



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 – Care Management Team (CMT), Service Wounded Warrior Programs, Care Coordinators, and Service Animals – 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 providing 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 disability evaluation process; the Legacy Disability Evaluation System (LDES) process, a DoD-only disability 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.

CHAPTER 9: REINTEGRATION INTO CIVILIAN LIFE

This chapter discusses 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 E* 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, Veteran Readiness & Employment (VR&E), loans, etc.) that may be available to you and/or your family.

APPENDICES

- **Appendix A:** TRICARE Benefits and Plans
- **Appendix B:** Health Care Privacy Protections
- **Appendix C:** National Resource Directory (NRD)
- **Appendix D:** DoD-Approved Military Service Organizations, Veterans Service Organizations, and Military-Supporting Nonprofits

- **Appendix E:** Reintegration to Civilian Life Resources
- **Appendix F:** VA-Recognized Service Organizations
- **Appendix G:** Useful Links & Resources
- **Appendix H:** Acronyms

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

Mail:
Health Services Policy & Oversight (HSP&O)
7700 Arlington Blvd
Falls Church, VA 22042

For feedback and/or questions regarding this handbook, please contact the Office of the Assistant Secretary of Defense for Health Affairs.

Chapter 1: Recovery

This chapter is organized into four sections – Section 1: Care Management Team (CMT), 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: CARE MANAGEMENT TEAM (CMT) STRUCTURE

When a Service member becomes wounded, ill, and/or injured, a CMT, 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 CMT 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, to include the United States Special Operations Command (USSOCOM), operates wounded warrior programs to help

wounded, ill, and/ or injured Service members during rehabilitation, recovery, and reintegration to active duty or to civilian life.

Reserve Component Managed Care-Mobilization/Training (RCMC-M/T) is a voluntary, short-term medical program specific to Army National Guard Soldiers, and is aimed at resolving low-risk, low-acuity, non-complex medical conditions. The program is designed to increase unit readiness by providing an avenue for Soldiers with a service-connected illness, injury, or disease to receive medical treatment and follow-up care to return to a fit-for-duty status, or, if required, reach a Medical Retention Determination Point (MRDP).

The term "service-connected" means incurred or aggravated as documented by an approved Line of Duty (LOD) Investigation, while on Title 32 M-Day Status (RCMC-T) or Title 10 mobilization (contingency) orders (RCMC-M). To be considered for this short-term program, Soldiers must be recommended by their state Case Management team and have a condition that can be resolved or managed successfully while in this program.

Their medical records will undergo a comprehensive review by medical authorities to verify the program's effectiveness. Once approved, Soldiers will be placed on Title 10 U.S.C 12301(h) orders to facilitate their recovery. While on orders, the Soldiers live in their home communities, report to a local duty location (armory) under a Duty Site Supervisor to perform duties in support of Title 10 activities and attend regularly scheduled medical appointments for required care and services while

receiving active duty (AD) pay and benefits.

NOTE: Title 10 AGR or Title 32 AGR Soldiers are ineligible for the program.

They primarily assist with non-medical support issues, such as:

- Child and youth programs
- Career and education goals
- Rehabilitation and recovery 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 Disorder (PTSD) and Traumatic Brain Injury (TBI) support services
- Respite care
- Transportation needs
- Other non-medical support services

The 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 for 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).

Medical Command (MEDCOM), Army Recovery Care Program (ARCP) serves as the U.S. Army proponent to oversee and synchronize policy, advocacy, budget, and force structure planning for warrior care initiatives as an enabler of Army Readiness. ARCP is dedicated to wounded, ill, and injured 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.

SRUs were developed in 2007 to provide better care and management to wounded, ill, and/ or 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 (RC) 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 Nurse Case Manager (NCM), a Squad Leader, and a Soldier Recovery Medical Manager (SRMM). The Triad of Care coordinates clinical and non-clinical issues to successfully transition Soldiers and their families back to active duty or civilian life.

Eligible Active, Army Reserve and National Guard Soldiers are paired with an RCC who guides them throughout their recovery and transition process. They continually collaborate to set goals to meet the needs and abilities of the individual Soldier and their Family, then monitor and adjust as needed to promote a successful transition from the Army. All assigned/attached SRU Soldiers, as well as severely impacted Soldiers outside of the SRU, are assigned an RCC. Inside the SRU, the RCC is integrated with the SRU leadership, Triad of Care and interdisciplinary teams in the development and management of the Soldiers CRP. The RCC will provide non-medical support throughout the Soldiers process and eventual transition from the SRU.

Once medically retired, eligible Veterans, to include those placed on the Temporary Disability Retired List (TDRL), are transferred to a regional RCC to link them with the Department of Veterans Affairs and other Federal, State and local agencies. The Veteran and their Family/Caregiver will continue to receive support and services until they have been placed on the Permanent Disability Retired List (PDRL), are considered fully transitioned, and meet the criteria to become Alumni where they can reach back for support, if necessary.

As the 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.

Contact Information	Official website: www.arcp.army.mil
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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 medical treatment facilities and VA Polytrauma Rehabilitation Centers. It provides and facilitates non-medical care to combat and non-combat wounded, ill, and/or 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, 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 days a year
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U.S. Navy Wounded Warrior



Navy Wounded Warrior (NWW) coordinates the non-medical care of seriously wounded, ill, and injured Sailors and Coast Guardsmen and provides resources and support to caregivers.

The program provides proactive and individually tailored support and resources throughout the continuum of care, including comprehensive recovery plans, adaptive reconditioning opportunities, family and caregiver respite, and pay and personnel assistance. This enables Sailors and Coast Guardsmen to focus on their recovery goals and well-being, encourages retention and return to duty, and supports a smooth transition to the Department of Veterans Affairs when a medical condition prohibits continued service.

Eligibility for NWW is not limited to Sailors and Coast Guardsmen with combat-related wounds or injuries; it also encompasses those with serious, non-combat related injuries or serious physical or psychological illnesses (e.g., cancer, mental health, motor vehicle accidents, etc.) Participation is voluntary and members must be enrolled to take advantage of services provided.

Referrals may be received from a variety of sources including the Service member or their command, peers, medical staff, Fleet and Family Support Center (FFSC) personnel, or family members. The referral form and program contact information are available on the NWW website. NWW Headquarters is located at the Washington Navy Yard. NWW Regional staff, including Non-Medical Care Managers, RCC's, and Transition

Coordinators, are co-located at FFSCs and treatment facilities throughout the US, allowing for close collaboration with Sailors and Coast Guardsmen, families, and caregivers, commands, and medical staff.

