiary Categories	Description
Former Spouse	Please keep these factors in mind when considering SBP coverage for a former spouse. a. If you have a former spouse when you first retire and become eligible to participate in the SBP, then you may elect former spouse coverage. (Please note different rules apply for reservists because of their opportunity to participate in Reserve Component SBP when they receive their 20-year letter.) b. If you're married when you become eligible to participate in the SBP and have been court-ordered to cover a former spouse, you can do so without your current spouse's signature. c. If you're married at the time you become eligible to participate in the SBP, but you want to voluntarily cover your former spouse, DFAS will be required to notify your current spouse of that election.
Former Spouse and Child(ren)	You can add children to a Former Spouse election in the same manner that you can for Spouse coverage. Only children acquired during your marriage to your former spouse may be included. If either of you have children from previous relationships whom you did not adopt, they cannot be covered, even if they were previously covered under a Spouse-and-Child or a Child-Only election.
Natural Interest Person (NIP) – Insurable Interest	If you have no other eligible dependents, you can elect to cover an individual in whom you have a legitimate insurable interest. Examples might be a brother or sister, or a child who is beyond eligibility for child coverage. Although the annuity benefits of NIP coverage are the same (55 percent of covered pay), the cost (10 percent of your gross pay) is considerably higher than other elections. Unlike other SBP elections, NIP coverage can be cancelled any time.

SBP Premiums

SBP premiums are paid in the form of a reduction in your retired pay. They are therefore exempt from taxation. You pay premiums only when you have an eligible beneficiary. Except for 'Spouse' or 'Former Spouse' elections, premiums are calculated differently for each category of beneficiary.

Costs

The SBP cost depends on the category and level of coverage you choose. While incurring no cost on active service, in retirement, a monthly deduction is taken from your retired pay for your SBP coverage. The cost is normally no more than 6.5% of your gross retired pay for spouse only coverage, unless you choose insurable interest coverage. Review the coverage levels below.

Coverage Levels

There are three types of coverage:

- *Full*: If you elect full coverage, the cost of SBP coverage will be based on your full gross retired pay. For example, if you receive $1,000 of retired pay each month, and elect full SBP coverage, your monthly cost to cover your spouse under the plan will be $65 each month.
- *Reduced*: You can elect a lower level of SBP coverage. For example, if you receive $1,000 of retired pay each month, you can elect to have your coverage based only on $700 of your pay. In this case, DFAS would calculate 6.5% of $700, and the monthly cost to cover a spouse under SBP would be $45.50. The minimum level of coverage required is $300.
- *Automatic*: If you submit an invalid election at retirement or none at all, an election will be started automatically. The cost of automatic coverage when an SBP election is not submitted will be based on full spouse SBP coverage and the coverage will be for the dependents at retirement, spouse, and/or child.

Advantages and Disadvantages of SBP

Advantages

- You will leave a guaranteed income to your beneficiary(ies) and beneficiaries can receive 55% of the retiree's elected amount of coverage.
- SBP benefits are inflation indexed and SBP coverage will not be canceled or revoked due to your age or any illness you may have.
- You or your spouse's age or health will never be considered a liability and never impact the cost of the program.
- The receipt of survivor benefits will not be affected by Social Security benefits.
- SBP annuity is protected against inflation, increasing each December with a Cost of Living Adjustment (COLA) based on the Consumer Price Index (CPI).
- You can pay for SBP benefits with a pre-tax payroll deduction.
- The SBP Paid-up Provision allows for premium deductions to stop after 360 payments if you're at least 70 years of age, but full coverage is maintained for life for your spouse.

Disadvantages

- *Cost:* In retirement, a monthly deduction is taken from your pay to pay for your SBP coverage. This can be as much as, but no more than, 6.5% of your gross retired pay for spouse only coverage.
- You might consider the relationship between the cost of the program and its benefits. To earn an even return on your investment, your beneficiary typically must receive payment for seven months for every five years you pay SBP premiums.
- Once you enroll, changing your election is difficult.

More information can be found at http://www.dfas.mil/retiredmilitary/provide/sbp/advantages.html.

Terminating Coverage

If you enroll in SBP, as previously mentioned, you will have the option to terminate your election between the 24th and 36th month after you retire. You won't be able to make any changes to your election during this period – only to terminate it – so make sure you and your spouse give careful consideration to your election before you make it.

You may also terminate an insurable interest election at any time. If you terminate, you will never be able to re-enroll regardless of any changes in your dependency status, and you will not receive a refund of premiums already paid.

SBP for Reservists and Guard Members

SBP for Reserve and Guard members works similarly to SBP for Regular members and disabled retirees. All of the previously discussed beneficiary options and eligibility criteria are the same, but there are key differences in premiums and annuity values. The program for Reserve and Guard members is called the "Reserve Component Survivor Benefit Plan (RCSBP)." For the RCSBP, members pay the standard SBP cost, which is 6.5% of your gross monthly retired pay, plus an additional Reserve Component (RCSBP) premium. The add-on premium depends on the type of elected beneficiary, elected annuity type, immediate or deferred, and age difference between you and your spouse or former spouse. RCSBP becomes operative only after a member has served a total of 15-19 qualifying years or 20 qualifying years and has been issued a Notification of Eligibility (NOE) for Reserve Component Retired Pay as a Reservist or National Guardsman. Before then, regular SBP, as previously described, would be in effect while serving on periods of active duty, just as it would be for anyone else on active duty.

The Reserve Component Survivor Benefit Plan DD Form 2656-5 can be downloaded at https://www.esd.whs.mil/Directives/forms/dd2500_2999/.

*For comprehensive information on the **Survivor Benefit Plan (SBP)**, **Reserve Component Survivor Benefit Plan (RC-SBP)**, and **Retired Serviceman's Family Protection Plan (RSFPP)**:*
Visit https://www.dfas.mil/retiredmilitary/.
Call 1-800-321-1080
(Monday-Friday, 8 a.m. to 5 p.m. ET)

BACK to TOC

Chapter 9: Reintegration Into Civilian Life

If you are separated, retired, or released from active duty, there are a number of resources available to help you rejoin the civilian workforce and tools to help you succeed in civilian life. This chapter will discuss the **DoD Transition Assistance Program (TAP)**, as well as additional government agencies' and programs designed to provide resources and services to assist you in your transition from the military into civilian life.

All TAP services are available one-on-one; to accommodate the needs of the transitioning Service member, TAP counselors can customize the TAP curriculum and services by dividing delivery into 1 to 2-hour sessions or whatever length best meets the needs of the Service member.

SECTION 1: TRANSITION ASSISTANCE PROGRAM (TAP)

The TAP serves as the cornerstone for your transition. It helps you bridge your military skills and experience with your post-transition goals and provides you with the skills, tools, information, and training to ensure you are prepared for your next phase in life and for pursuing your career goals.

Service members, including the Reserve, Guard and USCG members, separating after 180 days of continuous Title 10 active duty (includes Active Duty Guard (AGR) Title 32, Reserve (AGR) Title 10, Active Duty Operational Support (ADOS) Title 32), are required to participate in TAP. Through the standardized TAP curriculum, you will conduct activities that demonstrate your achievement of Career Readiness Standards (CRS). CRS are a set of common and specific standards and associated products that validate your level of preparedness for a civilian career. Which CRS you are required to complete is based on your post-transition goals. Before leaving the military, your achievement of these CRS will be verified by your commander or commander's designee during a process called Capstone. The core components of TAP include:

- Initial Counseling (personal self-assessment/ITP)
  - Pre-Separation/Transition Counseling
  - DoD Transition Day
  - Managing your transition
  - MOC Crosswalk
  - Financial Planning for Transition
- VA Benefits and Services
- DOL One-Day
- At least one 2-day elected track on:
  - Employment,
  - Education,
  - Entrepreneurship, or
  - Vocational Training
- Capstone/ITP Review

Initial Counseling (IC) is the official start to the transition process. It is an individualized session between the Service member and a TAP counselor. During the IC session, Service members complete their personal self-assessment and begin the development of their Individual Transition Plan (ITP) to identify their unique needs of the transition process and post-transition goals.

> ***REMEMBER:*** *The time to start career planning is when you arrive at your first permanent duty station and career preparation should continue throughout your entire Military Life Cycle (MLC).*

Pre-Separation/Transition Counseling

Pre-separation/transition counseling provides an overview of the programs and services available during your transition. This counseling covers by-law information to include benefits, entitlements and resources for eligible transitioning Service members. You will also receive counseling on a range of topics, including education and training, employment, financial management, healthcare, insurance, resiliency and well-being, relocation, and housing. Caregivers and spouses are especially encouraged to attend pre-separation/transition counseling with their Service member.

DoD Transition Day: Managing Your Transition

Managing your transition (MyTransition) is a module of curriculum during the DoD Transition Day that introduces transition-related issues to include discussion and considerations for families and support systems during transition. MyTransition addresses differences between military and civilian culture, being resilient during transition, stress management, importance of communication, the value of a mentor, and the resources available to support and prepare you during and after transition.

DoD Transition Day: MOC Crosswalk

During the MOC Crosswalk module on DoD Transition Day, you will document your military career experience and skills, translate your military experience to civilian sector occupations and skills, and identify any gaps in your training and/or experience that need to be filled to meet your post-transition career goals.

DoD Transition Day: Financial Planning for Transition

While you have received on-going, Financial Readiness training during the military life cycle, this curriculum module during the DoD Transition Day fulfils the mandated financial literacy requirement and focuses on providing the information and tools needed to identify financial changes that will occur during and after transition. This module will assist you in gathering the information and develop the skills needed to create a spend plan.

Department of Labor One-Day

The DOL One-Day is designed to lay the foundation for transitioning into civilian employment. This workshop provides an overview of employment and career exploration in the civilian sector and will cover the basics of resourcing opportunities, networking, applying using social media, writing a resume and interviewing. The DOL One-Day informs you about the services available at its nearly 2,500 American Job Centers nationwide and provides you a Participant Guidebook, which can be downloaded at www.dol.gov/vets/programs/tap/.

Veterans Benefits and Services

VA Benefits and Services enhance your understanding of VA benefits and programs based on your individual needs. Critical areas covered include: disability benefits and compensation; memorial and burial benefits; education and economic support; housing benefits; and healthcare options, including both physical and emotional health needs.

Upon completion, you will know how to apply for and make informed decisions about Veterans health, education, home loan guaranty, insurance, and disability benefits as well as Veteran Readiness and Employment (VR&E) program benefits. (*See Section 4 of this Chapter for more information on VR&E*.)

Caregivers, spouses, and family members are encouraged to attend these briefings. Service members who are hospitalized, convalescing, or receiving outpatient treatment for a disability and who are unable to attend sessions should advise their transition office. Attendees will also be instructed on how to connect with VA staff for further assistance.

More information on the briefings can be found at: http://www.benefits.va.gov/tap/.

Capstone

The commander or commander's designee will verify that you have met Career Readiness Standards and have a viable Individual Transition Plan. If it is determined during the Capstone process that you require or desire follow-on assistance, you will receive a "warm handover" to an appropriate helping partner agency.

Member Training Tracks

The TAP curriculum also includes additional two-day training tracks to prepare you to succeed with your post-transition goals. These tracks are:

- **Managing Your Education** – The Managing Your Education (MyEducation) module is for those on the DoD Education track, which assists in identifying the higher education requirements that support personal career goals. It provides information, resources, and strategies on determining an institute of higher education, understanding perception and attitudes, gaining admittance and available funding options. Throughout the module, you will have an opportunity to conduct research as each topic is explored and complete a comparison of at least two institutions of higher education.
- **DOL Vocational Workshop** – The DOL Vocational Workshop is a 2-day track that offers a unique opportunity to identify skills, increase awareness of training and credentialing programs, and develop an action plan to achieve career goals. Service members and spouses who attend the two-day DoL Vocational workshop will complete personalized career development assessments of occupational interest, aptitudes, and work values. These assessments will present workshop participants with a variety of tailored job recommendations aligned with their interests and aptitudes, some of which are classified as "high demand" or "high growth" occupations. Participants will learn to narrow their career focus by establishing achievable career goals and development strategies. Workshop facilitators will guide participants through a variety of career considerations including labor market projections, education, apprenticeships, certifications, and licensure requirements.
- **My Entrepreneurship** – An "Introduction to Entrepreneurship" course provides participants with an introductory understanding of business ownership, including an overview of entrepreneurship and applicable business ownership fundamentals. Participants are introduced to the skills, knowledge, and resources they need to launch a business.

  After completing the "Introduction to Entrepreneurship" course, participants can elect to further their study through online courses such as B2B: Market Research, B2B Business Fundamentals, Special Topic Tracks, or B2B: Revenue Readiness.
- **My Employment** – My Employment will consist of an additional 2 days of DOLEW.
- **DOL Employment Track** – The DOL Employment Track covers 2-days of instruction and provide more in-depth information on topics covered during the DOL One-Day. The 2-day module address obtaining employment in the civilian sector. This includes understanding the importance of networking and using social media, creating a LinkedIn profile, and developing answers to common interview questions. Upon completing the module, participants will have the knowledge to complete a resume.

Resources

Additionally, the entire curriculum is located online at jko.jten.mil. For more information about TAP, visit: www.dodtap.mil and/or your Service-specific Transition Assistance Office.

Service-specific Transition Assistance Offices	
Army	**Soldier for Life - Transition Assistance Program** https://www.sfl-tap.army.mil/
Navy	**Navy Transition Goals, Plans, Success (Transition GPS)** https://www.public.navy.mil/bupers-npc/career/transition/Pages/TAP.aspx
Air Force	**Air Force Personnel Center** http://www.afpc.af.mil/Transition-Assistance-Program
Marine Corps	**Transition Readiness Program** http://www.usmc-mccs.org/index.cfm/services/career/transition-readiness/
Coast Guard	**Office of Work-Life Programs - Transition Assistance Program (TAP)** https://www.dcms.uscg.mil/Our-Organization/Assistant-Commandant-for-Human-Resources-CG-1/Health-Safety-and-Work-Life-CG-11/Office-of-Work-Life-CG-111/Transition-Assistance-Program/

Your Service's transition office can provide additional employment assistance and resources that will vary by location, but often include:

- Individual counseling and assistance
- Job fairs
- Job search libraries
- Access to job listings
- Assistance in preparing resumes and cover letters
- Assistance in preparing for interviews
- Dress for success
- Federal hiring process / preparing a Federal resume
- Networking

SECTION 2: TRICARE TRANSITIONAL ASSISTANCE MANAGEMENT PROGRAM (TAMP)

This program provides 180 days of transitional health care benefits under the TRICARE family of health plans to help certain uniformed Service members and their families transition to civilian life. You and your eligible family members may be covered for health benefits under TAMP if you, the sponsor, are:

- Involuntarily separating from active duty under honorable conditions
- A National Guard or Reserve member separating from a period of active duty that was more than 30 consecutive days in support of a contingency operation
- Separating from active duty following involuntary retention (stop-loss) in support of a contingency operation
- Separating from active duty following a voluntary agreement to stay on active duty for less than one year in support of a contingency operation

- Receiving a sole survivorship discharge
- Separating from active duty and agree to become a member of the Selected Reserve of the Ready Reserve of the Reserve Component

However, Service members can check with their Service personnel departments to see if they qualify, as TAMP eligibility is determined by the Services and documented in DEERS. For more information, visit: http://www.tricare.mil/tamp.