Contact Information

Official website:

<http://www.navywoundedwarrior.com>

Email: navywoundedwarrior.ftc@navy.mil

Phone: 1-855-628-9997

Contact Information

Official website: www.woundedwarrior.af.mil

Phone: 1-800-581-9437

(7:30 AM. – 5:00 PM Central Time)

Note: References to Air Force include all Department of the Air Force Personnel, including personnel assigned to U.S. Space Force.

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, and/or injured Service members and their

families, providing a model advocacy program in order to enhance their Quality of Life (QoL) and strengthen the overall readiness of Special Operations. Central to this mission is comprehensive non-medical recovery services for SOF wounded, ill, and/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 recovery, rehabilitation, reintegration (return to duty), military retirement or transition into the civilian community, and sustainment.

SOF wounded, ill, and/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 or 1-813-826-8888

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 PTSD, TBI, and mental health challenges. Eligible Airmen who wish to be enrolled should visit the AFW2 website or call for information and enrollment instructions. Once enrolled, each Wounded Warrior will be assigned a local CMT consisting of a RCC, Non-Medical Care Manager (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 re-integration. The CMT 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 members. Together the CMT 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, and/or illnesses. This CMT aims to retain highly skilled Service members; but if retention is not possible, they will ensure support through retirement or separation, and beyond.

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. A Recovery Care Coordinator (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 childcare 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.

Recovery Care Coordinators (RCCs)

Each 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. RCC's are located at various military installations and regionally throughout the country and overseas.

The RCC develops a Comprehensive Recovery Plan (CRP) 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 (AT), education, employment, or housing. The recovery team works together to develop, implement, and adjust the CRP; and provides access to the services required during recovery, rehabilitation, and reintegration. With the Commander, the RCC has the ultimate responsibility for ensuring the full development and implementation of the CRP. If the Service member transitions to VA care, the CRP is shared with the VA.

Medical Care Case Manager (MCCM)

Like RCCs, MCCMs 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 CRP.

Federal Recovery Consultants (FRCs)

The [VA's Federal Recovery Consultation Office \(FRCO\)](#) provides enterprise-level longitudinal consultation services and assistance to VA and DoD Care Management Teams (CMTs), and select Service members, Veterans (SM/V), and their families.

Nine FRCs are located at select VA and DoD sites and provide virtual consultation and advocacy services regardless of SM/V location, medical treatment, geographic location of injury, place of medical diagnosis, or military/Veteran status. FRCs provide SM/V-centric services that assist with coordinating benefits, services, and care that are aligned with SM/V needs.

Think of your recovery team, your CRP, and your Service Wounded Warrior Programs your own Command Center, ensuring 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 Care Management Team (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 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.*

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.

For more information, visit

<https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/130027p.pdf>, Published January 7, 2016.

Military Adaptive Sports Program

The Military Adaptive Sports Program (MASP) 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. MASP is part of each Service wounded warrior program.

For more information, please visit website: [https://warriorcare.dodlive.mil/Care-Coordination/Military-Adaptive-Sports- Program/](https://warriorcare.dodlive.mil/Care-Coordination/Military-Adaptive-Sports-Program/)



Chapter 2: Your Medical Care

While you are on active duty, your medical care is provided under the health plan TRICARE Prime at the closest medical facility to your location that best meets your needs and is a TRICARE-authorized provider. 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)

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 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 conditions such as Post Traumatic Stress Disorder (PTSD).

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 9.6 million Uniformed Services members (Active Duty, Reserves, National Guard, or Retired) and their families. It provides comprehensive coverage to beneficiaries, including health plans, special programs, prescriptions, and dental plans.

Not sure about your TRICARE coverage?

Contact your regional contractor or visit milConnect. If you do not already have TRICARE benefits, you will need to contact your Service personnel office 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://tricare.mil/Plans>

Table 1: TRICARE Plans Eligibility for Service Members Only

TRICARE Plans	Active	Guard	Reserve
TRICARE Prime*	X		
TRICARE Prime Remote*	X		
TRICARE Prime Overseas*	X		
TRICARE Prime Remote Overseas*	X		
TRICARE Reserve Select		X	X
US Family Health Plan**		X	X

***Note:** Activated Reserve and National Guard members and their families who are called to active duty service for more than 30 consecutive days may be eligible for the TRICARE Prime, TRICARE Prime Remote, TRICARE Prime Overseas, or TRICARE Prime Remote Overseas plans.

Table 2: TRICARE Programs Eligibility for Service Members Only

TRICARE Plans	Active	Guard	Reserve	Other
TRICARE Active Duty Dental Program*	X			
TRICARE Dental Program		X	X	X
TRICARE Transitional Assistance Management Program (TAMP)		X	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. Additionally, if you are a National Guard or Reserve member, review 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 being registered in the Defense Enrollment Eligibility Reporting System (DEERS). Active duty Service members are automatically registered in DEERS, but they must ensure that their eligible family members are registered and enrolled in a plan. It is critical that family members be accurately registered in DEERS and enrolled in a TRICARE plan as approval of TRICARE claims for their health care expenses depends upon 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 a Military Treatment Facility (MTF) or other medical facility away from your Permanent Duty Station (PDS), you may be eligible for travel and transportation allowances.

Additionally, your family members or designated individuals may be eligible to receive travel orders, which authorize per diem to offset costs for lodging, meals, and incidental expenses while they support your recovery. Eligibility is dependent upon the seriousness of your illness/injury and must be approved by military medical authority.

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 (RC) 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.travel.dod.mil/Travel-Transportation-Rates/Per-Diem>.

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, and may 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. Note: ITA or EFMT must be issued before the family member begins travel or risk not getting reimbursed.

Each Service handles the process of issuing orders and reimbursing expenses in a slightly different manner.

Contact your Service's 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:** A Casualty Assistance Representative (CAR) 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 1-800-525-0102, Option 2, Option 1.
- **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 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 with a qualified serious injury or illness incurred or aggravated during active duty. The employee must be the Service member's/Veteran's spouse, child, parent, or other next of kin. A covered member is one who is undergoing medical treatment, recuperation, or therapy for a qualifying serious injury and/or illness and either:

- is a current member of the Armed Forces, including a member of the National Guard or Reserves in outpatient status, or on the temporary disability retired list, or
- a Veteran of the Armed Forces including the National Guard or Reserves who was discharged or released within a five-year period before the family member first takes military caregiver leave to care for the veteran.

The FMLA also entitles eligible employees of covered employers to take time off to care for the employee's spouse, child, or parent who has a serious health condition.

Visit: <https://www.dol.gov/agencies/whd/fact-sheets/28m-fmla-military-family> Fact Sheet for information on military family leave under the FMLA. The U.S. Department of Labor's Wage and Hour Division (WHD) enforces the FMLA for most employees. To locate the nearest WHD office,

visit:

<https://www.dol.gov/agencies/whd/contact/local-offices> or call 1-866-4US-WAGE (1-866-487-9243).

or call 1-866-4US-WAGE (1-866-487-9243).

Health Care Privacy Protections

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

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 Military OneSource is your 24/7 connection to information, answers, and support one source for your best Mil Life. 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 members (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: www.MilitaryOneSource.mil or calling 800-342-9647.

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, telephonically, or virtually, when possible.

For more information visit:

<https://installations.militaryonesource.mil/view-all>.

Additionally, Family Assistance Centers (FACs) are 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

Defense Health Agency (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/>

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

The Military and Family Life Counseling (MFLC) 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.

MFLC 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 childcare 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://public.militarychildcare.csd.disa.mil/mcc-central/mcchome#/>

Fee assistance programs include:

- **Military Child Care 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 childcare.
- **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 childcare to support the unique childcare 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-assis-tancerespite/military-families/army/>
- **Marine Corps:** <https://usa.childcareaware.org/fee-assistancerespite/military-families/marines/>
- **Navy:** <https://usa.childcareaware.org/fee-assis-tancerespite/military-families/navy/>
- **Air Force:** <https://usa.childcareaware.org/fee-as-sistancerespite/military-families/air-force/>

For additional programs that may apply to your family, visit: <https://childcareaware.org/resources>

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 (PSB-CY), 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.

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

The FAP works to prevent and address domestic abuse, PSB-CY, and child abuse and neglect by providing education and awareness through the following programs:

- **Victim Advocacy:** The Victim Advocacy Program provides services to military-affiliated victims of domestic abuse and non-offending parents in child abuse cases. Advocacy services are provided with the goal

of increasing victim safety and autonomy. Services include responding to victims' immediate and ongoing safety concerns providing information about programs and services available to victims and their children in civilian and military communities, court accompaniment, and empowering victims and providing victims with ongoing support and referrals.

- **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. The NPSP primary goal is to enhance their Quality of Life (QoL) by empowering them to meet the challenges of parenthood, while maintaining a military lifestyle. The program, which is housed at the Military 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. NPSP professionals know that raising a family is very rewarding and can sometimes be challenging. Home visitors are trained and experienced 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 health family.
- **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. The FAP also provides trauma-

informed assessment and non-medical counseling services to individuals who are involved in alleged incidents of child abuse, domestic abuse, and PSB-CY and are eligible to receive services at an MTF.

- **Public awareness campaigns:** The FAP works to help communities learn to recognize domestic and child abuse, as well as PSB-CY, 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 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 has been 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 (AT) 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:

<https://www.tricare.mil/Plans/SpecialPrograms/EC/EO>

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 Benefit. The Service member's Primary Care Manager (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
- Services provided by a home health aide
- Physical therapy, occupational therapy, and speech-language pathology services
- Medical social services
- Teaching and training activities
- 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:

<https://www.tricare.mil/Plans/SpecialPrograms/EC/EO/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 (TA). The scholarship supports military spouses pursuing licenses, certificates, certifications, or associate 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 active duty orders.

For more information, including eligibility criteria/exclusions and program benefits/exclusions, visit: <https://www.careerstep.com/lp/ppc/mycaa-funds/>.

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/portal/>.

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 (SUD) 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. All TRICARE-eligible beneficiaries may access the mental health benefit. How you get care may depend upon your beneficiary category and your health plan. Check with your regional contractor to see if you need a referral and/or pre-authorization. For more information visit www.tricare.mil/mentalhealth.

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 (MHS). Some 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:

<https://tricare.mil/CoveredServices/IsItCovered/SubstanceUseDisorderTreatment>.

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 (LOD), who have a serious injury and/or illness that has resulted in or may result in, a physical disability or an extraordinary physical or psychological condition, the condition leaves the Service member homebound, and requires frequent primary caregiver interventions (more than two during the eight-hour period per day that the primary caregiver would normally be sleeping). 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 per day, for five days a 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 PCM, or Medical Case Manager (MCM) who works with the PCM, submits a referral to approving authorities to review and approve respite care when the care plan includes frequent primary caregiver interventions.

For more information, visit:

<https://tricare.mil/respite>.

SECTION 15: VA PROGRAM OF COMPREHENSIVE ASSISTANCE FOR FAMILY CAREGIVERS (PCAF)

Family members may be eligible to receive a stipend when they are designated as the primary caregiver of a Veteran. Veterans who qualify for the PCAFC include those who:

- have a total VA disability rating of 70% or higher; and
- were discharged from the military or has a future medical discharge date; and
- need at least six months of continuous, in-person care services; and
- is enrolled in VA health care.

NOTE: Active duty Service members undergoing a medical discharge will need to apply for VA health care before or after submitting their application for caregiver assistance.

Active duty Service members receiving Special Compensation for Assistance with Activities of Daily Living (SCAADL) (see Chapter 4) are encouraged to contact a VA Liaison for healthcare and to apply for PCAFC. While Service members can apply for PCAFC while still in service, they cannot receive the PCAFC and SCAADL benefits simultaneously. For more information about the VA Liaison program visit

https://www.va.gov/POST911VETERANS/VA_Liaison_Program.asp

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 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 can 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 Principal Deputy Under Secretary of Defense for Personnel and Readiness.
- You return for assignment to somewhere 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 (FSA) are not included in PAC entitlements and have separate eligibility requirements.

Basic Allowance for Subsistence (BAS)

BAS is an allowance 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 the BAS is adjusted based upon the increase of the price of food. 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 if you are not issued a meal card to eat in a military dining facility.

For more information, visit:

<https://comptroller.defense.gov/Portals/45/documents/fmr/current/07a/07a25.pdf>.

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 (RC), 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 a Military Treatment Facility (MTF) unless you receive Permanent Change of Station (PCS) orders. Per the current DoD Financial Management

Regulation (FMR) Vol 7A Chapter 26, paragraph 5.1 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.