If eligible, you may enroll yourself and your eligible family members in TRICARE Prime, TRICARE Prime Overseas, or US Family Health Plan, or you may use TRICARE Select or TRICARE Select Overseas. For more information, visit the TRICARE website at: http://www.tricare.mil/Plans/HealthPlans.

If you were enrolled in a Prime program during your active duty period and reside in a Prime or Prime Overseas location during TAMP, you must enroll or reenroll at the beginning of your TAMP period to continue Prime.

SECTION 3: DoD OPERATION WARFIGHTER (OWF)

OWF is a DoD internship program that matches qualified wounded, ill, and/or injured Service members with non-funded Federal internships in order for them to gain valuable work experience during their recovery and rehabilitation. This process assists with the Service members' reintegration to duty or transition into the civilian work environment where they can employ their newly acquired skills in a non-military work setting. Additionally, OWF enables Federal employers to better familiarize themselves with the skill sets and challenges of wounded, ill, and/or injured Service members as well as benefit from the considerable talent and dedication of these individuals.

If you are a wounded, ill, and/or injured Service member looking for an opportunity like this or are a Transition Coordinator and know of a wounded, ill, and/or injured Service member who would benefit from OWF, please contact OSD at OWF@mail.mil or contact your OWF Regional Coordinator today.

If eligible, one of the 10 OWF Regional Coordinators will work with you to explore your potential career interests, build your resume, and provide you with opportunities for additional training, experience, and networking. The internship opportunities will positively impact your rehabilitation and reintegration.

For those of you who return to duty, OWF gives you the training and experience that will benefit you as you continue to serve in the military.

For more information on OWF, visit: http://warriorcare.dodlive.mil/carecoordination/operation-warfighter/.

SECTION 4: EDUCATION & EMPLOYMENT INITIATIVES (E2I)

The E2I is a collaborative effort, led by the DoD with support from Federal agencies and non-Federal entities, to assist wounded, ill, and/or injured Service members improve their career readiness by identifying skills and abilities to help facilitate transition to a productive and successful post-military service future. For more information, please visit: http://warriorcare.dodlive.mil/carecoordination/e2i/.

SECTION 5: COMPUTER/ELECTRONIC ACCOMMODATIONS PROGRAM (CAP)

Mission

Provides assistive technology and accommodations to support individuals with disabilities and wounded, ill and injured service members at no cost to agencies throughout the Federal Government in accessing information and communication technology. CAP is governed by the Department of Defense Instruction (DoDI 1000.31) for the Computer Electronic/Accommodations Program, establishing policy and responsibilities for CAP to provide assistive technology to customer listed below.

Customers

- Federal employees with disabilities
- Active duty service members with functional limitations
- Federal employees with disabling conditions who are also:
    - Workers' Compensation beneficiaries
    - Term and temporary employees
    - Workforce Recruitment Program (WRP)
    - Detail appointments
- Federal managers who are ready to hire and accommodate
- Federal partner agencies that want to ensure their programs and services are accessible

Stakeholders

- Department of Defense
- Defense Human Resource Activity
- Defense Personnel and Family Support Center
- Federal Agencies within the Executive Branch
- Federal Employees with Disabilities
- Wounded, Ill and Injured Service Members

Goals

1. Ensure quality service and accommodations to federal employees, federal agencies and wounded, ill and injured Service members.
2. Increase awareness through partnership engagement and training programs.
3. Improve operational performance by identifying optimum government resources.
4. Enhance and expand capacity and services offered by the CAP Technology & Evaluation Center.

Service members

In 2004, CAP began the Service Member (SM) Initiative. This special initiative was designed to cover active duty Service members, to include Guard or Reserve on Title 10 orders. Public Law 109-364 was passed on October 17, 2006, allowing Service members to keep the assistive technology CAP provides to them upon separation. CAP supports wounded service members, working closely with medical providers, therapists, case managers, and military liaisons at military treatment facilities to increase awareness and availability of assistive technology.

For more information on this initiative, please visit our website at: www.cap.mil; or call (833) -227-3272/703-614-8416.

Military Treatment Facilities

In January 2015, the Department of Defense Instruction, Assistive Technology (AT) for Wounded, Ill and Injured Service Members (DoDI 6025.22) was reissued. This established an interdependent system to provide AT within the Military Health System (MHS). It established the roles and responsibilities of CAP, Military Treatment Facilities (MTFs) and wounded warrior programs in this system to improve the rehabilitation services provided to Service embers. CAP has official partnerships with the 53 MTFs throughout the U.S. and overseas.

SECTION 6: VETERAN READINESS AND EMPLOYMENT

Department of Veterans Affairs (VA)

If you are a transitioning Service member or Veteran with service-connected disabilities and require assistance to prepare for, find, and keep suitable employment, you may be eligible to apply for Veteran Readiness and Employment. The employment oriented program provides comprehensive services leading to employment or assistance for individuals to live more independently. Service may include employment assistance, short and long-term training, and purchase of required supplies and equipment.

To be eligible to apply for VR&E benefits, you must be a:

Service member who:

- Expects to receive an honorable discharge
- Obtains a VA memorandum rating of 20% or more
- Obtains a Proposed Disability Evaluation Service (DES) rating
- Obtains a referral to a PEB through the IDES
- Is enrolled in the DoD Employment and Education Initiative (E2I) for early intervention services

Veteran and have:

- An honorable or other than dishonorable discharge
- A VA service-connected disability rating of 10% or more or a VA memorandum rating of 20%

The mission of VR&E is to help you, having a service-connected disability, prepare for and find suitable employment. If you are entitled to benefits but have disabilities so severe you cannot immediately consider work as a viable option, VR&E offers services to improve your ability to live as independently as possible. A Vocational Rehabilitation Counselor (VRC) will determine your entitlement to the program and if an employment handicap exists that creates barriers to employment.

Services and benefits that may be provided by VR&E include:

- Comprehensive vocational evaluation to determine abilities, skills, and interests
- Vocational counseling and rehabilitation planning
- Employment services such as job-seeking skills, resume development, and other work readiness assistance
- Assistance finding and keeping a job, including the use of special employer incentives
- Non-Paid Work Experience (NPWE) and On-the-Job (OTJ)Training, apprenticeships, and internships
- Post-secondary training at a college, vocational, technical, or business school
- Supportive vocational rehabilitation services, including case management, counseling, and medical referral
- Independent living services

If your disabilities are so severe that you are unable to work, independent living services may be provided. A program of independent living provides the services and assistance necessary to ensure each eligible Veteran is capable, to the maximum extent possible, of living independently and participating in family and community life activities, with the added potential of eventually returning to work.

In general, you must use all VR&E services within 12 years from the following dates, whichever is later:

- The date you separated from active military service, or
- The date VA officially notified you that you have a qualifying service-connected disability rating.

To be determined entitled to VR&E benefits, you must apply and be a:

Service member:

- Determined by VR&E to be in need of rehabilitative services because of an employment handicap, or
- Awaiting discharge because of a medical condition resulting from a serious injury or illness that occurred in the line of duty.

Veteran:

- Determined by VR&E to be in need of rehabilitative services because of an employment handicap.
- If you have a VA service-connected disability rating of 10%, or if you have passed your 12-year basic period of eligibility, VR&E must determine that you have a serious employment handicap to meet the entitlement criteria.

For more information on the program, visit the VR&E page: www.vba.va.gov/bln/vre.

Department of Education (ED)

The Rehabilitation Services Administration (RSA) funded **Vocational Rehabilitation (VR) and Supported Employment (SE) centers** operate in many states. ED funds state VR and SE centers that are available to anyone with a disability that impacts his/her employment. These centers are limited in how many people they can serve, so an assessment process is used to determine those with the most significant disabilities and ensure they have priority for services. For more information, visit their website: https://www2.ed.gov/about/offices/list/osers/rsa/index.html.

State Vocational Rehabilitation Programs

State VR programs work with Veterans with non-service-connected disabilities who are not eligible for vocational rehabilitation services through the VA. You can find your State VR and SE agency on the Job Accommodation Network site at: www.askjan.org, or call 1-800-526-7234 (TTY: 1-877-781-9403).

SECTION 7: EMPLOYMENT PROGRAM OF OTHER GOVERNMENT AGENCIES

Veterans Employment Center (VEC)

The VEC is the Federal Government's single authoritative Internet source for connecting transitioning Service members, Veterans, and their families to meaningful career opportunities. There are various tools on the VEC to assist with your job search, including:

- **Military Skills Translator:** This tool helps Veterans translate military occupational codes into their civilian skill equivalents.
- **Veterans Job Bank (VJB):** The VJB allows you to search over 1.7 million jobs from the private sector, as well as jobs in federal, state, and local governments.
- **Employer Commitments:** You can view a list of hundreds of employers and organizations that have made a commitment to hire or train Veterans and their families, and link directly to their site to get more information, start the conversation, and apply for jobs.
- **Other Resources:** The VEC provides informational resources designed to help you find and take advantage of special government and partner programs.

Visit the VEC website (https://www.va.gov/careers-employment/) for more information – and, visit https://www.dol.gov/veterans/findajob/ to access personalized employment services nationwide.

Military Spouse Employment Partnership (MSEP)

Military spouses may face barriers to employment related to their mobile military lifestyle, including frequent relocations and extended periods of family separation due to deployments. The MSEP was created to address these unique challenges.

The MSEP Career Portal, available at https://msepjobs.militaryonesource.mil, connects military spouses to employers seeking currently sought after job skills. On the MSEP Portal:

- Partner companies post jobs ranging from entry-level to executive management / leadership
- Partner companies can find spouse talent directly through a search of the portal
- Partner companies represent sectors ranging from Fortune 500 companies, to small businesses, to non-profits, to federal government/DoD, to the academic and health care sectors.

My Next Move for Veterans

MyNextMove is a web-based interactive tool for new job seekers, students, and other career explorers to learn more about their career options. Users can:

- Explore over 900 different careers and see important information including skills, tasks, salaries, and employment outlook
- Look at related apprenticeships and training and search actual job openings
- Find careers through a keyword search by browsing industries or through the O*NET Interest Profiler *(a tool that offers customized career suggestions based on a person's interests and level of education and work experience)*

For more information, visit MyNextMove website at http://www.mynextmove.org/.

State Department of Labor

Visit https://www.dol.gov/veterans/findajob/ to access personalized employment services nationwide. **Disabled Veterans Outreach Program (DVOP) specialists** offer intensive services to meet the employment needs of disabled Veterans and other eligible Veterans, especially those who are economically or educationally disadvantaged (e.g., homeless Veterans and Veterans with barriers to employment). Services are also provided to transitioning Service members (and their family or other caregivers) who are wounded, ill, and/or injured and receiving treatment in MTFs and/or wounded warrior programs.

For more information on DVOP, visit: https://www.dol.gov/agencies/vets/vetoutcomes.

Additionally, information on the Americans with Disability Act (ADA), along with links to agencies that enforce the provisions outlined in the Act can be accessed online at: https://www.dol.gov/general/topic/disability/ada.

American Job Centers (AJC)

AJC provide no-cost services across the nation and are integrated with State Workforce Agencies and local communities. The centers, many of which are staffed with DVOP specialists, help facilitate Veteran hiring with large employers, as well as local small and medium sized businesses. You should connect with your local AJC, or the one in the community in which you intend to move, as the staff can provide valuable employment, training, and education information specific to the local community, as well as assist in transition planning and facilitate rapid employment. Veterans receive priority of service and recently separated Veterans are entitled to six months of intensive services through the DoL's Gold Card Program (https://home.army.mil/riley/application/files/9515/4456/0692/DOL_Gold_Card.pdf).

Spouse-specific support: A military spouse who is unable to continue employment due to the Service member's permanent change of military station or who loses employment as a result of the spouse's discharge from the military may be classified as a dislocated worker. Under this classification, a spouse may be eligible for training and education opportunities through their local AJC ADA National Network Center. For more information, call 1-800-949-4232 or visit their website at: www.adata.org.

AJC employment services include:

- Job readiness assessment, including interviews and testing
- Development of an Individual Development Plan (IDP)
- Career guidance through group or individual counseling
- Military occupational skills translation
- Labor market review and occupational decisions
- Referral to job banks, job portals, and job openings
- Referral to employers and registered apprenticeship sponsors
- Referral to funded training opportunities
- Monthly follow-up by an assigned case manager for up to six months

Find your local AJC at https://www.careeronestop.org/LocalHelp/local-help.aspx or at www.servicelocator.org. Additionally, to find a job, go to https://www.dol.gov/veterans/findajob/.

Office of Personnel Management (OPM), Federal Employment of People with Disabilities

This is the Federal Government's centralized website with information on Federal disability hiring programs and resources for Federal employees with disabilities, and provides information on the laws and regulations on hiring and discrimination of disabled persons. Visit the site at: https://www.opm.gov/policy-data-oversight/disability-employment/.

Some Federal agencies also have their own programs to provide expertise and support in finding reasonable accommodations. For agency-specific programs and to select an agency to see its specialized programs for people with disabilities, please visit: www.dol.gov/odep/pubs/misc/advance.htm.

Veterans Preference Information

Disabled Veterans who served on active duty during specified time periods or specific campaigns are entitled to preference over others in hiring for virtually all Federal Government jobs.

For more information about how Veterans' Preference works, visit the OPM site at: www.fedshirevets.gov/job/vetpref/index.aspx.

To learn more about the laws regarding Veterans' preferences and to see what your eligibility allows, visit the Veterans' Preference Advisor at: https://webapps.dol.gov/elaws/vetspref.htm.

SECTION 8: SEPARATING FROM THE MILITARY

If you recently separated from the military, you may quickly find out if you may be eligible for enrollment using the online **VA Health Benefits Explorer** at https://www.va.gov/healthbenefits/health-benefits-explorer/.

If you wish to skip the Explorer, you may apply for VA healthcare enrollment:

- By phone: Call (877) 222-VETS (8387)
- By mail: Print and fill out VHA Form 10-10EZ, which you may access via this website: https://www.vets.gov/health-care/apply. Once complete, mail it to your local VA medical center's Enrollment and Eligibility Department, or this address: Health Eligibility Center, 2957 Clairmont Road, Suite 200, Atlanta, GA 30329.
- Online: Click on "Apply for Health Care Benefits" at https://www.vets.gov/health-care/apply.
- In person: Go to your nearest VA medical center or clinic. You may bring the VHA Form 10-10EZ with you.

Combat Veterans who were discharged or released from active service on or after January 28, 2003, are eligible to enroll in the VA Health Care System for five years from the date of discharge or release. For more information on Combat Veteran Eligibility, please visit the VA website: https://www.va.gov/healthbenefits/resources/publications/IB10-438_combat_veteran_eligibility.pdf.

Each VA Medical Center has a Transition and Care Management (TCM) team that specializes in assisting transitioning Service members and new Veterans with assessing VA healthcare, VA benefits and community resources. A TCM team member will partner with you to enhance your coordination of care and services. Local TCM Program contacts are available online at http://www.oefoif.va.gov/caremanagement.asp.

Some military installations also have VA Liaisons for Healthcare onsite or virtually assigned to assist you with the transition to VA health care prior to your separation. Local VA Liaison Program contacts are available online at https://www.oefoif.va.gov/valiaisons.asp.

SECTION 9: VET CENTER PROGRAM

The VA reaches out to returning combat Veterans through its Vet Center program. They have initiated an aggressive outreach campaign to welcome home and educate returning Service members at military demobilization and Guard and Reserve sites. Vet Centers provide readjustment counseling and outreach services at no cost to all Veterans who served in a combat zone. Vet Centers also provide military sexual trauma (MST) counseling and referral to all Veterans who experienced sexual assault or sexual harassment during military service.

Note: *Service in a combat zone is not required to receive MST counseling and referral*.

Services are also available for your family members for military-related issues. Readjustment counseling encompasses a wide range of services to assist you in making a satisfying transition from military to civilian life.

Services include:

- Individual and group counseling
- Marital and family counseling
- Bereavement counseling
- Medical referrals
- Assistance in applying for VA benefits
- Employment counseling
- Guidance and referral to community resources
- Alcohol/drug assessments
- Military sexual trauma (MST) counseling and referral
- Outreach and community education

Additionally, active duty Service members can also seek counseling at VET Centers for MST.

Visit their website at http://www.vetcenter.va.gov/.

SECTION 10: EDUCATION BENEFITS

Most education benefits for Veterans are provided by the VA, although there are numerous other education programs for Veterans sponsored by state and Federal Government agencies.

VA Education Benefits

The GI Bill was signed into law by President Franklin D. Roosevelt on June 22, 1944. It was under this program that home loans and educational assistance were first provided to American Veterans returning home after World War II. Since then, it has undergone several changes to continue providing education benefits to our Veterans.

In 1984, Congressman "Sonny" Montgomery introduced legislation that revamped Veterans education benefits, and that revamped program became known as the Montgomery GI Bill (MGIB). The MGIB has undergone a number of modifications over the years to extend benefits to Veterans who served both before and after it was enacted. A major revision was enacted in 2008 that extends even greater benefits to Veterans who have served their country since 9/11. It has become known as the "Post-9/11 GI Bill".

Effective on August 1, 2009, this bill has no contribution requirement (like the MGIB). The Post-9/11 GI Bill provides financial support for education and housing to individuals with at least 90 days of aggregate service after September 10, 2001, or individuals discharged with a service-connected disability after 30 days of service.

In 2017, Congress updated the Post-9/11 GI Bill. This bill became known as the "Forever GI Bill" because of its most recognized feature – the removal of the 15-year time limitation for Veterans who transitioned out of the military after January 1, 2013, and eligible dependents to use their Post-9/11 GI Bill benefits. Service members who transitioned out of the military before January 1, 2013, must use their GI Bill benefits within 15 years of exiting the military. For more information on all the changes, visit: https://www.benefits.va.gov/GIBILL/ForeverGIBill.asp.

To be eligible for GI Bill benefits, you must meet the following conditions:

- Must have been honorably discharged from the Armed Forces; or
- Released from active duty with service characterized as honorable and placed on the retired list, temporary or permanent disability retired lists, or transferred to the Fleet Reserve or the Fleet Marine Corps Reserve; or
- Released from active duty with service characterized as honorable for further service in a Reserve component; or
- Are a National Guard (Title 32) or Reserve Service member who meets the aforementioned active duty requirements.

Approved training includes:

- Graduate and undergraduate degrees
- Vocational and technical training
- On-the-job training
- Flight training
- Correspondence training
- Licensing and national testing programs
- Entrepreneurship training
- Tutorial assistance

Note: *All training programs must be approved for GI Bill benefits.*

For more information, call the GI Bill Hotline at 1-888-GIBILL-1 (1-888-442-4551), or visit www.benefits.va.gov/gibill.

The Post-9/11 GI Bill will pay:

- Full tuition & fees directly to the school for all public school in-state students. For those attending private or foreign schools, tuition & fees are capped at the national maximum rate. Some educational institutions whose tuition and fees exceed maximum in-state rates participate in the "Yellow Ribbon Program" with the VA and agree to lesser rates.

To learn more about the Yellow Ribbon Program, visit the VA website at this new address: http://www.benefits.va.gov/gibill/yellow_ribbon.asp.

- A monthly housing allowance based on the BAH for an E-5 with dependents at the location where the student takes the majority of his or her classes. Generally, the number of months of entitlement you can receive is 36 months

- An annual books & supplies stipend of up to $1,000
- A one-time rural benefit payment for eligible individuals
- A modified living stipend to students who are enrolled in distance learning (on-line) educational programs

If you are attending school at half time or less, you will not receive the housing allowance. If you are on active duty, you will not receive the housing allowance, but will receive a books and supplies stipend.

Transferring Post-9/11GI Bill Eligibility to Your Dependents

One of the provisions of the Post-9/11 GI Bill allows certain Service members to transfer their entitlement to their spouses or dependent children. Approval is made on a case-by-case basis by DoD based upon the following criteria:

- You must have at least six years of service in the Armed Forces on the date of approval and agree to serve four additional years in the Armed Forces from the date of election; or

Under exceptional circumstances, Service members otherwise eligible but pending MEB/PEB (Medical Evaluation Board/Physical Evaluation Board) may request an exception to extend Service to meet the Service obligation for the transfer of Post-9/11 GI Bill benefits.

Montgomery GI Bill – Active Duty (MGIB)

The MGIB program provides up to 36 months of education benefits. Benefits may be used for degree and certificate programs, flight training, apprenticeship/on-the-job training, and correspondence courses. Remedial, deficiency, and refresher courses may be approved under certain circumstances. Generally, benefits are payable for 10 years following your release from active duty. This program is also commonly known as Chapter 30.

The MGIB may be available to you if you:

- Signed up for the program when you first entered active duty sometime after June 30, 1985 and agreed to pay $100 a month for your first 12 months.
- Served continuously on active duty for three years (or two years if that was the term of your first enlistment), or two years if you entered the Selected Reserve within a year of leaving active duty and subsequently served four years in the Selected Reserve.
- Received an honorable discharge and have a high school diploma or GED, or, in some cases, 12 hours of college credit.

Montgomery GI Bill – Selected Reserve (MGIB-SR)

The MGIB-SR program may be available to you if you are a member of the Selected Reserve and meet the following requirements:

- Have a six-year obligation to serve in the Selected Reserve signed after June 30, 1985. (If you are an officer, you must have agreed to serve six years in addition to your original obligation.)
- Complete your initial active duty for training (IADT).
- Meet the requirement to receive a high school diploma or equivalent certificate before completing IADT – but, you may not use 12 hours toward a college degree to meet this requirement.
- Remain in good standing while serving in an active Selected Reserve unit.

The VA will pay you a monthly benefit based on the type of training. If you are attending school, your payment is based on your training time (i.e., full time or half time).

Your unit will provide you a notice of Basic Eligibility and code your eligibility into the DoD personnel system so that VA may verify your eligibility.

U.S. Department of Education Financial Aid Programs

Federal Student Aid
An OFFICE of the U.S. DEPARTMENT of EDUCATION

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Federal Student Aid, an office of the U.S. Department of Education, provides more than $120 billion each year in financial aid to help millions of students manage the cost of education. There are three categories of federal student aid: grants, work-study, and loans.

Eligibility for most federal student aid is based on financial need along with several other factors. The financial aid administrator at the college or career school you plan to attend can help you determine your eligibility. For eligibility requirements visit StudentAid.gov/eligibility.

You may be eligible for federal student aid even if you are receiving benefits under the MGIB or the Post-9/11 GI Bill.

To apply for federal student aid, complete the FAFSA® form at fafsa.gov. You can find details on the application process at: StudentAid.gov/fafsa. You should also create an FSA ID, a username, and password that allow you to sign your application electronically. You can obtain additional information and create your FSA ID at: StudentAid.gov/fsaid.

Federal Student Aid provides a tool called FAFSA4caster, designed to help students and their families plan for college. FAFSA4caster provides students with an early estimate of their eligibility for federal student financial assistance. Visit the website at https://fafsa.ed.gov for more information.

Re-Enrollment Support for Service Members

Service members who were enrolled in post-secondary education programs before being called into service may also have certain rights if they return to their previous institutions. Under certain circumstances, schools offering federal student aid are required to readmit Service members and Reservists who were temporarily unable to attend class or had to suspend their studies due to service requirements. Schools must readmit these individuals under the same academic status as the students had when they last attended the institution.

Department of Education (ED) – Veterans

U.S. Department of Education

Upward Bound (VUB) Program

The VUB program is a free ED program designed to help eligible Veterans refresh their academic skills so that they can successfully complete the post-secondary school of their choosing.

The VUB program services include:

- Basic skills development, which is designed to help Veterans successfully complete a high school equivalency program and gain admission to college education programs
- Short-term remedial or refresher classes for high school graduates who have put off pursuing a college education
- Assistance with applications to the college or university of choice
- Assistance with applying for financial aid
- Personalized counseling
- Academic advice and assistance
- Career counseling
- Assistance in getting Veterans' services from other available resources
- Exposure to cultural events, academic programs, and other educational activities

To be eligible for VUB you must:

- Be a Veteran with 181 or more days of active duty service and separated under conditions other than dishonorable;
- Meet the criteria for low income according to guidelines published annually by the ED, and/or a first-generation potential college graduate;
- Demonstrate academic need for VUB; and
- Meet other local eligibility criteria as noted in the local VUB project's Approved Grant Proposal, such as county of residence, etc.

For more information, as well as a link to individual program locations, visit: https://www2.ed.gov/programs/triovub/index.html.

Troops to Teachers (TTT)

TTT is a funded U.S. DoD program, overseen by the ED, which helps eligible military personnel begin a new career as teachers in public schools where their skills, knowledge, and experience are most needed. The TTT program helps recruit quality teachers for schools that serve students from low-income families throughout America and assists military personnel in making successful transitions to second careers in teaching.

A network of state TTT offices has been established to provide participants with counseling and assistance regarding certification requirements, routes to state certification, and employment leads.

Information and resource links, including links to state Departments of Education, state certification offices, model resumes, programs leading to teacher certification, and job listing sites in public education can be found on the TTT website at www.proudtoserveagain.com.

An Internet Referral System has been established to enable participants to search for job vacancies and post resumes for view by school districts searching for teachers. A "Mentor Connection" site provides access to TTT participants who have made the transition to teaching and are available to respond to questions from prospective teachers.

Eligibility

Military personnel within several years of retirement are encouraged to register with TTT. Counseling and guidance is available to help individuals assess academic background, identify programs that will lead to state teacher certification, and identify potential employment opportunities.

Financial Assistance

As a Veteran separated due to service-connected disability, you are eligible for immediate financial assistance. Pending annual appropriation of funds, financial assistance is available to eligible individuals as stipends up to $5,000 to help pay for teacher certification costs or as bonuses of $10,000 to teach in schools serving a high percentage of students from low-income families.

Educational Requirements

Those interested in elementary or secondary teaching positions must have a Bachelor's degree from an accredited college. Individuals who do not have a Bachelor's degree, but who have experience in a vocational/technical field, may also submit an application. There is also a growing need for teachers with backgrounds in areas such as: electronics, construction trades, computer technology, health services, food services, and other vocational/technical fields.

Hire in Advance Program

This program guarantees teaching jobs for eligible Service members up to three years before they retire or separate from active duty. Service members who qualify for the Hire in Advance program can send in applications and interview with school officials, who can officially hire them up to three years before they leave active duty. The TTT and the Hire in Advance Program are both open to military spouses.

State Vocational Rehabilitation (VR) and Supported Employment (SE) Programs Funded by Department of Education

The VR and SE programs are designed for people with significant disabilities to empower you to train for and find work that matches your strengths, abilities, capabilities, and interests. You will receive an assessment and be listed on a prioritized list (order of selection) with others seeking VR and SE services. If you are eligible, among other things, you will develop an "Individual Plan for Employment."

VR services include, but are not limited to, the following:

- An assessment for eligibility and VR needs
- Vocational counseling, guidance, and referral services
- Physical and mental restoration services
- Vocational and other training, including on-the-job training
- Maintenance for additional costs incurred
- Transportation related to other VR services
- Interpreter services for individuals who are deaf
- Reader services for individuals who are visually impaired
- Services to assist students with disabilities to transition from school to work
- Personal assistance services while an individual is receiving VR services
- Rehabilitation technology services and devices
- Supported employment services
- Job placement services

For more information, visit: https://www2.ed.gov/programs/rsasupemp/index.html.

SECTION 11: UNEMPLOYMENT COMPENSATION FOR FORMER SERVICE MEMBERS

You may qualify for unemployment compensation if you are unable to find a new job right away. Under United States Code, Title 5, Section 8521 of Title 5, United States Code, a former Service member is eligible to receive unemployment compensation if released from active duty under honorable conditions.

Your state employment office handles unemployment compensation. Benefits vary from state to state. Because of this, only the office where you apply can tell you the amount and duration of your entitlement. Retirees will almost certainly receive a lesser amount, or no amount, since retirement pay usually offsets (reduces) the amount of unemployment compensation they may be eligible to receive.

The **Local Veterans Employment Representative (LVER)** at your state employment office can assist you with applying for unemployment compensation. You will need to take your DD 214, your social security card, and your civilian and military job history or resume.

SECTION 12: UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA)

You may have the right to return to the job you held before you were deployed. Under the USERRA, if you meet basic eligibility criteria and leave a civilian job to perform military service (voluntarily or involuntarily), you may be entitled to return to your civilian job after discharge or release from your military obligation.

USERRA requires that you be reemployed in the job that you would have attained had you not been absent for military service with the same seniority, status, pay, and any other rights and benefits determined by seniority, assuming certain eligibility requirements are met.

To be eligible for reemployment rights, you cannot be absent from work for military duty for greater than a total of five years. However, there are exceptions to the five-year limit, including initial enlistments lasting more than five years, periodic Guard and Reserve training duty, and involuntary active duty extensions and recalls, especially during a time of national emergency.

If you are recovering from injuries received during service or training, you may have up to two years from the date of completion of service to return to your job. USERRA provides enhanced protection for disabled Veterans, requiring employers to make reasonable efforts to accommodate the disability, including training or retraining to enable you refresh or upgrade your skills to reemployment. In addition, if you believe you have been denied reemployment or not properly reinstated because of your military service, you can file a complaint online.

State-Specific Rights:

Some states have state-specific reemployment rights laws that provide further protections for you. These programs can provide support throughout the entire process of preparing you for employment, finding a position that is right for you, and ensuring that you receive proper assistance to perform your duties.

USERRA and ADA

For in-depth information regarding USERRA and the ADA, visit: http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm.

For comprehensive information on USERRA, visit: http://www.dol.gov/vets/programs/userra/.

For information and assistance, visit: https://esgr.mil/USERRA/What-is-USERRA.

SECTION 13: CREDENTIALING OPPORTUNITIES ONLINE (COOL)

COOL is a Joint-Service initiative by the DoD and DoL to promote civilian credentialing opportunities for military Service members. Recognizing the important role that occupational credentials can play in professionalizing the Force and in enhancing the Service member's ability to transition to the civilian workforce upon completion of military service, the Army, Navy, Marine Corps, and Air Force have joined together to share data, research, analysis, and best practices so that all Service members can benefit from credentialing opportunities.

The COOL program is intended as a workforce professionalization tool for the Active Duty and Reserve Service members that identifies licenses and credentials the Service members may qualify for based on their MOS, and other training. Visit your Service specific COOL websites at:

- **Army:** https://www.cool.osd.mil/army/index.htm
- **Navy:** http://www.cool.navy.mil/index.htm
- **Marine Corps:** http://www.cool.navy.mil/usmc/
- **Air Force:** https://afvec.us.af.mil/afvec/Public/COOL/

SECTION 14: IMPORTANT FORMS

To develop transition plans, build resumes, apply for employment, and qualify for benefits related to your military service after you separate from active duty, you may be required to provide proof of your service. You will want to have all your important documents readily available to support your efforts.