For more information, visit:

<https://www.travel.dod.mil/allowances/basic-allowance-for-housing>

180-Day Family Housing Extension

If you are occupying family housing and separating from active duty, you will 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 involuntarily serve in an unaccompanied tour of duty, you may be entitled to an FSA of \$250 per month to defray a reasonable amount of extra expenses that result from such separation. FSA accrues from the day of departure from the home station and ends the day prior to arrival at the home station. FSA is an entitlement that you may receive if the movement of your dependents is not authorized to or near your PDS at government expense and your dependents do not reside at or near that PDS, or when you are otherwise separated from your dependents for a continuous period of more than 30 days due to military orders. This allowance is in addition to any per diem or other entitlements you receive.

The pay stops the day before you return to your permanent duty location or HOR. If you are TAD/TDY and your dependents visit for more than 30 consecutive days or more, you will not receive FSA for the time that your dependents are with you.

For more information, visit:

<http://militarypay.defense.gov/PAY/Allowances/fsa.aspx>

Hardship Duty Pay Location (HDP-L)

HDP-L is paid to you while you are assigned outside of the continental United States in Quality of Life (QoL) Hardship locations where QoL 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 are eligible for HDP-L from day of arrival if the location is your PDS, or on the 31st day if you are TAD/TDY to the location (HDP-L is retroactive to the date of reporting). While you must serve for 30 consecutive days in a designated area to receive HDP-L, PAC eligibility may apply 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 at the same time.

HFP is paid if you are subjected to hostile fire, explosion of hostile mines, or other hostile action and you perform duty in a hostile fire area, are exposed to a hostile fire event, or are on duty during a month in an area in which a hostile event occurred that placed you in grave danger of physical injury. Additionally, your commander may also authorize HFP if you are killed, injured, or wounded by hostile fire, mines, or any hostile action. 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

An RC 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 (LOD) is entitled to full pay and allowances, including all incentive and special pays if otherwise eligible less than the amount of earned civilian income for the same period.

Additionally, an RC 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 (not to exceed the amount of lost civilian 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 LOD. Incapacitation pay is limited to six months, unless the Secretary of the Military Department determines an extension is justified in the interest of fairness and equity.

(Note: Incapacitation Pay will not be offset by VA benefits received.)

For more information, visit:

<https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/124101p.pdf>.

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

SCAADL compensation is paid to eligible Service members with a permanent catastrophic injury and/or illness, incurred or aggravated in the LOD, to offset the economic burden borne by their primary caregivers providing non-medical care, support, and assistance. If in the absence of caregiver assistance, the 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 tiered system that reflects the amount of care required by the Service member and provided by his or her caregiver.

Active duty Service members are also eligible to participate in the VA Caregiver Support Program discussed below in Chapter 10 Section 13; however, the Service member cannot receive both the VA benefit and SCAADL simultaneously.

Additional SCAADL information and guidance can be found at the following website:

<http://warriorcare.dodlive.mil/benefits/scaadl>.

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 also receiving IDP or HFP. Amounts up to \$10,000 may be deposited, earning 10% interest annually (applied quarterly at 2.5%). To participate in the program, you must be receiving HFP/IDP and be deployed for at least 30 consecutive days, or one day in each for 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, Defense Finance and Accounting Service (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 or email at: CCL-SDP@dfas.mil.

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) from eligible retirement plans (401(k), 403(b), or traditional Individual Retirement Account (IRA)) into your TSP account after you are discharged 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 59.5 (59 1/2). If you do not wish to leave your funds invested with the TSP, one option, in addition to withdrawing funds, is to roll over your TSP account balance into an 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. Additionally, you may designate beneficiaries to receive the proceeds from your TSP account upon your death.

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 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 RC.

For more information about TA Top-Up, visit: <https://www.va.gov/education/about-gi-bill-benefits/how-to-use-benefits/tuition-assistance-top-up/>

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

- **Army:**
<https://www.eis.army.mil/programs/armyignited>
- **Marine Corps:**
<https://www.marines.com/being-a-marine/benefits/education.html>
- **Navy:**
<https://www.navycollege.navy.mil>
- **Air Force:**
<https://www.airforce.com/careers/pay-and-benefits>



SECTION 5: SERVICEMEMBERS' GROUP LIFE INSURANCE TRAUMATIC INJURY PROTECTION (TSGLI)

If you have **Servicemembers' Group Life Insurance (SGLI)**, you are automatically enrolled in the TSGLI program which provides you with traumatic injury protection.

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.

The scheduled loss must have occurred within 2 years (730 days) of the traumatic injury. Additionally, there are certain circumstances under which a traumatic injury will not be covered by TSGLI.

If you feel that you qualify for a 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
- **Marine Corps:** 1-703-975-4069
- **Navy:** 1-877-270-2162
- **Air Force Active:** 1-800-525-0102
- **Air National Guard:** 1-800-525-0102
- **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, EXCHANGE, AND MORALE, WELFARE AND RECREATION (MWR) BENEFITS

Effective 1 January 2020, Section 1065 of Title 10 created the following new patron groups (Category

C) authorized access to DoD commissary, exchange, and MWR:

- Veterans who were awarded the Purple Heart
- Veterans who are former prisoners of war (POWs)
- Veterans classified by the Department of Veterans Affairs (VA) as having a service-connected disability below 100% (Veterans rated 100% already had these benefits)
- Individuals assessed, approved and designated as caregivers or family caregivers for Veterans under the VA Program of Comprehensive Assistance for Family Caregivers during their active enrollment as the caregiver or family caregiver for a veteran.

Category C members also have access to:

- Official DoD TDY and PCS lodging facilities on a space- available basis in the US (not including privatized lodging facilities)
- MWR Category B bowling activities
- MWR Category B camping activities, equipment check-out, marinas, and other Category B activities that are combined or co-located with similar Category C activities and are indistinguishable from a customer perspective

For more information regarding the Defense Commissary System visit: <https://www.commissaries.com>.

For more information regarding MWR visit: <https://www.militaryonesource.mil/leaders-service-providers/morale-welfare-and-recreation/>.

Chapter 5: Disability Evaluation



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

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 (LOD). Service members undergoing disability evaluation can expect three potential outcomes: return to duty, medically separate, or medically retire (either temporarily or permanently). DoD only compensates for unfitting conditions while VA compensates for all service-connected conditions, which are conditions incurred or aggravated during military service, not just those that are unfitting.

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 your medical status and duty limitations. Determines whether your medical condition(s) may prevent you from performing the duties of your office, grade, rank, or rating or if your condition fails your Service medical retention standards.
- **Service Member Counseling:** During these counseling sessions, you are informed of the outcomes and election options and other applicable matters as you complete each phase of the IDES. (This counseling is normally conducted by an individual designated as the Physical Evaluation Board Liaison Officer.)
- **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:** Includes the approval of your case by the Secretarial designee of your respective military service and the processing of follow-on transition actions.