DD Form 214 – Certificate of Release or Discharge from Active Duty

The DD Form 214 (DD 214) is your report of separation and is truly the **most important document you will ever receive upon completion of your military service**. It is your key to participation in all VA programs as well as several state and federal programs.

Prior to separation you will have an opportunity to review your DD 214 with your Services' Administration section to ensure your personal and service information is correct. You want to ensure it is correct before separation because it is a very difficult and time-consuming process to change it after the fact. Your administration personnel can effect changes immediately, while changes after the fact require submitting a DD Form 215 to the National Archives for issuance of a "Corrected Copy."

When you depart your military installation, you should have your Original DD 214 in your possession, or, worst case, a copy if the original is not available for whatever reason. Keep your original (especially Copy 4) in a safe, fireproof place, and have certified photocopies available for reference.

A DD 214 is generally issued when a Service member performs active duty or at least 90 consecutive days of active duty training. It contains information normally needed to verify military service for benefits, retirement, employment, and membership in Veterans' organizations. Information included that you should review to ensure correctness may include your:

- Date and place of entry into active duty
- Home address at time of entry
- Date and place of release from active duty
- Home address after separation
- Last duty assignment and rank
- Military job specialty
- Military education
- Decorations, medals, badges, citations, and campaign awards
- Total creditable service
- Foreign service credited
- Separation information (i.e., type of separation, character of service, authority and reason for separation, separation and reenlistment eligibility codes)

You may request a copy from the National Archives at: http://www.archives.gov/veterans/military-service-records/, or call the National Personnel Records Center at 1-314-801-0800 to request an application for replacement.

DD Form 2586 – Verification of Military Experience and Training (VMET)

Your military service has given you valuable training and experience that may improve your chance of getting a good job or achieving your educational goals.

The DD Form 2586 is created from a Service member's automated records on file. It lists military job experience and training history, recommended college credit information, and civilian equivalent job titles. This document is designed to help you apply for jobs, but it is not a resume. You can obtain a copy of your VMET by downloading it from www.dodtap.mil/login.

If you discover an error or omission in your VMET document, you should thoroughly read the "Frequently Asked Questions" section, which explains most anomalies. Errors in the VMET may be correctable; however, you must contact your parent Service.

Note: *There is no simple process to make changes to your DD Form 2586.*

The changes must pass through official channels and can take months. For more information regarding your VMET or to request corrections, you can speak to your Service's administrative contact:

- **Army:** Active, Reserve, Guard Soldiers should contact their local personnel records manager. Additional questions may be submitted to the Army VMET On-Line Help Desk at: vmet@resourceconsultants.com.
- **Navy:** Sailors can get assistance via e-mail at: p662c12a@persnet.navy.mil or by calling 901-874-4384, or DSN: 882-4384.
- **Marine Corps:** All Marines should contact their local administration office or Installation Personnel Administration Center. Marines can also contact the Transition Readiness Program at 703-784-2511 or Voluntary Education Program at 703-784-3340.
- **Air Force:** Airmen should review their VMET prior to separation to ensure corrective action can be taken. Active members should send their requests for corrections to AFPC/DPFF, Attn: VMET Correction, 550 C Street West, Suite 37, Randolph AFB TX, or by fax to 210-565-3385 or DSN 665-3385.

DD eForm 2648 – Service Member Pre-Separation / Transition Counseling and Career Readiness Standards eForm for Service Members Separating, Retiring, Released from Active Duty (REFRAD)

All eligible Services members must be counseled and provided information or referrals, as requested, on all items listed on DD eForm 2648 by the transition staff or command career counselors.

The form is available at: https://www.dodtap.mil/forms.html.

SECTION 15: OTHER IMPORTANT DOCUMENTS

As you transition out of the military, you might also need the following documents:

- Medical records: complete copy of medical records; this includes in-patient, PCM, Mental Health, Dental records, all of which may have to be solicited separately. It is important that you make a copy of all these records for your personal files.
- Service records: Officer Qualification Records, Service Record Books, etc.
- Evaluations (especially last year of reports)
- Social Security Card
- Birth Certificate
- Awards, Certificates, etc.

BACK to TOC

Chapter 10: Department of Veterans Affairs (VA) Benefits

On active duty, most of your benefits come from the DoD. After you leave active duty, whether discharged or medically retired, you become eligible for a number of additional benefits from VA. Reservists, who receive a DD 214 following a period of active duty, may be eligible for many benefits because of their "Veteran" status. VA also offers a variety of programs for which you may be eligible, depending on your situation.

The sections below highlight some of your VA benefits. For a comprehensive list of your VA benefits, visit: www.benefits.va.gov or the VA publication "Federal Benefits for Veterans, Dependents and Survivors" available at: www.va.gov/opa/publications/benefits_book.asp.

SECTION 1: VA DISABILITY COMPENSATION

After being released from active duty, you may be eligible to receive monthly disability compensation from VA if you have a service-connected disability.

A service-connected disability is a disability incurred during or aggravated by your active military service.

VA disability compensation is a tax-free, monthly payment based upon the severity of your disability. You do not need to be medically retired from the military to receive it. If you are medically discharged, payment rates vary depending on the disability percentage that you are rated. Please note, the Veterans Benefit Administration (VBA) has the authority to make an administrative decision barring benefits to health care.

Additional amounts may be payable if you are married, have children, or have a parent who is dependent upon you. Veterans with certain severe disabilities may be eligible for additional Special Monthly Compensation (SMC). Unlike your military disability rating, which is fixed at the time you are medically retired, your VA disability rating can change in the future. As your health changes over time, you can re-apply to VA to have your rating modified.

You do not pay federal or state income tax on VA disability compensation. You can find a complete table of disability compensation rates at the VA website: http://www.benefits.va.gov/compensation/rates-index.asp.

SECTION 2: VA HEALTH CARE BENEFITS

Basic Eligibility

Active Duty: If you separate from active duty under any condition other than dishonorable, you may qualify for VA health care benefits.

Reserve and National Guard:

- If you are a member of the Reserve or Guard who serve on active duty for training or inactive duty training, you may also be eligible for VA health care if you were disabled from an injury or disease incurred or aggravated in the line of duty.

Note: *The duty requirement may not apply to you if you were discharged for a disability incurred or aggravated in the line of duty. Additionally, the minimum duty requirement does not apply to receive care for conditions related to sexual assault or sexual harassment experienced during your military service (e.g., Military Sexual Trauma).*

VA Health Care Enrollment

To receive health care, Veterans generally must enroll with the VA. To enroll, you must complete **VA Form 10-10EZ, Application for Health Benefits,** which may be obtained from:

- Any VA health care facility or regional benefits office
- By calling 1-877-222-VETS (8387)
- At the VA website: www.1010ez.med.va.gov/sec/vha/1010ez

Also, many MTFs have **VA Liaisons for Healthcare** on site or virtually assigned that can help you establish VA Healthcare customized to your individual needs. Your VA Liaison can be found on the VA website at http://www.oefoif.va.gov/valiaisons.asp.

If you fall into one of the following categories, you are not required to be enrolled to receive care from the VA, but VA suggests that you still enroll because it allows them to better plan health resources for all Veterans. The categories are:

- Veterans with a service-connected disability of 50% or more
- Veterans seeking care for a disability the military determined was incurred or aggravated in the line of duty, but which VA has not yet rated, within 12 months of discharge
- Veterans seeking care for a service-connected disability only
- Veterans seeking registry examinations (Ionizing Radiation, Agent Orange, Gulf War, Airborne Hazards, Open Burn Pit Registry, and Depleted Uranium)
- Veterans eligible only for (or seeking only) care related to sexual assault or sexual harassment experienced during military service (i.e., Military Sexual Trauma)

Additionally, service-connected care and treatment is not subject to any co-pay or filing for any other existing insurance to include TRICARE.

Note: *Some beneficiaries may be eligible for both Veterans' and TRICARE benefits. You are considered "dual-eligible" when you are eligible for both Veterans' medical benefits and TRICARE benefits. If you seek care for a service-connected condition in VA medical facilities, you must receive that care under your Veterans' benefits. VA does not bill TRICARE for treatment of service-connected conditions.*

Service Disabled Veterans

If you are 50% or more disabled from service-connected conditions, unemployable due to service-connected conditions, or receiving care for a service-connected disability, you will receive priority in scheduling of hospital or outpatient medical appointments.

Combat Veterans

If you served in combat while on active duty, you are eligible for enhanced enrollment placement for five years after the date you leave service. During the period of enhanced enrollment eligibility, you will receive VA treatment for any condition that may be related to your combat service at no cost to you.

You may also be eligible for enhanced enrollment priority if you were an activated Reserve or Guard member who served on active duty in a theater of combat operations after November 11, 1998, and left Service under any conditions other than dishonorable.

If you enroll with VA under this "Combat Veteran" authority, you keep your enrollment eligibility even after your enhanced benefit period ends. However, at that time, VA will reassess your eligibility and place you in the highest priority category for which you then qualify. Depending on your household income, you may also be charged co-pays for your healthcare conditions that have been determined by VA to be non-service-connected.

If you do not enroll during your enhanced eligibility period, eligibility for enrollment and subsequent care is based on other factors, such as a compensable service-connected disability, VA pension status, catastrophic disability determination, or your financial circumstances. For this reason, you are strongly encouraged to apply for enrollment within your enhanced eligibility period even if you do not need health care at that time.

Mental Health Services

In accordance with VA regulations, Veterans may be treated for presumptive service-connected treatment for active psychosis or other active mental illness provided that all other eligibility and clinical criteria are met.

Mental and behavioral health care exist for certain former members of the Armed Forces. To be eligible, former service members must satisfy all the following criteria:

- Be a former member of the Armed Forces, including the Reserves;
- Have been released from active service under a condition that is not honorable, but also not dishonorable or by court-martial;
- Be otherwise ineligible to enroll in VA health care; and
- Have served in the Armed Forces for more than 100 cumulative days and been deployed in combat operations or suffered Military Sexual Trauma (MST) while serving.

Military Sexual Trauma

VA offers free care (including medications) for both mental and physical health conditions related to sexual assault or sexual harassment experienced during military service. VA refers to these experiences as military sexual trauma (MST).

Eligibility is not based on length of service, income, or other standard eligibility. You may be eligible for this VA benefit if one or more of the following criteria apply to you:

- Do not generally qualify for VA services
- Does not need to be service connected
- Do not need to have reported the incident(s) when they happened
- Do not need to have other documentation that it occurred
- Do not need to have sought help within a certain period of time since discharge
- Do not need to have a specific diagnosis

To learn more about VA's services for MST, Veterans can speak to the MST Coordinator at their nearest VA medical center, speak to a Vet Center provider, or ask their current VA health care provider.

VA Health Care Priority Groups

When you apply for VA health care, you will be assigned to a priority group. These groups range from 1-8, with group 1 being the highest priority. If you are eligible for more than one priority group, VA will place you in the highest priority group for which you are eligible. The same types of services are generally available for all priority groups as part of the Medical Benefits Package. The eligibility rules are complicated, and some are based upon how much income you have. The general rules for assignment to a priority group are listed below.

- **Group 1:** Veterans with service-connected disabilities rated 50% or more and/or Veterans determined by VA to be unemployable due to service-connected conditions, as well as Veterans awarded the Medal of Honor.
- **Group 2:** Veterans with service-connected disabilities rated 30% or 40%.
- **Group 3:** Veterans who are former prisoners of war (POWs); Veterans awarded the Purple Heart medal; Veterans whose discharge was for a disability incurred or aggravated in the line of duty; Veterans with VA service-connected disabilities rated 10% or 20%; and Veterans awarded special eligibility for individuals disabled by treatment or vocational rehabilitation.
- **Group 4:** Veterans receiving increased compensation or pension based on their need for regular aid and attendance or because they are permanently housebound, as well as Veterans determined by VA to be catastrophically disabled.
- **Group 5:** Non-service-connected Veterans and non-compensable service-connected Veterans rated 0%, whose annual income and/or net worth is below the VA national income limit and geographically-adjusted income limit for their resident location; Veterans receiving VA Pension benefits; and Veterans eligible for Medicaid benefits.
- **Group 6:** Compensable 0% service-connected Veterans. Veterans who served in the Republic of Vietnam between Jan. 9, 1962, and May 7, 1975. Veterans who served in the Southwest Asia theater of operations from Aug. 2, 1990, through Nov. 11, 1998. Veterans who served in a theater of combat operations after Nov.11, 1998, as follows: Veterans discharged from active duty on or after Jan. 28, 2003, for five years post discharge; Veterans who

served on active duty at Camp Lejeune, N.C., for no fewer than 30 days beginning Aug. 1, 1953, and ending Dec. 31, 1987.

- **Group 7:** Veterans with incomes below the geographic means test income thresholds and who agree to pay the applicable co-payment.
- **Group 8:** Veterans with gross household incomes above VA national income threshold and the geographically-adjusted income threshold for their resident location and who agree to pay copayments.

VA Medical Benefits Package

All enrolled Veterans are provided VA's Medical Benefits package. While VA provides most care within the VA health care system, they may authorize you to receive medical care in your home community at VA's expense. This applies when VA is not able to provide economical hospital care or other medical services because of where you live, or if the VA cannot provide the care you need.

VA's Medical Benefits package includes:

- Outpatient medical, surgical, screenings and immunizations, and mental health care, including care for substance abuse
- Preventive care includes: Periodic medical exams; health education (including nutrition education, maintenance of drug-use profiles, drug monitoring, and drug use education); and women's health, mental health, and substance abuse preventive services
- Inpatient hospital, medical, surgical, and mental health care, including care for substance abuse
- Prescription drugs, including over-the-counter drugs and medical and surgical supplies available under the VA national formulary system
- Emergency care in VA facilities
- Bereavement counseling
- Comprehensive rehabilitative services other than vocational services
- Consultation, professional counseling, marriage and family counseling, training, and mental health services for the following people: immediate family members or legal guardians of Veterans, family caregivers of eligible Veterans or caregivers of covered Veterans, and individuals in whose households such Veterans certify intention to necessarily live in connection with such treatment
- Durable medical equipment and prosthetic and orthotic devices
- Home health services
- Reconstructive (plastic) surgery required as a result of a disease or trauma but not including cosmetic surgery that is not medically necessary
- Respite, hospice, and palliative care
- Payment of travel and travel expenses for eligible Veterans
- Pregnancy and delivery service, to the extent authorized by law, and newborn care for up to the first seven days after birth
- Completion of forms including: Family Medical Leave forms, life insurance applications, Department of Education forms for loan repayment exemptions based on disability, and non-VA disability program forms by health care professionals based on an examination or knowledge of the Veteran's condition. This does not include the completion of forms for examinations if a third party customarily will pay health care practitioners for the examination but will not pay VA.

VA Dental Benefits

If you served on active duty for 90 days or more and apply for VA dental care within 180 days of separation from active duty, you may receive one-time treatment of your dental conditions if your certificate of discharge does not indicate that you received necessary dental care within 90 days prior to discharge or release.

Additional dental benefit information can be located at the VA Federal Benefits for Veterans, Dependents and Survivors website, Chapter 1: http://www.va.gov/opa/publications/benefits_book/benefits_chap01.asp.

Beneficiary Travel

You may be eligible for mileage reimbursement in association with obtaining VA health care services if:

- You have a service-connected rating of 30% or more,
- You are traveling for treatment of a service-connected condition,
- You receive VA pension,
- Your income does not exceed the maximum annual VA pension rate, or
- You are traveling in relation to a Compensation and Pension (C&P) Examination

Note: *Beneficiary travel is only eligible for reimbursement of travel within the United States.*

For more information on Beneficiary Travel, visit: http://www.va.gov/HEALTHBENEFITS/vtp/Beneficiary_Travel.asp.

Emergency Care in Non-VA Facilities

You may be eligible for reimbursement or payment for the cost of emergency medical care furnished by a non-VA facility that was not authorized in advance by VA. When VA facilities are not feasibly available, VA will provide reimbursement or payment for emergency treatment provided to a Veteran for the following:

- An adjudicated service-connected disability
- A non-service-connected disability associated with and held to be aggravating a service-connected disability
- Any disability of a Veteran if the Veteran has a total disability permanent in nature from a service-connected disability
- Any illness, injury, or dental condition of a Veteran who is a participant in a vocational rehabilitation program and is medically determined to have been in need of care or treatment to make possible the Veteran's entrance into a course of training, prevent interruption of a course of training, or hasten the return to a course of training which was interrupted because of such illness, injury, or dental condition

When VA facilities are not feasibly available, VA may also provide payment or reimbursement for emergency treatment provided to certain Veterans for their non-service connected conditions.

Generally, to be eligible for payment or reimbursement a Veteran must:

- Be enrolled in the VA Health Care System;
- Have received care from VA within the last 24 months; and
- Be "personally liable" for the furnished treatment

Although not a condition of reimbursement or payment, please contact or have your non-VA emergency care provider contact the local VA medical center as soon as possible after initiation of non-VA emergency treatment. This will assist VA in coordinating your care and, as appropriate, arranging for an appropriate transfer to the local VA medical center. VA is, in general, authorized to pay for emergency treatment only up until the point that the emergency ends (i.e. the Veteran's condition has stabilized and the Veteran could be transferred to a VA or other federal facility).

VA Health Care for Families – Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA)

CHAMPVA is a VA program established to provide health care benefits for:

- The spouse or child of a Veteran who has a permanent and total service-connected disability;
- The surviving spouse or child of a Veteran who dies as the result of a service-connected disability or who had a permanent and total service-connected disability at the time of death;
- The surviving spouse or child of a person who died in the active military, naval, or air service in the line of duty and not due to such person's own misconduct;
- An individual designated by VA as a primary provider for personal care services and who is not entitled to care or services under a health-plan contract.

Generally, under CHAMPVA, medical services and supplies are obtained through civilian sources. CHAMPVA shares the cost of most medically necessary care, including bills for inpatient and outpatient treatment, diagnostic tests, medical supplies, and medications. CHAMPVA also covers care in some health care facilities other than hospitals and outpatient clinics. Services and supplies that are not medically necessary or are specifically excluded from coverage

are not covered under the CHAMPVA program. Some examples of those services include: cosmetic surgery for cosmetic purposes and custodial care. For more information on covered and non-covered services and supplies, visit: https://www.va.gov/COMMUNITYCARE/programs/dependents/champva/index.asp.

In most cases, CHAMPVA pays 75% of the VA allowable amount for hospital and professional charges for covered inpatient care. For outpatient care, after payment of a $50.00 individual or $100.00 family deductible has been met, CHAMPVA pays 75% of the VA allowable amount and the remaining 25% is the responsibility of the CHAMPVA beneficiary, with an annual out-of-pocket cap of $3,000. Learn more at: https://www.va.gov/COMMUNITYCARE/programs/dependents/champva/.

To apply for CHAMPVA benefits, mail a VA Form 10-10D to the Chief Business Office, Purchased Care, P.O. Box 469028, Denver, CO 80246-9028, or call 1-800-733-8387.

*If you are eligible for benefits under the TRICARE program, your spouse and children are **not** eligible for CHAMPVA.*

VA provides health care for Veterans from providers in your local community outside of VA. Veterans may be eligible to receive care from a community provider when VA cannot provide the care needed. This care is provided on behalf of and paid for by VA.

Community care is available to Veterans based on certain conditions and eligibility requirements, and in consideration of a Veteran's specific needs and circumstances, Community care must be first authorized by VA before a Veteran can receive care from a community provider.

Eligibility:

A Veteran's eligibility for community care depends on his/her individual health care needs or circumstances. Visit the OCC website for more information:

https://www.va.gov/communitycare/.

There are six eligibility criteria that can qualify a Veteran to receive community care. Veterans only need to meet one of these to be eligible:

1. Veteran needs a service that is not available at VA
2. Veteran resides in a U.S. state or territory without a full-service VA medical facility (Alaska, Hawaii, New Hampshire, and the U.S. territories of Guam, American Samoa, Northern Mariana Islands, and the U.S. Virgin Islands).
3. Veteran qualifies under the "Grandfather" provision related to distance eligibility for what used to be called Veterans Choice Program (VCP).
4. VA cannot provide care within certain designated access standards.
5. Veteran and their referring clinician agree that it is in the Veteran's best medical interest to be referred to a community provider.
6. Veteran needs care from a VA medical service line that VA determines is not providing care that complies with VA's quality standards.

Before scheduling an appointment, it is important for the Veteran to confirm with a VA staff member that they are eligible and authorized for community care.

SECTION 3: VA LIFE INSURANCE PROGRAMS

Traumatic Injury Protection Program (TIPP)

If you are totally disabled, and were covered by full time SGLI Disability Extension, which provides free coverage for up to two years from the date of separation, if approved. To be considered totally disabled, you must have a disability that prevents you from being gainfully employed, OR have certain conditions, regardless of your employment status. To apply, you must complete and submit form SGLV 8715, Application for Servicemembers' Group Life Insurance (SGLI) Disability Extension. Visit the VA website for more information at: http://www.benefits.va.gov/insurance/sglidisabled.asp.

Traumatic Servicemembers' Group Life Insurance (TSGLI)

If you have SGLI coverage, then you are automatically covered by TSGLI. The TSGLI program provides short-term monetary assistance to you if you are severely injured and suffer a scheduled loss as a direct result of a traumatic injury. Payments range from $25,000 to a maximum of $100,000. If you are covered by SGLI and suffer a qualifying loss, even if that loss did not occur in the line of duty or in a combat situation, you may be eligible for a TSGLI payment.

The TSGLI program became effective on December 1, 2005, but benefits are also payable to you if you had a qualifying loss due to a traumatic injury between October 7, 2001, and November 30, 2005. Additionally, beginning October 1, 2011, a TSGLI benefit can be paid if you were injured and suffered a qualifying loss, even if it was not incurred in OEF or OIF. Regardless of the geographic location where the injury occurred, and regardless of whether coverage was in effect at the time of injury.

Veterans' Group Life Insurance (VGLI)

You have one year and 120 days from your date of separation to apply for VGLI. If you apply for coverage within 240 days of your date of separation, you will not need to answer health questions. If you were approved for the SGLI Disability Extension, you automatically become eligible for VGLI, subject to premium payments.

- **Increasing VGLI Coverage:** Once enrolled in VGLI, you will have the opportunity to increase your coverage by $25,000 on your one-year anniversary and once every five years thereafter, up to the legislated maximum, until age 60.
- **Converting VGLI to Permanent Insurance:** You can convert your VGLI to a permanent plan of insurance (e.g., whole life) at any time with any of the participating commercial insurance companies. For more information, contact OSGLI at 1-800-419-1473, or visit the VA Insurance website at: https://www.benefits.va.gov/INSURANCE/converting.asp.

Service-Disabled Veterans Insurance (S-DVI)

The S-DVI program is a life insurance program for Veterans with service-connected disabilities. S-DVI is available in a variety of permanent plans as well as term insurance. Policies are issued for a maximum face amount of $10,000. In order to be eligible for S-DVI, you must have been released from active duty under other than dishonorable conditions on or after April 25, 1951, received a rating for a new service-connected disability, and applied within two years from the date VA grants such rating (even if only 0%). An increase for a previously rated condition or granting of individual unemployability does not provide a new eligibility period for S-DVI. Contact the VA Insurance Service toll-free at 1-800-669-8477, or online at http://www.benefits.va.gov/insurance/s-dvi.asp for more information.

- **Waiver of S-DVI Premiums:** S-DVI policyholders who are totally disabled and unable to work (with exception to certain conditions) for at least six consecutive months, prior to age 65 may be eligible to have their premiums waived.
- **Supplemental S-DVI:** Supplemental S-DVI provides up to $30,000 of supplemental life insurance coverage to S-DVI policyholders who are approved for waiver of premiums. Application for Supplemental S-DVI must be made prior to age 65 and within one year of the date the waiver of premiums for S-DVI is granted. Premiums may not be waived on this supplemental coverage.

Veterans' Mortgage Life Insurance (VMLI)

The VMLI program provides mortgage life insurance to severely disabled Veterans and Service members, age 69 or younger. Only Veterans and Service members who have received a Specially Adapted Housing Grant from VA AND have a title to the home, AND have a mortgage on the home are eligible to apply. VMLI provides up to $200,000 of mortgage life insurance payable to the mortgage holder (i.e. a bank or mortgage lender) in the event of your death. This coverage reduces as the amount of your mortgage is reduced. Additional information can be found here: http://www.benefits.va.gov/INSURANCE/vmli.asp.

Family Servicemembers' Group Life Insurance (FSGLI)

FSGLI provides coverage for spouses and dependent children of Service members insured under the SGLI program. Spousal coverage is available up to a maximum of $100,000, not to exceed the Service members' SGLI coverage. Spousal coverage premiums are charged based on age and coverage amount. Spousal coverage may, or may not, be automatic. Dependent children are covered for $10,000 automatically at no cost. A spouse may convert their coverage to an individual policy offered by a participating insurer within 120 days from the Service member's date of separation, divorce, death, or termination of SGLI or FSGLI spousal coverage. Additional information can be found here: https://www.benefits.va.gov/insurance/fsgli.asp.

Veterans' Group Life Insurance (VGLI)

FSGLI provides coverage for spouses and dependent children of Service members insured under the SGLI program. Spousal coverage is available up to a maximum of $100,000, not to exceed the Service members' SGLI coverage. Spousal coverage premiums are charged based on age and coverage amount. Spousal coverage may, or may not, be automatic. Dependent children are covered for $10,000 automatically at no cost. A spouse may convert their coverage to an individual policy offered by a participating insurer within 120 days from the Service member's date of separation, divorce, death, or termination of SGLI or FSGLI spousal coverage. Additional information can be found here: https://www.benefits.va.gov/insurance/fsgli.asp.

SECTION 4: SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE (DEA)

This program provides educational assistance to your spouse or child if you:

- Are permanently and totally disabled as a result of a service-connected disability
- Die due to a service-connected disability or while rated permanently and totally disabled as a result of a service-connected disability
- Are missing in action or a prisoner of war
- Are a Service member who is hospitalized or receiving outpatient treatment for a service connected permanent and total disability and is likely to be discharged for that disability.

Dependents who enroll before August 1, 2018, will be afforded 45 months of the education benefits. Dependents enrolling after August 1, 2018, will be afforded 36 months of the entitlement. These benefits may be used for degree and certificate programs, apprenticeship, and on-the-job training. A surviving spouse can also use this program for correspondence courses. Remedial, deficiency, and refresher courses may be approved under certain circumstances. A child of an eligible Veteran must be between the ages of 18 and 26, and marriage does not terminate eligibility.

For more information, visit: http://www.benefits.va.gov/GIBILL/DEA.asp.

SECTION 5: FRY SCHOLARSHIP

The Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) provides Post-9/11 GI Bill benefits to the children and surviving spouses of service members who died in the line of duty while on active duty after September 10, 2001. Eligible beneficiaries attending school may receive up to 36 months of benefits at the 100% level of the Post-9/11 GI Bill.

The Forever GI Bill removes the time limitation for the use of Post-9/11 GI Bill benefits for individuals whose last discharge or release from active duty is on or after January 1, 2013, children of deceased Service members who first become entitled to Post-9/11 GI Bill program benefits on or after January 1, 2013, and all Fry spouses. All others remain subject to the current 15-year time limitation for using their Post-9/11 GI Bill benefits.

For more information, visit: http://www.benefits.va.gov/gibill/docs/factsheets/fry_scholarship.pdf.

SECTION 6: VA PERSONALIZED CAREER PLANNING AND GUIDANCE PROGRAM

VA's Personalized Career Planning and Guidance program (PCPG) (Title 38, Chapter 36) is a great opportunity for Service members, Veterans and dependents to receive personalized counseling and support to help guide their career paths, ensure most effective use of their VA benefits, and achieve their goals. This VA-administered program provides you and your family members, who are eligible for educational benefits, professional and qualified vocational and educational counseling. You are eligible if you:

- Will be discharged from active duty within six months, **OR**
- Separated from active duty not more than one year ago, **OR**
- Qualify as a Veteran or Servicemember for educational assistance under a VA educational program, **OR**
- Are currently receiving VA educational benefits

Visit the VA Educational and Career Counseling website at: https://www.va.gov/careers-employment/education-and-career-counseling.

Additional VA education benefits including the GI Bill and Fry Scholarship are covered in Chapter 9, Section 9 "Education Benefits."

SECTION 7: BENEFITS FOR CHILDREN OF VIETNAM VETERANS AND OTHER VETERANS (CHAPTER 18 SERVICE)

Under Chapter 18, VA's Veteran Readiness and Employment (VR&E) program provides eligible dependents born with spina bifida, Amyotrophic Lateral Sclerosis (ALS), and other congenital disabilities vocational training and other rehabilitative services aimed to enable suitable employment.

The following people are eligible to apply for Benefits for Children of Vietnam Veterans and Other Veterans:

- Biological children of Vietnam Veterans diagnosed with spina bifida, including all forms of spina bifida except spina bifida occulta.
- Children of women Vietnam Veterans born with certain birth defects that are associated with the service of those Veterans in the Republic of Vietnam that result in a permanent physical, cognitive, or psychological disorder and do not result from a familial disorder, a birth-related injury, or a fetal or neonatal infirmity with well-established causes.
- Children with all forms of spina bifida, except spina bifida occulta, born to Veterans exposed to herbicides who served in or near the DMZ in Korea between September 1, 1967, and August 31, 1971.
- To apply for Chapter 18 services, the individual must complete VA Form 21-0304, Application for Benefits for Certain Children Veterans, and forward to the VA Denver Regional Office.

SECTION 8: VA AUTOMOBILE ALLOWANCE AND ADAPTIVE EQUIPMENT

This benefit may provide a one-time payment toward the purchase of a vehicle or adaptive automobile equipment to a Veteran or Service member with a disability related to their Service (called a service-connected disability) and that includes at least one of the below conditions:

- Loss, or permanent loss of use, of 1 or both feet, or
- Loss, or permanent loss of use, of 1 or both hands, or
- Permanent decreased vision in both eyes: 20/200 vision or less in your better eye with glasses, or greater than 20/200 vision but with a visual field defect that has reduced your peripheral vision to 20 degrees or less in your better eye, or
- A severe burn injury, or
- Amyotrophic lateral sclerosis (ALS), or
- Ankylosis in 1 or both knees or his (Note: This qualifies you for adaptive-equipment grant only)

For more information visit: https://www.va.gov/disability/eligibility/special-claims/automobile-allowance-adaptive-equipment/

SECTION 9: SPECIALLY ADAPTED HOUSING GRANT

VA's Loan Guaranty Service provides grants to Service members and Veterans with certain permanent and total service-connected disabilities to help purchase or construct an adapted home or modify an existing home to accommodate a disability. The grants may also be used to reduce the principal balance of a mortgage on a home that has already been adapted. Two grant programs exist: the Specially Adapted Housing (SAH) grant and the Special Housing Adaptation (SHA) grant. In addition, the Temporary Residence Adaptation (TRA) grant may be available to SAH/SHA eligible Service members and Veterans who are, or will be, temporarily residing in a home owned by a family member. There is no time limit on use of the grant and the grant may be used up to three times, up to the maximum grant amount specified in law. The current maximum grant amount allowable is listed on the VA website listed below and is adjusted annually based on a cost-of-construction index. For more information, visit the VA website at: http://www.benefits.va.gov/homeloans/adaptedhousing.asp or http://explore.va.gov/home-loans-and-housing/adaptive-home-and-vehicle.