In the IDES, you simultaneously complete DoD and VA disability processing, using one set of medical examinations 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. The VA conducts the medical exams and provides the disability ratings for use by both DoD and the VA.

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:

- 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.
- 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.
- 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 Permanent Change of Station (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 may be 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.

***NOTE:** The DoD considers a disability to be a medical impairment, mental disease, or physical defect which is severe enough to interfere with the Service member's ability to adequately perform his or her duties, regardless of assignment or geographic location. A medical impairment, mental disease, or physical defect standing alone does not constitute a disability. The term includes mental disease, but no such inherent defects as developmental or behavioral disorders.*

Additionally, because of unique missions and job classifications, each Service's approach varies. Speak with your chain of command and physicians to determine how your Service initiates the IDES.

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 (to include those duties remaining on a Reserve obligation for more than one 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 fail your Service's medical retention standards and may be potentially unfitting for your continued service.

After referral into the IDES, the Military Medical Treatment Facility (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.

After collecting all necessary documents, the PEBLO will refer your case to a local **VA Military Services Coordinator (MSC)**. It is your responsibility to ensure that the PEBLO has all relevant military and civilian medical documentation, to include an update Report of Medical History (DD Form 3146 Part A of the Separation Health Assessment) prior to your case being forwarded to the VA.

The MSC will review your medical records with you and help 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 your conditions. These exams may be completed by VHA, through a vendor contracted by VBA, or in rare instances by DoD.

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 IDES at your installation. At this point, your medical examinations **are your appointed place of duty for the given day and time**. If you need to reschedule an exam appointment, you must

coordinate the change with your PEBLO and/or MSC.

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



A VA-certified medical provider will perform your disability examination(s). After completing those exams, an MEB will use the examination results and other medical evidence to determine whether you have a medical condition(s) that may prevent you from reasonably performing your military duties. DoD and VA will make every effort to conduct the examinations close to where you currently reside for Reserve and Active Component members. When your examinations are complete, the VA medical provider 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 will determine whether you have a medical condition(s) that may prevent you from reasonably performing the duties of your office grade, rank, or rating. The MEB will be made up of two or more physicians. 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 can perform your military duties, you will be returned to duty in your current occupational specialty.

Otherwise, you will be referred to a PEB. This action is based on the MEB report findings, which identifies the medical condition(s) that prevent you from reasonably performing your duties or for which you fail your Service's medical retention standards.

After notification of the MEB findings, you may elect to receive an Impartial Medical Review, performed by an independent medical provider, 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.

Government legal counsel is available to consult (in person, by telephone, or other means) with you regarding your rights and elections throughout the IDES process.

Step 3: The Physical Evaluation Board (PEB)



The purpose of the PEB is to determine the fitness of Service members with medical conditions that are, either singularly, collectively, or through combined effect, potentially unfitting and, for members determined unfit, determine their eligibility for compensation.

Once convened, the PEB will first meet informally to review your case. The PEB consists of at least two members, at field grade or higher (or civilian equivalent); additionally, one military person at the grade of E-9 may be a board member for enlisted cases. 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;
4. Letters from your commander*; and
5. Other information that the PEB may require.

*In lieu of a letter, the 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 DRAS will assign ratings to all referred and claimed conditions found to be service-connected 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). While the DRAS will rate all of your service-connected conditions, the PEB will only use the ratings of your unfit conditions to determine your disposition.

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 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 F).

If you request an FPEB, you will be provided the opportunity to appear before the board and argue your position in formal proceedings. Per DoD policy, the FPEB must be comprised of at least three members and may be made up of military and civilian representatives as specified by Service

policies. 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.

The PEB President may direct your personal appearance by means of video conferencing or via telephone. An actual in-person appearance at formal PEB may be authorized upon your request. You can also provide them additional information related to your condition(s), which you deem important to your case. Additionally, you have the right to be represented by legal counsel at the FPEB, have witnesses testify on your behalf, to remain silent, or 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.

If you are found unfit for continued military service, the IDES provides both your DoD and VA proposed disability ratings prior to discharge. Your Military Service will assign a disability rating to your conditions found to be unfitting and compensable, which will be used to determine your final disposition.

NOTE: It is *imperative* that members of the RC who are demobilizing **report all medical conditions incurred while in a duty status through medical channels at time of demobilization for a LOD determination in the event those medical conditions become a disability later.**

Step 4: PEB Disposition Findings



There are several possible outcomes from a 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 do not 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. Depending upon when you separate, you may have to initiate a new claim to receive those benefits.

2. Unfit

Unfit: Separate without Benefits:

Some injuries or illnesses are determined to have been incurred or aggravated “not in the LOD.” 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 or illness is found to be “not in the LOD” 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 that 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 consecutive days are presumed to have entered their current period of military service in sound condition unless there is clear and unmistakable evidence that the condition existed prior to or was not aggravated by the current period of service. Evidence includes your entrance physical.

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 by DoD only.

While the DoD may separate you without benefits, you may still be eligible to receive VA disability benefits if you had claimed other conditions that the VA determined were service-connected.

Unfit: Separate with Benefits

If you are found unfit and the combined DoD disability rating of all your unfitting compensable 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. See Chapter 6, Section 1 to learn about severance pay.

Unfit: Permanent Disability Retirement List (PDRL)

If your unfitting condition(s) resulted in a combined DoD 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 the benefits of regular military retirement to include retirement pay and access to TRICARE for you and your eligible dependents. 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.

Unfit: Placement on 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, but your condition is permanent but not considered stable for rating purposes, you will be placed on the TDRL for a maximum of three 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 18 months or scheduled within 6 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 appropriate. If your condition stabilizes but you are not able to return to duty, you will be retired, if eligible, or separated, as applicable based on your final DoD ratings.

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 LOD). 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 creditable service) and the types of benefits you are eligible to receive from DoD.

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 condition is compensable. In general, whether a member is retired or separated for disabilities depends upon the compensability determination coupled with the member's combined disability rating for the member's unfitting condition(s). As stated previously in this chapter, a Service member with 20 years of service, but rated at 0 to 20% will be retired for disability. However, the member must be unfit for a compensable condition. If the member's condition is non-compensable, the member will be eligible to request length of service retirement. If the member does not 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 do not contribute to a Service member's severance or DoD disability retirement pay if the PEB does not find them to be unfitting. Both referred conditions and claimed conditions found to be service-connected by the VA will be used to determine the disability pay you receive from the VA after exiting the Service.