SECTION 10: CLOTHING ALLOWANCE

This benefit is paid annually for Veterans with a service-connected disability or disabilities for which a prescribed prosthetic or orthopedic appliance causes or tends to tear or wear clothing. This also applies to service-connected skin conditions and prescribed skin medications (ointments, lotions, etc.) that cause irreparable damage to outer garments. A Veteran may receive one or more clothing allowance payments. For eligibility or application information, visit the VA Website at: https://www.va.gov/disability/eligibility/special-claims/clothing-allowance/).

SECTION 11: THE VETERAN HEALTH IDENTIFICATION CARD (VHIC)

The VHIC is issued only to Veterans who are enrolled in the VA health care system, and will be issued to you for use at all VA health care facilities after you are verified as eligible. The VHIC is a picture ID with encoded identifying information for check-in at VA appointments. It cannot be used as a credit card or an insurance card, and it does not authorize or pay for care at non-VA facilities. For more information on the VHIC, visit: http://www.va.gov/healthbenefits/access/veteran_identification_card.asp.

SECTION 12: VA HOME LOAN GUARANTY PROGRAM

VA has a home loan guaranty program to help Veterans and Service members obtain, retain, or adapt a home. VA Home Loans are provided by private lenders, such as banks and mortgage companies. VA guarantees a portion of the loan, enabling the lender to provide you with more favorable terms.

For Veterans who experience financial difficulty making their mortgage payments, VA and loan servicers work to help them avoid foreclosure. VA has loan specialists in eight offices around the nation who take an active role in negotiating with the mortgage servicer to explore all options to avoid foreclosure. You can call 1-877-827-3702 to reach the nearest VA office where loan specialists are prepared to discuss potential ways to help save the loan.

The **Native American Direct Loan (NADL) Program** provides direct home loans to eligible Native American Veterans to finance the purchase, construction, or improvement of homes on Federal Trust Land or to refinance a prior NADL to reduce the interest rate. For more information, visit: http://www.benefits.va.gov/homeloans/nadl.asp.

For more information on VA Home Loans, visit: www.benefits.va.gov/homeloans.

SECTION 13: VA CAREGIVER SUPPORT PROGRAM

VA's Caregiver Support Program offers a menu of supports and services to assist family caregivers of Veterans of all eras. Supports include caregiver education and training, peer support, and a designated caregiver support coordinator located at every VA medical center. Additional information is available at https://www.caregiver.va.gov/ or by calling the VA Caregiver Support Line at 1-855-260-3274.

Program of Comprehensive Assistance for Family Caregivers

The Program of Comprehensive Assistance for Family Caregivers offers enhanced support for caregivers of eligible Service members or Veterans who incurred or aggravated an injury in the line of duty post September 11, 2001. Service members who have been issued a date of medical discharge from the military and require ongoing supervision or assistance with performing basic functions of everyday life due to a serious injury or mental disorder (including PTS or TBI) incurred or aggravated in the line of duty on or after September 11, 2001, and require at least six months of continuous caregiver support may meet the criteria for VA's Program of Comprehensive Assistance for Family Caregivers. Approved family caregivers are eligible to receive the following supports and service:

- Travel expenses (including lodging and per diem) when your Veteran has to travel for medical care
- Access to health care insurance through CHAMPVA (if the caregiver is not already entitled to care or services under a health care plan
- Mental health services and counseling
- Comprehensive VA Caregiver training
- Respite care (not less than 30 days per year)
- Monthly financial stipend provided to the caregiver
- Hero miles to assist with airline travel for caregiver respite
- Legal and financial planning services under the Mission Act expansion

Service members and Veterans can designate one primary family caregiver and up to two secondary family caregivers, if desired. Caregiver Support Coordinators are available at every VA Medical Center to assist with the application process, and the VA's National Caregiver Support line (1-855-260-3274) is always available for caregivers to call.

SECTION 14: RESPITE CARE PROGRAM

VA medical centers can give the caregiver (family member or friend) a "break" by taking over the care for a limited time. Respite care can be helpful to Service members and Veterans of all ages, and their caregiver. They can receive respite care in an inpatient, outpatient, or home setting.

VA medical centers may provide respite care to an eligible Veteran for up to 30 days in a calendar year. Families and patients who are in need of respite care in excess of 30 days because of unforeseen difficulties, such as the unexpected death of the caregiver, may receive additional days of care with the approval of the medical center director. Respite care may be provided at a VA medical center, in a community setting, or in the Veteran's home.

Since Respite Care is part of the Veteran Health Administration (VHA) Standard Medical Benefits Package, all enrolled Veterans are eligible if they meet the clinical need for the service and it is available.

A copay for respite care may be charged based on VA service-connected disability status and financial information. Contact your VA social worker and/or case manager to complete the Application for Extended Care Benefits (*VA Form 10-10EC*) to learn the amount of your copay.

For more information, visit: http://www.va.gov/GERIATRICS/Guide/LongTermCare/Respite_Care.asp.

SECTION 15: FOREIGN MEDICAL PROGRAM

The Foreign Medical Program (FMP) is a VA health care benefits program for Veterans who are residing or traveling abroad and have VA-rated, service-connected disabilities. The eligibility requirements for medical services are different for Veterans outside the United States than for Veterans living within the United States. The Foreign Medical Program assumes payment responsibility for Veterans only for a VA-rated service-connected disability (38 C.F.R. 17.35). Additionally, VA may authorize necessary foreign medical services for any condition for a Veteran participating in the Veteran Readiness and Employment (VR&E) Program.

Note: *Veterans living in Canada are under the jurisdiction of FMP; however, inquiries and claims must be directed to the Foreign Countries Operations in Canada. See contact information below.*

To enroll in FMP, send your full name, mailing address, address of residence (including country), U.S. Social Security number, and VA claim number to:

VHA Office of Community Care Foreign Medical Program (FMP)
P.O. Box 469061
Denver, CO 80246-9061

For Veterans living in Canada (for medical claim filing), send claims and inquiries to:

Foreign Countries Operations (FCO)
2323 Riverside Dr., 2nd Floor
Ottawa, Ontario Canada, KIA OPS.
Toll-free phone: 888-996-2242
Fax: 613-991-0305

For more information on the Foreign Medical Program, please visit the VA's FMP website: https://www.va.gov/COMMUNITYCARE/programs/veterans/fmp/index.asp

U.S. State & Territory Veteran Affairs Office

VA has many resources available for Veterans and family members. See our locations listings for your nearest facility. Additional state and local resources are available through State Veteran Affairs offices and Veterans Service Organizations.

SECTION 16: REVIEWS OF VA CLAIMS DECISIONS

Veterans and other claimants for VA benefits have the right to request a review of decisions made by VA. The most common issues requested for review are disability compensation, pension, education benefits, recovery of overpayments, reimbursement for unauthorized medical services, and denial of burial and memorial benefits. For most VA benefits, a Veteran or claimant must elect one of the three review lanes within one year of the date of the decision notice letter to preserve the earliest effective date to benefits. VA changed the process to request a review of decisions in February 2019, with the implementation of the Veterans Appeals Improvement and Modernization Act of 2017. The first step in the review process is for a claimant to choose which review lane to use and file a decision review request with the VA department that made the decision. Following receipt of the form, VA will furnish a decision describing what facts, laws, and regulations were used in deciding the case. If the claimant remains dissatisfied, he or she may choose another review lane.

For more information on the decision review process, visit: https://www.va.gov/decision-reviews/.

Appendix A: TRICARE Benefits and Plans

TRICARE offers several different health plans. If you click on the links below, or type the link into your browser, you can find information on the plan overview, eligibility, cost, etc.

TRICARE Plan	Website
TRICARE Prime	https://tricare.mil/Plans/HealthPlans/Prime
TRICARE Prime Remote	https://tricare.mil/Plans/HealthPlans/TPR
TRICARE Prime Overseas	https://tricare.mil/Plans/HealthPlans/TPO
TRICARE Prime Remote Overseas	https://tricare.mil/Plans/HealthPlans/TPRO
TRICARE Select	https://tricare.mil/Plans/HealthPlans/TS
TRICARE Select Overseas	https://tricare.mil/Plans/HealthPlans/TSO
TRICARE For Life	https://tricare.mil/Plans/HealthPlans/TFL
TRICARE Reserve Select	https://tricare.mil/Plans/HealthPlans/TRS
TRICARE Retired Reserve	https://tricare.mil/Plans/HealthPlans/TRR
TRICARE Young Adult	https://tricare.mil/Plans/HealthPlans/TYA
US Family Health Plan	https://tricare.mil/Plans/HealthPlans/USFHP

Your benefits and plans will vary depending on your beneficiary category and where you live. Click on your beneficiary category below or type the link into your browser to learn more.

TRICARE Beneficiary	Website
Active duty Service members and families	https://tricare.mil/Plans/Eligibility/ADSMandFamilies
National Guard/Reserve members and families	https://tricare.mil/Plans/Eligibility/NGRMandFamilies
Retired service members and families	https://tricare.mil/Plans/Eligibility/RSMandFamilies
Retired Reserve members and families	https://tricare.mil/Plans/Eligibility/NGRRandFamilies
Beneficiaries eligible for TRICARE and Medicare	https://tricare.mil/Plans/Eligibility/MedicareEligible
Survivors	https://tricare.mil/Plans/Eligibility/Survivors
Children	https://tricare.mil/Plans/Eligibility/Children
Former spouses	https://tricare.mil/Plans/Eligibility/FormerSpouses
Medal of Honor recipients and families	https://tricare.mil/Plans/Eligibility/MOHandFamilies
Dependent parents and parents-in-law	https://tricare.mil/Plans/Eligibility/DepParentsParentsInLaw
Foreign Force members and families	https://tricare.mil/foreignforces/

Additional benefits for which you and/or your family may be eligible include:

TRICARE Beneficiary	Website
TRICARE Active Duty Dental Program	https://tricare.mil/Plans/DentalPlans
TRICARE Dental Program	https://tricare.mil/Plans/DentalPlans
Office of Personnel Management's Federal Employee Dental and Vision Insurance Program (FEDVIP)	https://tricare.benefeds.com/
TRICARE Special Programs • Autism Care Demonstration • Cancer Clinical Trials • Chiropractic Health Care Program • Combat-Related Special Compensation Travel Benefit • Continued Health Care Benefit Program • Extended Care Health Option • Provisional Coverage Program • Transitional Assistance Management Program • TRICARE Plus • Women, Infants, and Children Overseas Program	https://tricare.mil/Plans/SpecialPrograms

TRICARE Plan	Details
TRICARE Prime	Available to all active duty Service members, Reserve and National Guard members on orders to active duty for more than 30 consecutive days, retired Service members (who are not eligible for Medicare) and their families, Survivors, Medal of Honor Recipients and their families, and qualified former spouses. TRICARE Prime is a managed care option that provides the most affordable and comprehensive coverage within the TRICARE family of plans. Under TRICARE Prime, you have a Primary Care Manager (PCM), who is at the Military Treatment Facility (MTF) at which you are receiving care. Your PCM could also be a doctor in the civilian community who is under contract with TRICARE. TRICARE Prime is available in Prime Service Areas in each TRICARE Region (East Region or West Region). To find out if your location is within a Prime Service Area, visit the TRICARE Plan Finder at https://tricare.mil/Plans/PlanFinder. If you are medically retired, you and your family may continue to receive your care through TRICARE Prime, but you must enroll in the plan and pay an annual (October 1 – September 30) premium. Your TRICARE rates will remain the same for the year that you were medically retired. However, if you retire due to years of service, your rates may increase according to current legislation. For current rates, visit: https://tricare.mil/Plans/Enroll/Prime/EnrollmentFees. When retired Service members and their families become eligible for TRICARE For Life, they are no longer able to enroll in TRICARE Prime. More information is available at the TRICARE Prime website (https://tricare.mil/Plans/HealthPlans/Prime.aspx) and TRICARE® Online Patient Portal (https://www.tricareonline.com/tol2/prelogin/mobileIndex.xhtml).

TRICARE Plan	Details
TRICARE Prime Remote	TRICARE Prime Remote is a managed care option available in remote areas in the United States. • The member must live and work more than 50 miles (or one hour's drive time) from a military hospital or clinic • Check your home and work ZIP codes to see if you may qualify • Enrollment is required – no enrollment fees • Meets or exceeds the requirements for minimum essential coverage under the Affordable Care Act For more information, visit the TRICARE Prime Remote website: http://tricare.mil/Plans/HealthPlans/TPR.aspx. If you don't live in a Prime Service Area, you may be eligible to receive care under the TRICARE Prime Remote program. TRICARE Prime Remote is a managed care option similar to TRICARE Prime for active duty Service members while they are assigned to remote duty stations in the United States. Remote locations are those that are at least 50 miles or an hour's drive away from a military treatment facility. Like Prime, enrollment is required, and you must use a TRICARE network Primary Care Manager if one is available in the local area.
TRICARE Prime Overseas	TRICARE Prime Overseas is a managed care option in overseas areas near military hospitals and clinics. More information is available at the TRICARE Prime Overseas website: http://tricare.mil/Plans/HealthPlans/TPO.aspx.
TRICARE Prime Remote Overseas	TRICARE Prime Remote Overseas serves members in remote locations outside of the United States in Eurasia-Africa, Latin America, Canada, and the Pacific. Retirees and their families cannot enroll in TRICARE Prime Remote Overseas. More information is available at the TRICARE Prime Remote Overseas website: http://tricare.mil/Plans/HealthPlans/TPRO.aspx.
TRICARE Select	TRICARE Select may be the right choice for you if you live in an area where you cannot use TRICARE Prime, you have other health insurance in addition to TRICARE, such as Medicare or an employer-sponsored health insurance, or you're seeing a provider who isn't in the TRICARE network and you do not want to switch. It is available to active duty family members; retired Service members and their families; family members of Guard/Reserve members activated, called, or ordered to active duty service for more than 30 days in a row; non-activated Guard/Reserve members and their families who qualify for care under the Transitional Assistance Management Program; retired Guard/Reserve members at age 60 and their families; survivors; Medal of Honor recipients and their families; and qualified former spouses. Note, if you're on active duty (including activated Guard/Reserve members), you cannot use TRICARE Select. TRICARE Select allows you to schedule an appointment with any TRICARE-authorized provider (any individual, institution/organization, or supplier that is licensed by a state, accredited by national organization, or meets other standards of the medical community, and is certified to provide benefits under TRICARE). There are two types of TRICARE-authorized providers: Network and Non-Network. Referrals are not required, but you may need prior authorization from your regional contractor for some services. TRICARE Select is a fee-for-service plan available in the United States. Costs vary based on the sponsor's military status. You'll pay an annual outpatient deductible and cost shares (or percentage) for covered services. Enrollment is required, and you need to register in the Defense Enrollment Eligibility Reporting System (DEERS) to get TRICARE. You will not receive a TRICARE wallet card when using TRICARE Select. All you need is your military ID as proof of coverage. More information is available at the TRICARE Select website (https://tricare.mil/Plans/HealthPlans/TS) and TRICARE® Online Patient Portal (https://www.tricareonline.com/tol2/prelogin/mobileIndex.xhtml).

TRICARE Plan	Details
TRICARE Select Overseas	TRICARE Select Overseas provides comprehensive coverage in all overseas areas and may be your only option when you live overseas. It is available to active duty family members; retired Service members and their families, family members of activated, called, or ordered to active duty service for more than 30 days in a row; Guard/Reserve members; non-activated Guard/Reserve members and their families who qualify for care under the Transitional Assistance Management Program; retired Guard/Reserve members at age 60 and their families; survivors; Medal of Honor recipients and their families; and qualified former spouses.
TRICARE For Life	TRICARE For Life is Medicare-wraparound coverage for TRICARE-eligible beneficiaries who have Medicare Part A and B. For more information, visit the TRICARE for Life website: http://tricare.mil/Plans/HealthPlans/TFL.aspx.
TRICARE Reserve Select (TRS)	TRS is a premium-based health plan available worldwide for purchase by qualified Selected Reserve (SELRES) members and their families. If you were covered by TRS prior to mobilization, and are interested in TRS upon demobilization, you need to qualify and purchase TRS again at that time. Monthly premiums, payable by the member, are subsidized and represent only 28% of the full cost of the coverage. For more information, visit the TRICARE Reserve Select website: http://tricare.mil/Plans/HealthPlans/TRS.aspx.
TRICARE Retired Reserve (TRR)	TRR is a premium-based health plan available for purchase by qualified members of the Retired Reserve, who have not reached age 60 (AKA "Gray Area" retirees). The plan provides comprehensive health care coverage upon your retirement and you do not have to wait until you reach age 60 and begin drawing retired pay to purchase the plan. Plus, because you can see any provider, you don't have to change providers if you already have one. Monthly premiums, payable by the member, are not subsidized and represent the full cost of the coverage. For more information, visit the TRICARE Retired Reserve website: http://tricare.mil/Plans/HealthPlans/TRR.aspx.

TRICARE Plan	Details
TRICARE Young Adult	TRICARE Young Adult is a plan that qualified adult dependent children can purchase after eligibility for "regular" TRICARE coverage ends at age 21 (or 23 if enrolled in college). For more information, visit the TRICARE Young Adult website: http://tricare.mil/Plans/HealthPlans/TYA.aspx. To see if you're eligible, check https://tricare.mil/Plans/Eligibility.
US Family Health Plan (USFHP)	USFHP is another TRICARE Prime option that is available in several areas of the country (Maine, Maryland, Massachusetts, New Jersey, New York, Pennsylvania, Texas, and Washington – but not all counties in all states). USFHP is available to active duty family members, retirees, retiree family members and survivors through networks of community-based, not-for-profit health care systems. Under USFHP, you receive your care from a primary care physician that you select from a network of private physicians. For more information, visit the U.S. Family Health Plan website: http://tricare.mil/Plans/HealthPlans/USFHP.aspx, or call 1-800-748-7347.
TRICARE Active Duty Dental Program	TRICARE Active Duty Dental Program covers civilian dental care. Current contractor is MetLife. For more information, visit the Active Duty Dental Program website: http://tricare.mil/Plans/DentalPlans.aspx or call toll-free 1-866-984-2337.
TRICARE Dental Program	TRICARE Dental Program is a voluntary dental insurance plan. Current contractor is United Concordia. For more information, visit the Dental Plan website: http://tricare.mil/Plans/DentalPlans.aspx or call toll-free 1-844-653-4061.
TRICARE Office of Personnel Management's Federal Employees Dental and Vision Insurance Program (FEDVIP)	The TRICARE Retiree Dental Program (TRDP) ended in 2018 and was replaced by the Office of Personnel Management's Federal Employees Dental and Vision Insurance Program (FEDVIP). If you were eligible for TRDP, you may have been able to enroll in a FEDVIP dental plan. You needed to enroll in FEDVIP dental during the 2018 Open Season, November 12 to December 10, 2018, to keep coverage that started January 1, 2019. For more information, visit: https://tricare.benefeds.com/.

TRICARE Plan	Details
TRICARE for Life	When a military retiree becomes age 65, his or her primary health insurance becomes Medicare and TRICARE Standard serves as a secondary coverage under a program called TRICARE for Life. TRICARE Prime is no longer available. Similarly, retirees older than 65 who have been receiving Social Security Disability Insurance (SSDI) payments for at least two years, or who suffer from certain diseases like kidney failure or Lou Gehrig's disease, also become eligible for Medicare. TRICARE Standard acts as a secondary coverage for them as well. Medicare consists of two parts: Part A and Part B. Part A is premium-free insurance that covers most of the cost of hospital stays. Part B is optional insurance for which you must pay a premium and covers physicians' services and most other outpatient hospital services. If you qualify for Social Security disability payments and then recover, your Medicare entitlement may continue for up to 8 1/2 years after your disability payments end. During this period, you're still required to pay Part B premiums to remain TRICARE-eligible. For more information about TRICARE, visit www.tricare.mil or call 1-800-538-9552. For more information about Medicare, visit www.medicare.gov.
TRICARE Transitional Assistance Management Program (TAMP)	May be available to transitioning active duty Service members and their dependents, as well as transitioning Reserve and National Guard members and their dependents separated from a period of active duty that was more than 30 consecutive days in support of a contingency operation. For more information, visit http://www.tricare.mil/Plans/SpecialPrograms/TAMP.aspx.
TRICARE Special Programs	TRICARE offers supplemental programs tailored specifically to beneficiary health concerns or conditions. To find out if you're eligible and to learn more, visit https://www.tricare.mil/Plans/SpecialPrograms.

TRICARE Contact Information

Regional Toll-Free Numbers – Effective January 1, 2018

East Region (via Humana Military Healthcare Services, Inc.): 1-800-444-5445

West Region (via Health Net Federal Services, LLC): 1-844-866-9378

Regional Behavioral Health Provider Locator and Appointment Assistance

1-877-TRICARE (1-877-874-2273)

Other TRICARE Programs

TRICARE Dental Program: 1-844-653-4061

TRICARE For Life: 1-800-538-9552

TRICARE Mail Order Pharmacy: 1-877-363-1303

TRICARE Online (TOL): 1-800-600-9332

TRICARE Retail Pharmacy: 1-877-363-1303

Office of Personnel Management's Federal Employees
Dental and Vision Insurance Program (FEDVIP): https://tricare.benefeds.com/

US Family Health Plan: 1-800-748-7347

Defense Health Agency, Great Lakes: 1-888-647-6676

TRICARE Overseas Telephone Numbers

All Overseas Areas Toll-free Number (available from the United States only): 1-888-777-8343

TRICARE Area Offices (TAOs)

TAO-Pacific: 011-81-98-970-9155

TAO-Latin America and Canada: 1-210-536-6080

TAO-Eurasia-Africa: 011-44-20-8762-8384

Country Specific Toll-Free Numbers can be found at: http://www.tricare-overseas.com/contact-us

Additional TRICARE Phone Numbers can be found at: http://www.tricare.mil/ContactUs/CallUs/AllContacts.aspx.

Appendix B: Health Care Privacy Protections

Your privacy will be protected at all times throughout your medical care. The Privacy Act of 1974 safeguards your personally identifiable information (PII). Your protected health information (PHI) is safeguarded by the Privacy and Security rules invoked by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the provisions of the Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009. There are also numerous policies implemented by DoD and VA to further safeguard your privacy. This protection generally means that your PII and PHI may not be disclosed without your authorization except for specific purposes permitted under the law.

The law permits your PHI to be used and disclosed without your express authorization for purposes of treatment, payment, and healthcare operations by and among healthcare providers. In addition, your PHI may be disclosed to your military commanders for specific circumstances such as to assess your fitness for duty. This disclosure is limited to the minimum information necessary for your commander to make his or her determination. Your commander is obligated to safeguard any PHI received.

You may be asked to sign a HIPAA authorization form allowing health care providers and TRICARE to disclose your health information to your care coordinators (e.g., Lead Coordinator, RCC, AW2 Advocate, NMCM, and FRC). Like military commanders, care coordinators are obligated under the Privacy Act to maintain the confidentiality of the information they receive.

To learn more about privacy protections within DoD, visit the DHA Privacy and Civil Liberties Office website at health.mil/Military-Health-Topics/Privacy-and-Civil-Liberties.

To learn more about how VA protects your health care information, review the Veterans Health Administration (VHA) Notice of Privacy Practices at https://www.va.gov/vhapublications/.

If you have additional questions or would like general information about privacy across all areas of VA, visit the VA Privacy Service at www.oprm.va.gov/privacy/.

Appendix C:
National Resource Directory (NRD)

The National Resource Directory (NRD) at www.NRD.gov provides access to services and resources at the national, state, and local levels to support recovery, rehabilitation, and community reintegration. Wounded warriors, Service members, Veterans, families, and caregivers can find information on a variety of topics such as health care, employment, and education.

The NRD is a partnership among the Departments of Defense, Labor, and Veterans Affairs. The information contained within the NRD is from federal, state, and local government agencies; Veterans and military service organizations; non-profit and community-based organizations; academic institutions; and professional associations that provide assistance to wounded warriors and their families. Local resources can be found by entering your zip code.

Visitors can find information on a variety of topics and access to a full range of medical and non-medical services and resources to assist you and your family in achieving your personal and professional goals.

The information in the NRD is organized into 12 major categories, including:

- American Red Cross
- Benefits & Compensation
- Portfolio of Veterans Benefits
- Community of Care
- Education & Training
- Employment
- Family & Caregiver Support
- Health
- Homeless Assistance
- Housing
- Military Adaptive Reconditioning
- Other Services & Resources
- Transportation & Travel

For more information on the NRD, visit www.NRD.gov.

NATIONAL RESOURCE DIRECTORY

An Online Partnership for Wounded, Ill and Injured Service Members, Veterans, Their Familes and Those Who Support Them

Appendix D: DoD-Approved Military Service Organizations, Veteran Service Organizations, and Military-Supporting Nonprofits

While there are many Military Service Organizations (MSOs), Veteran Service Organizations (VSOs), and Military-Supporting Nonprofits, the list below, which is updated periodically, includes the currently DoD-approved organizations.

1. Air Force Association
2. American Legion
3. American Red Cross
4. AMVETS
5. Armed Services YMCA
6. Association of the United States Army
7. Blue Star Families
8. Disabled American Veterans
9. Fisher House Foundation, Inc.
10. Iraq and Afghanistan Veterans of America
11. Institute for Veterans and Military Families
12. Marine Corps League
13. Military Child Education Coalition
14. Military Officers Association of America
15. Military Order of the Purple Heart
16. National Guard Association of the United States
17. National Military Family Association
18. Navy League of the United States
19. Operation Homefront
20. Reserve Officers Association
21. Student Veterans of America
22. Tragedy Assistance Program for Survivors
23. U.S. Chamber of Commerce Foundation (Hiring Our Heroes Program)
24. USO, Inc.
25. Veterans of Foreign Wars of the United States
26. Vietnam Veterans of America
27. Wounded Warrior Project

A complete listing of all Veteran Service Organizations can be found at http://www.va.gov/vso/index.asp.

Appendix E: Reintegration To Civilian Life Resources

Organization/Program	Resources
DoD Transition Assistance Program (TAP)	General Resource: www.dodtap.mil DOL Employment Workshop Participant Guidebook www.dol.gov/vets/programs/tap/
VA Transition Assistance Program (TAP)	TAP Website https://www.benefits.va.gov/tap/tap-index.asp
Department of Veterans Affairs	VA Benefits and Services https://www.benefits.va.gov/tap/ Service Member Benefits https://www.va.gov/service-member-benefits/ VA.gov https://www.va.gov/ Chapter 36 Benefits https://www.va.gov/careers-employment/education-and-career-counseling/
Department of Education	Vocational Rehabilitation (VR) and Supported Employment (SE) Centers https://rsa.ed.gov/
Veteran Readiness and Employment	Find your State VR and SE agency on the Job Accommodation Network site at www.askjan.org, or call 1-800-526-7234 (TTY: 1-877-781-9403). State Offices of Veterans Affairs https://www.va.gov/statedva.htm
Department of Veterans Affairs Careers and Employment	https://www.va.gov/careers-employment/
Department of Labor Veteran Services	https://www.dol.gov/agencies/vets https://www.dol.gov/general/jobs/veterans
American Job Centers (AJC)	Find your local AJC at www.servicelocator.org
AJC Job Search	https://www.careeronestop.org/JobSearch/job-search.aspx

Organization/Program	Resources
Military Spouse Employment Partnership (MSEP)	https://msepjobs.militaryonesource.mil/msep/
My Next Move for Veterans	www.MyNextMove.org
State Department of Labor	Disabled Veterans Outreach Program (DVOP) Specialists https://www.dol.gov/agencies/vets/vetoutcomes
Regional ADA National Network Centers	Contact them at 1-800-949-4232 or visit their website at: www.adata.org
Disability Resources	Office of Personnel Management, Federal Employment of People with Disabilities https://www.opm.gov/policy-data-oversight/disability-employment/ Department of Labor https://www.dol.gov/general/topic/disability www.dol.gov/odep/pubs/misc/advance.htm
Veterans' Preference Information	General Information: www.fedshirevets.gov/job/vetpref/index.aspx Veterans' Preference Advisor: www.dol.gov/elaws/vetspref.htm
Post-9/11 GI Bill	GI Bill Hotline: 1-888-GIBILL-1 (1-888-442-4551) General Information: https://www.va.gov/education/about-gi-bill-benefits/post-9-11/
Yellow Ribbon Program	https://www.va.gov/education/about-gi-bill-benefits/post-9-11/yellow-ribbon-program/
U.S. Department of Education, Federal Student Aid	StudentAid.gov
Department of Education – Veterans Upward Bound (VUB) Program	https://www2.ed.gov/programs/triovub/index.html
Troops to Teachers	www.proudtoserveagain.com

Organization/Program	Resources
Uniformed Services Employment and Reemployment Rights Act (USERRA)	General Information http://www.dol.gov/vets/programs/userra USERRA and the ADA http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm
DD Form 214 (Certificate of Release or Discharge from Active Duty)	National Personnel Records Center at 1-314-801-0800 to request an application for replacement of your DD 214 http://www.archives.gov/veterans/military-service-records/
DD Form 2586 (Verification of Military Experience and Training)	Verification of Military Experience and Training (VMET) https://milconnect.dmdc.osd.mil/milconnect/public/faq/Training-VMET Download Form at: http://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd2586.pdf ***Service-specific Administrative Contacts***: *Army VMET On-Line Help Desk* vmet@resourceconsultants.com *Navy* p662c12a@persnet.navy.mil Call: 1-901-874-4384, or DSN: 882-4384 *Air Force* Call: 1-800-581-9437 *Marine Corps* Call: 1-877-4-USMCWW (487-6299)
DD eForm 2648 – Service Member Pre-Separation / Transition Counseling and Career Readiness Standards eForm for Service Members Separating, Retiring, Released from Active Duty (REFRAD)	https://www.dodtap.mil/forms.html

Appendix F:
VA-Recognized Service Organizations

The following is a listing of national, regional, or local organizations recognized by the Secretary of Veterans Affairs in the preparation, presentation, and prosecution of claims under laws administered by the Department of Veterans Affairs. Membership in an organization is not a prerequisite to appointment of the organization as claimant's representative.