It is important to remember that the VA ratings address all referred and claimed service-connected conditions, while DoD ratings only address unfitting compensable 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 will provide you the opportunity to submit an FPEB 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/bcncr/bcncr.htm>
- Air Force BCMR:
<http://www.afpc.af.mil/board-for-correction-of-military-records>

Prior to your DES conclusion, 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. You may also appeal the VA ratings within 12 months of separation.

SECTION 2: LEGACY DISABILITY EVALUATION SYSTEM (LDES)

In limited circumstances, you may be directed or may 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 main difference between LDES and IDES is that DoD completes the medical examination for only the referred condition(s) when determining fitness and compensation. DoD will apply ratings to conditions determined to be unfit using the VA's Schedule of Rating Disabilities. Service members processing through LDES will have to make a separate claim with the VA in order to receive VA disability benefits.

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 the disability examination and a 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.

Your rights to request an IMR or to submit a MEB rebuttal remains the same as with IDES. Government legal counsel is also available to LDES participants.

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 video conference, 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 F](#)).

If you are not satisfied with the FPEB determination your respective Military Department will 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 90 to 180 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. If your separation date is in 89-1 days, you can file a Fully Developed Claim (FDC), BDD- excluded. You will need to submit a copy of your complete Service Treatment Records (STR) and be available to attend exams for the 45 days from the date that you submit your claim. The VA will then schedule your exams prior to discharge. Your claim will be finalized once the VA has received a copy of your DD Form 214.

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.

For more information on disability evaluation systems, visit:
<https://warriorcare.dodlive.mil/Benefits/Disability-Evaluation/>

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 that such defects, circumstances, or conditions are determined to not constitute a physical disability. Other reasons that prevent referral to the DES, include:

- 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); or
- Disability resulting 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 LOD 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. Title 10, U.S.C., Section 1201 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.

Chapter 6: DoD Disability Compensation

If you receive a disposition finding of Separate with Benefits or are placed on the Temporary Disability Retirement List (TDRL) or the Permanent Disability Retirement List (PDRL), DoD will compensate you for disability. Ensure you contact your local finance or personnel office or the Wounded Warrior Pay Management Team (WWPMT) member at your location to get details about your situation.

SECTION 1: DISABILITY SEVERANCE PAY AND VA RECOUPMENT

Disability severance pay is a one-time, lump sum payment for Service members with less than 20 years of service as computed under 10 United States Code, Section 1208 and a DoD disability rating under 30%.

The severance pay amount equals two months of basic pay for each year of service, which includes active service and inactive duty points (the total service years cannot exceed 19 years). Service members separated due to disability are credited with a minimum of three years of service, or six years for a disability incurred in the Line of Duty (LOD) in a combat zone or while performing combat-related operations. 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 or while performing combat-related operations.

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 do not require the disability to be incurred in combat. In general, the criteria are the same as to be awarded Combat-Related Special Compensation (CRSC) (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 (DFAS) website: 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 LOD 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 in the course of such duty, incur a total service-connected disability under section 1155 of Title 38, are exempt from the requirement to repay voluntary separation pay. However, they may still be 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: 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 percentage of disability and cannot 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 Reserve Component equivalent active duty for the Service member's membership and Inactive Duty Training Points. 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%.

SECTION 3: 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 some or all of what is offset for certain Service members. Please refer to the Special CRDP rule (DoD FMR, Volume

7B, Chapter 64, paragraph 640401) and Special CRSC rule (Title 10, U.S.C., Section 1413a, paragraph (b)(3)) for more information.

Concurrent Retirement and Disability Pay (CRDP)

Payment of CRDP replaces some or all 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%
- Be retired based on length of service (including Veterans that were retired under Temporary Early Retirement Authority (TERA).
- Be Retired from a Reserve Component (RC) with 20 qualifying years of service and has reached retirement age (In most cases, the retirement age for RC members is 60, but some may start receiving Military Retired Pay (MRP) prior to age 60 under 10 U.S.C 12731(f)(2)(A)). Those with 20 qualifying years of service who are receiving disability retired pay prior to their retirement age are not entitled to CRDP. They may become eligible for CRDP when they reach their retirement age.); and
- 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, 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 informing you of 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 will 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 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
\(Combat-Related%20Special%20Compensation\)](https://www.hrc.army.mil/content/CRSC%20(Combat-Related%20Special%20Compensation))

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](http://www.secnav.navy.mil/mra/CORB/pages/crscb/default.aspx)

Air Force

Combat-Related Special Compensation (CRSC)
Program Office
550 C Street West
Joint Base San Antonio - Randolph, TX 78150-4708
Phone number: (210) 565-0102/DSN 312-665-0102
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/](https://www.myairforcebenefits.us.af.mil/Benefit-Library/Federal-Benefits/Combat-Related-Special-Compensation-(CRSC)?serv=25/)

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/](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/)

Chapter 7: Social Security Benefits

SECTION 1: DISABILITY BENEFITS FOR YOU



Along with the many disability benefits are available from DoD and VA sources, 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 Service members who have a VA Compensation rating of 100% Permanent & Total (P&T), and/or were injured on or after October 1, 2001, while on active duty, regardless of where your injuries occurred.

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.

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 Service member claim and is expedited through all phases of

processing (if you have a VA Compensation rating of 100% Permanent & Total (P&T) or were 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.

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 a Military Medical Treatment Facility (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.

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 have 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 and 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.

When Do You Receive Medicare Coverage

You will get Medicare coverage automatically after you have received social security 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 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 SSA for late enrollment in 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. 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 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 8 ½ 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.

Chapter 7: Social Security Benefits

- 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.

Chapter 8: Survivor Benefits

ACTIVE DUTY BENEFITS



When Service members die while serving on active duty or certain Guard and 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.

Visit: <https://www.militaryonesource.mil/family-relationships/gold-star-surviving-family/gold-star-surviving-family-resources/>

Veterans Benefits Administration's Survivors and Burial Benefits Kit: Helps guide you and your loved ones as you plan and ensure your survivors know what benefits are available to them.

Visit: <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:

Army: <http://soldierforlife.army.mil/>

Marine Corps:

<https://www.hqmc.marines.mil/Agencies/Casualty-MFPC/>

Navy: <https://www.mynavyhr.navy.mil/Support-Services/Casualty/Benefits-and-Entitlements/>

Air Force: <https://www.afpc.af.mil/Airman-and-Family/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 or 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

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>.

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 (LOD).

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 training when the Secretary of Veterans Affairs determines that the death resulted from injury or disease incurred or aggravated during such duty and discharge from service was under honorable conditions.

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
- The appointed legal representative of the Service member's estate
- To the person(s) determined entitled under the laws of the Service member's domiciled state

*Note: Service members should ensure that their DD Form 93 **Record of Emergency Data** is up to date:*

<https://download.militaryonesource.mil/12038/MOS/Flyers/CMA-Flyer-DDForm93.pdf>

For information on how to report a Service member's death to DFAS, please visit:

<https://www.dfas.mil/retiredmilitary/survivors/Retiree-death.html>

For more information, visit:

<https://www.dfas.mil/RetiredMilitary/forms/>.

SECTION 4: DEPENDENCY AND INDEMNITY COMPENSATION

Dependency and Indemnity Compensation (DIC) is a tax-free monetary benefit generally payable to eligible survivors of:

- Service members who died in the LOD;
- Veterans whose death resulted from a service-connected injury or disease; or
- 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, if the Veteran was:
 - continuously rated totally disabled for a period of 10 years immediately preceding death;
 - continuously rated totally disabled from the date of military discharge and for at least 5 years immediately preceding death; or
 - a former POW who was continuously rated totally disabled for a period of at least one year immediately preceding death.

For more information on this benefit, 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 (who did not remarry since the death of the Veteran or were previously remarried, but the marriage ended prior to November 1, 1990), and unmarried dependent children of wartime Veterans.

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:

- 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.
- If the Veteran entered active duty after September 7, 1980, the Veteran must have served at least 24 months or the full tour of duty with at least one day during a war time period.
- The Veteran was 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 this benefit is available at: <http://www.benefits.va.gov/pension/>. To apply, complete VA Form 21P-534EZ and mail it to the location indicated on the form.

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, is bedridden, is 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.va.gov/pension/aid-attendance-housebound/>.

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 aged 62 and older if they were more than 50 percent dependent on the deceased service member for financial support.

Note: 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 may be issued for up to 12 months; therefore, the Social Security Administration (SSA) 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 SSA pays a lump-sum death payment, up to \$255, to the surviving spouse 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 LOD 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 were not living in government housing at the time of the Servicemember's death, the family will receive a lump-sum payment of 365 days of 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 BENEFITS

VA home loan benefits may be available to a surviving spouse of a Veteran or Service member who died as a result of Service-connected disabilities. Surviving spouses of totally disabled Veterans, whose disability may not have been the cause of death, may also be eligible. An unmarried

surviving spouse who was a co-obligor under an existing VA guaranteed, (insured or direct) loan may also be eligible for an interest rate reduction refinancing loan. In VA's home loan programs, a surviving spouse may include an individual who has not remarried or who remarries after age 57. A one-time use of VA home loan benefits may be available to a spouse of a Service member listed for a total of more than ninety days as missing in action, captured in LOD by a hostile force, or forcibly detained or interned in LOD by a foreign government or power.

For more information, visit:

<https://www.benefits.va.gov/homeloans/>.

SECTION 11: EDUCATION BENEFITS FOR DEPENDENTS AND SURVIVORS

There are two main GI Bill programs offering educational assistance to survivors and dependents of Veterans:



The Marine Gunnery Sergeant John David Fry Scholarship (Fry Scholarship) is for children and spouses of Service members who died in the LOD after September 10, 2001.

Note: The Fry Scholarship is based off the Post-911 GI Bill at the 100 percent benefit level.

The Survivors' and Dependents' Educational Assistance (DEA) program offers education and training to qualified dependents of Veterans who died while on active duty or as a result of a service-related condition.

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

Additionally, recipients of the Fry Scholarship and Survivors' and DEA are eligible for Personalized Career Planning and Guidance (PCPG). This VA-administered program provides eligible family members with personalized planning for educational benefits, as well as professional, and

qualified vocational and educational counseling. PCPG provides support to help individuals guide their career paths and ensure the most effective use of their VA benefits. You are eligible if you qualify as a Veteran or Service member for educational assistance under a VA educational program, are currently receiving VA educational benefits, will be discharged from active duty within six months, or, separated from active duty not more than one year ago.

For more information on PCPG, please reference Section 6 of Chapter 10 in this handbook. You may also visit: <https://www.va.gov/careers-employment/education-and-career-counseling>.

SECTION 12: MEDICAL AND DENTAL COVERAGE

If the Service member died while on active-duty (RC members on active duty, Federal orders for more than 30 consecutive days), their spouse will receive active duty family member (ADFM) coverage under TRICARE for three years, after which they will receive care as a retired family member.

Eligible children will be covered at the ADFM rate for TRICARE Prime or TRICARE Select until they are 21, or age 23 if they are a full time student. Once 23, they would be eligible to enroll in TRICARE Young Adult. 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/>.

For those Service members who die on active duty or in certain reserve statuses, 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. 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, and siblings) 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 703-584-1501 or visit: www.abmc.gov.

SECTION 15: 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
- totally and permanently disabled
- a patient in a nursing home receiving skilled nursing care
- receiving Social Security Disability Insurance
- receiving Supplemental Security Income

Additional information on Veterans pension benefits is available at:

<https://www.va.gov/pension/eligibility/>. To apply, complete VA Form 21P-527EZ and mail it to the location indicated on the form.

SECTION 16: THE SURVIVOR BENEFIT PLAN (SBP)

If you are transferred to either the Temporary Disability Retirement List (TDRL) or Permanent Disability Retirement List (PDRL) (as appropriate) and receive disability retirement pay; retire with at least 20 years of service; or retire under a Temporary Early Retirement Authority (TERA), 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”).

For more information on the SBP, visit the DFAS Website:
<http://www.dfas.mil/retiredmilitary/provide/sbp.html>.

The following 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 need to 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 dependent’s 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 not have the option to enroll again unless Congress legislates an open season, which rarely happens.*

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 starting at \$300, or up to 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: <https://www.dfas.mil/RetiredMilitary/provide/sbp/>.