African American PTSD Association
American Legion
American Red Cross
AMVETS
American Ex-Prisoners of War, Inc.
American GI Forum, National Veterans Outreach Program
Armed Forces Services Corporation
Army and Navy Union, USA
Associates of Vietnam Veterans of America
Blinded Veterans Association
Catholic War Veterans of the U.S.A.
Disabled American Veterans
Fleet Reserve Association
Gold Star Wives of America, Inc.
Jewish War Veterans of the United States of America
Legion of Valor of the United States of America, Inc.
Marine Corps League
Military Officers Association of America
Military Order of the Purple Heart
National Amputation Foundation, Inc.
National Association of County Veterans Service Officers, Inc.
National Association for Black Veterans, Inc.
National Veterans Legal Services Program
Navy Mutual Aid Association
Paralyzed Veterans of America, Inc.
Polish Legion of American Veterans, U.S.A.
Swords to Plowshares, Veterans Rights Organization, Inc.
The Retired Enlisted Association
The Veterans Assistance Foundation, Inc.
The Veterans of the Vietnam War, Inc. & The Veterans Coalition
United Spinal Association, Inc.
Veterans of Foreign Wars of the United States
Vietnam Era Veterans Association
Vietnam Veterans of America
West Virginia Department of Veterans Assistance
Wounded Warrior Project

Note: *Although agency titles vary, all U.S. states, with the exception of Alaska, and four U.S. possessions (American Samoa, Guam, Northern Mariana Islands, and Virgin Islands) maintain Veterans service agencies which are recognized to present claims. – Source: VA Form 21-22, Aug 2015*

Appendix G: Useful Links & Resources

DoD Disability Evaluation Policy

The DoD guidance for the Disability Evaluation System process is located in the following policies:

DoDI 1332.18, Disability Evaluation System (DES)
http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/133218p.pdf

DoDM 1332.18, Vol.1, General Information and Legacy Disability Evaluation System (LDES) Time Standards
http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/133218m_vol1.pdf

DoDM 1332.18, Vol. 2, Integrated Disability Evaluation System (IDES)
http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/133218m_vol2.pdf

DoDM 1332.18, Vol. 3, Quality Assurance Program (QAP)
http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/133218vol3.pdf

Pay and Allowances

Defense Finance and Accounting Service (DFAS)
http://www.dfas.mil

DFAS Disability Retirement
http://www.dfas.mil/retiredmilitary/disability/disability.html

DFAS Travel Pay Homepage
http://www.dfas.mil/militarymembers/travelpay/information.html

DFAS Wounded Warrior Homepage
http://www.dfas.mil/militarymembers/woundedwarrior/woundedwarriorpay.html

Benefits & Resource Directories

Access and Manage Your VA Benefits and Health Care
https://www.va.gov

Military OneSource
www.militaryonesource.mil

National Resources Directory
https://www.nrd.gov/

TRICARE
http://www.tricare.mil

Care Coordination Resources

Federal Recovery Consultation Office (FRCO)
https://www.va.gov/VADODHEALTH/FRCP.asp

Recovery Care Program
http://warriorcare.dodlive.mil/wounded-warrior-resources/recovery-coordination

Crisis Lines

Military Crisis Line
https://www.veteranscrisisline.net/get-help/military-crisis-line

Veterans Crisis Line
https://www.veteranscrisisline.net/
Call: 1-800-273-TALK (8255), then Press 1
Text: 838255

Army Suicide Prevention
https://www.dspo.mil/

Navy Suicide Prevention
https://www.public.navy.mil/BUPERS-NPC/support/21st_century_sailor/suicide_prevention/Pages/default.aspx

Marine Corps Suicide Prevention
https://www.usmc-mccs.org/services/support/suicide-prevention/

Air Force Suicide Prevention Program
https://www.resilience.af.mil/

Coast Guard Suicide Prevention Program
https://www.dcms.uscg.mil/Our-Organization/Assistant-Commandant-for-Human-Resources-CG-1/Health-Safety-and-Work-Life-CG-11/Office-of-Work-Life-CG-111/Suicide-Prevention-Program

Homeless Veterans
https://www.va.gov/homeless/
Call: 1-877 4AID-VETS (1(877)424-3838)

DoD Safe Helpline: Sexual Assault Support for the DoD Community
https://www.safehelpline.org/
Call: 877-995-5247

Federal Agencies, Offices & Organizations

Social Security Administration (SSA)
www.socialsecurity.gov

- Social Security Disability Benefits for Wounded Warriors: www.socialsecurity.gov/woundedwarriors
- Disability Planner: Family Benefits: https://www.ssa.gov/planners/disability/dfamily.html

U.S. Department of Defense (DoD)
www.defense.gov/

- *DD Forms*
  - DD Form 214: https://www.archives.gov/veterans/military-service-records
  - DD Form 2586: http://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd2586.pdf
  - DD eForm 2648: https://www.dodtap.mil/forms.html
  - DD Form 2948: https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd2948.pdf
  - DHA warrior care: https://warriorcare.dodlive.mil/
  - Transition Assistance Program: www.dodtap.mil

U.S. Department of Education (ED)
www.ed.gov/

U.S. Department of Health and Human Services (HHS)
www.hhs.gov/

U.S. Department of Labor (DoL)
https://www.dol.gov/

U.S. Department of Veterans Affairs (VA)
https://www.va.gov/

- **Veterans Benefits:** http://benefits.va.gov/
- **VA Disability Compensation Information:** https://www.va.gov/disability/
- **VA Forms (searchable collection):** https://www.va.gov/vaforms/
- **VA Life Insurance:** https://www.benefits.va.gov/insurance/index.asp.
- **VA Insurance Application Forms**

Servicemembers' Group Life Insurance (SGLI)
https://www.va.gov/life-insurance/options-eligibility/sgli/

Veterans' Group Life Insurance (VGLI)
https://www.va.gov/life-insurance/options-eligibility/vgli/

Family Servicemembers' Group Life Insurance (FSGLI)
https://www.va.gov/life-insurance/options-eligibility/fsgli/

Servicemembers' Group Life Insurance Traumatic Injury Protection (TSGLI)
https://www.va.gov/life-insurance/options-eligibility/tsgli/

Service-Disabled Veterans' Insurance (S-DVI)
https://www.va.gov/life-insurance/options-eligibility/s-dvi/

Veterans' Mortgage Life Insurance (VMLI)
https://www.va.gov/life-insurance/options-eligibility/vmli/

U.S. Military Service Wounded Warrior Programs

U.S. Army Recovery Care Program
http://wct.army.mil/

U.S. Marine Corps Wounded Warrior Regiment
https://www.woundedwarrior.marines.mil

U.S. Navy Wounded Warrior
https://www.navywoundedwarrior.com/

U.S. Air Force Wounded Warrior Program
http://www.woundedwarrior.af.mil/

U.S. Special Operations Command Care Coalition
https://www.socom.mil/care-coalition/

Appendix H: Acronyms

AC = Active Component
ADA = Americans with Disability Act
AGR = Active Guard Reserve
AFW2 = Air Force Wounded Warrior Program
AJC = American Job Centers
AR = Active Reserve
AR = Military Adaptive Reconditioning Program
ARCP = U.S. Army Recovery Care Program
BAH = Basic Allowance for Housing
BAS = Basic Allowance for Subsistence
BDD = Benefits Delivery at Discharge program
C&P = Compensation and Pension
CCA = Clinical Care Advocates
CHAMPVA = Civilian Health and Medical Program of the Department of Veterans Affairs
CMT = Care Management Team
COOL = Credentialing Opportunities Online
CRD = Caregiver Resource Directory
CRDP = Concurrent Retirement and Disability Pay
CRSC = Combat-Related Special Compensation
CWVV = Children of Women Vietnam Veterans
DDS = Disability Determination Services
DEA = Dependents' Educational Assistance
DEERS = Defense Enrollment Eligibility Reporting System
DES = Disability Evaluation System
DFAS = Defense Finance and Accounting Service
DFAS-CL = DFAS-Cleveland Center
DHA = Defense Health Agency
DISC = District Injured Support Coordinators
DoD = Department of Defense
DODI = DoD Instruction
DoL = Department of Labor
DOLEW = DOL Employment Workshop
DRAS = Disability Rating Activity Site
DTMO = Defense Travel Management Office
DVOP = Disabled Veterans Outreach Program
E2I = Employment and Education Initiative
ECHO = Extended Care Health Option
ED = Department of Education
EFMT = Emergency Family Member Travel
EHHC = ECHO Home Health Care
FAC = Family Assistance Center
FAP = Family Advocacy Program
FLO = Family Liaison Officer
FMLA = Family Medical Leave Act
FPEB = Formal Physical Evaluation Board
FRC = Federal Recovery Consultant
FRCO = Federal Recovery Consultant Office
FSA = Family Separation Allowance
FSA = Federal Student Aid
FTS = Full Time Support
GSA = General Services Administration
HDP-L = Hardship Duty Pay-Location
HFP = Hostile Fire Pay
HHS = Department of Health and Human Services
HOR = Home Of Record
HSP&O = Health Services Policy and Oversight
I-I = Inspector-Instructor
IADT = Initial Active Duty for Training
ICP = Interagency Comprehensive Plan
IDES = Integrated Disability Evaluation System
IDP = Imminent Danger Pay (Chap. 4 of this Handbook)
IDP = Individual Development Plan (Chap. 9 of this Handbook)
IPEB = Informal Physical Evaluation Board
IRA = Individual Retirement Account
ITA = Invitational Travel Authorizations
ITO = Invitational Travel Orders
LC = Lead Coordinator
LDES = Legacy Disability Evaluation System
LOD = Line of Duty

LVER = Local Veterans Employment Representative

MAR2 = Military Occupational Specialty (MOS) Administrative Retention Review

MarDet = Marine Detachment Team

MCM = Medical Case Manager

MSC = Military Services Coordinator

MEB = Medical Evaluation Board

MFLC = Military and Family Life Counseling Program

MGIB = Montgomery GI Bill

MGIB-SR = Montgomery GI Bill – Selected Reserve

MSEP = Military Spouse Employment Partnership

MST = Military Sexual Trauma

MSO = Military Service Organization

MYCAA = My Career Advancement Account

MSEP = Military Spouse Employment Partnership

MTF = Military Treatment Facility

NADL = Native American Direct Loan

NARSUM = Narrative Summary

NCM = Nurse Case Manager

NDAA = National Defense Authorization Act

NMA = Non-Medical Attendant

NMCM = Non-Medical Care Manager

NPSP = New Parent Support Program

NPWE = Non-Paid Work Experience

OEF = Operation Enduring Freedom

OIF = Operation Iraqi Freedom

OMCC = Operation Military Child Care

OPM = Office of Personnel Management

OSGLI = Office of Servicemembers' Group Life Insurance

OTJ = On-the-Job

OWF = Operation Warfighter

PAC = Pay and Allowance Continuation

PCS = Permanent Change of Station

PDS = Permanent Duty Station

PEB = Physical Evaluation Board

PEBLO = Physical Evaluation Board Liaison Officer

PCM = Primary Care Manager

P & T = Permanent & Total

PSD = Personnel Support Detachment

PTDY = Permissive Temporary Duty

PTS = Post Traumatic Stress

PTSD = Post Traumatic Stress Disorder

RC = Reserve Component

RCC = Recovery Care Coordinator

RCP = Recovery Coordination Program

RSA = Rehabilitation Services Administration

RPA = Reserve Program Administrator

SAH = Specially Adapted Housing

S-DVI = Service-Disabled Veterans Insurance

SBP = Survivor Benefit Plan

SCAADL = Special Compensation for Assistance with Activities of Daily Living

SE = Supported Employment

SGA = Substantial Gainful Activity

SGLI = Servicemembers' Group Life Insurance

SHA = Special Housing Adaptation

SOF = Special Operations Forces

SMC = Special Monthly Compensation

SSA = Social Security Administration

SSDI = Social Security Disability Insurance Program

SSI = Supplemental Security Income

TA = Tuition Assistance

TAMP = Transitional Assistance Management Program

TAP = Transition Assistance Program

TBI = Traumatic Brain Injury

TCS = Temporary Change of Station

TCM = Transition and Care Management

TDRL = Temporary Disability Retirement List

TDY = Temporary Duty

TRA = Temporary Residence Adaptation

TSGLI =Service members' Group Life Insurance Traumatic Injury Protection Program

TSP = Thrift Savings Plan

TTT = Troops to Teachers

USDA = U.S. Department of Agriculture

USERRA = Uniformed Services Employment and Reemployment Rights Act

USSDP = Uniformed Services Savings Deposit Program

USSOCOM = U.S. Special Operations Command

VA = Veterans Affairs

VASRD = VA Schedule for Rating Disabilities

VMLI = Veterans' Mortgage Life Insurance

VBA = Veterans Benefits Administration

VEC = Veterans Employment Center

VHA = Veterans Health Administration

VHIC = Veteran Health Identification Card

VJB = Veterans Job Bank

VMET = Verification of Military Experience and Training

VR = Vocational Rehabilitation

VR&E = Veteran Readiness and Employment

VRC = Vocational Rehabilitation Counselor

VGLI = Veterans' Group Life Insurance

VSO = Veteran Service Organization

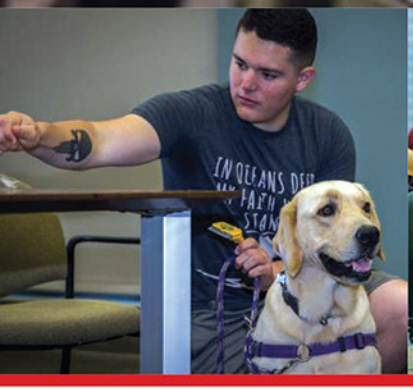
VUB = Veterans Upward Bound

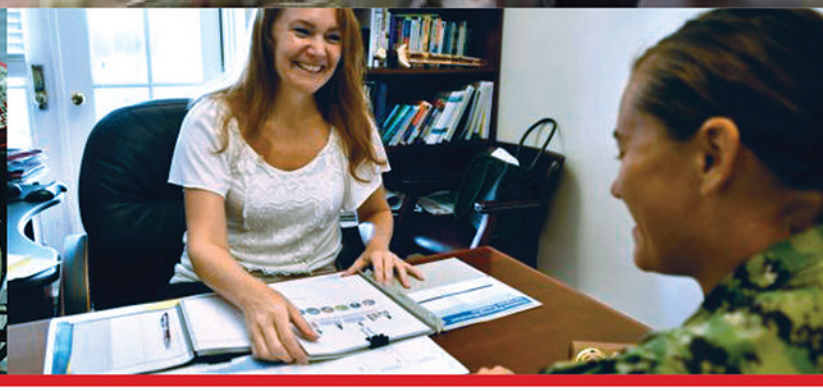
SRU = Solider Recovery Unit

WTU = Warrior Transition Unit

WWPMT = Wounded Warrior Pay Management Team

WWR = Wounded Warrior Regiment





https://warriorcare.dodlive.mil/