Beneficiary Categories	Description
Spouse Only	<p>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.</p> <p>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.</p>
Child(ren) Only	<p>If you are 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.</p> <p>The cost for this option depends on the age of the retiree and the youngest child.</p>
Spouse and Child(ren)	<p>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.</p> <p>An eligible dependent child under the plan must be:</p> <ul style="list-style-type: none"> • Your legal child. • Under the age of 18. • If older than 18, enrolled in an accredited college or university; and • Unmarried. <p>Children enrolled in higher education are eligible until they reach age 22 or leave school.</p> <p>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 the child was pursuing a full-time course of study.</p> <p>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.</p>

Beneficiary Categories	Description
<p>Former Spouse</p>	<p>Please keep these factors in mind when considering SBP coverage for a former spouse.</p> <ul style="list-style-type: none"> • 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.) • If you are 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. • If you are 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.
<p>Former Spouse and Child(ren)</p>	<p>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.</p>
<p>Natural Interest Person (NIP) – Insurable Interest</p>	<p>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 sibling, 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.</p> <p>Unlike other SBP elections, NIP coverage can be cancelled any time.</p>

SBP Premiums

SBP premiums are paid in the form of a reduction of 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. **Note:** *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 cover the dependents at retirement, (spouse, and/or child(ren)).

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 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 are at least 70 years of age, but full coverage is maintained for life for your spouse.

Disadvantages

- A monthly deduction is taken from your retirement 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, you will have the option to terminate your election between the 24th and 36th month after you retire. You will not 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, 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)

Chapter 9: Reintegration into Civilian Life

If you are separated, retired, or released from active duty (REFRAD), there are several resources available to help you rejoin the civilian workforce and tools to help you succeed in civilian life. This chapter will discuss the **Transition Assistance Program (TAP)**, a program 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 and services by dividing delivery into 1 to 2-hour sessions, or whatever length best meets the needs of the Service member. Additionally, spouses and caregivers are encouraged to attend TAP with you.

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 (including 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, 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 self-assessment, individual transition plan, and 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.

Additionally, spouses/caregivers are encouraged to attend TAP with you. The components of TAP include:

- Initial Counseling (personal self-assessment// Individual Transition Plan (ITP))
- DoD Transition Day:
 - Managing Your (MY) Transition
 - Military Occupational Code (MOC) Crosswalk
 - Financial Planning for Transition
- VA Benefits and Services
- Department of Labor (DOL) Employment Fundamentals of Career Transition (EFCT)
- 2-day tracks (must complete at least one unless waived):
 - Employment: DOL Employment Workshop (DOLEW)
 - Education: DoD Managing Your Education (MYE)
 - Entrepreneurship: Small Business Administration (SBA) Boots to Business (B2B)
 - Vocational: DOL Career and Credential Exploration (C2E)
- Capstone/ITP Review

Initial Counseling (IC) – TAP Individualized Initial Counseling (IC) is the official start to the transition process and must be completed no later than 365 days before separation or retirement. As a wounded, ill, and/or injured Service member, you may not know your retirement or separation date

Chapter 9: Reintegration into Civilian Life

365 days in advance. In the event that a retirement or separation is unanticipated until there are 365 or fewer days before the projected retirement or separation date, IC must be completed as soon as possible within the remaining period of service but no later than 30 days after identification of the separation or retirement date. It is an individualized session between the Service member and a TAP counselor. During the IC session, Service members complete their personal self-assessment, used to individualize their TAP requirements, and begin the development of their Individual Transition Plan (ITP) to identify their unique needs of the transition process and post-transition goals.

Pre-separation/Transition Counseling

Pre-separation counseling, which also must be completed no later than 365 days prior to transition, 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.

REMEMBER: *Change happens. Goals and needs may change during the transition process. If they do, make an appointment with your transition counselor to update your goals, ITP, and CRS.*

DoD Transition Day: Managing Your Transition (MYT)

MYT is a module of curriculum during the DoD Transition Day that introduces transition-related topics 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: Military Occupational Code (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 (MLC), this module during the DoD Transition Day fulfills 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.

Veterans Benefits and Services

VA Benefits and Services course enhances 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; as well as community integration, social support, and local resources.

Upon completion, you will know how to apply for and make informed decisions about Veterans health, education, home loan, insurance, and disability benefits as well as Veteran Readiness and Employment (VR&E) program benefits. (See Section 6 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

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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/>.

Department of Labor Employment Fundamentals of Career Transition (EFCT)

EFCT 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 EFCT informs you about the services available at its nearly 2,500 American Job Centers (AJC) nationwide and provides you a Participant Guidebook, which can be downloaded at: www.dol.gov/vets/programs/tap/.

Additionally, the Wounded Warrior and Caregiver EFCT provides a blended learning delivery of the online EFCT followed by instructor-led virtual sessions designed to meet the needs of transitioning Service members who may be wounded, ill and/or injured. Caregivers can also benefit from this course. This course is accessed at: <https://tapevents.mil/courses/>

TAP Two Day Training Tracks –

All TAP courses and additional Military Life Cycle (MLC) modules are available online to access anytime and anywhere by transitioning Service members (including Reserve Component (RC) members regardless of their active duty time), Veterans, family members, caregivers, and interested members of the public.

Additionally, you can find a schedule of upcoming in-person and instructor led virtual courses at: <https://www.tapevents.mil/courses> (Note: for best browser performance, please use Google Chrome or Firefox).

- **Employment: DOL Employment Workshop (DOLEW)** – This course expands on the topics introduced during the DOLEF. The 2-day track addresses 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 track, participants will have the knowledge to complete a resume.

For information regarding how to transition from military service to civilian service, please visit DoD Civilian Careers website at: <https://www.dodciviliancareers.com>

- **Education: DoD Managing Your Education (MYE)** - This track 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 finding available funding options.

Throughout the track, 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.



- **Entrepreneurship: Small Business Association (SBA) Boots to Business (B2B) -** The “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.

- **Vocational: DOL Career and Credential Exploration (C2E) -** This track 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 C2E 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 how 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.

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.

Capstone is a two-stage process, beginning with TAP staff conducting an in-depth review of the Service member’s ITP and CRS. In stage two, the commander or commander’s designee determines whether, in his or her judgement, the member completed a viable ITP and has met the CRS. 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.

Resources

All TAP courses and additional MLC tracks are available online to access anytime and anywhere by transitioning Service members (including RC members regardless of their active duty time), veterans, family members, caregivers, and interested members of the public. Additionally, you can find a schedule of upcoming in-person and instructor led virtual courses at: <https://www.tapevents.org/courses>. (*Note:* for best browser performance, please use Google Chrome or Firefox). For more information about TAP, visit: <http://www.dodtap.mil> and/or your service-specific Transition Assistance Office.

Service-specific Transition Assistance Programs

 <p>Army</p>	<p>Army Transition Assistance Program https://www.armytap.army.mil/</p>
 <p>Navy</p>	<p>Navy Transition Assistance Program https://www.mynavyhr.navy.mil/Career-Management/Transition/Transition-TAP/</p>
 <p>Air Force</p>	<p>Department of the Air Force Transition Assistance Program https://www.afpc.af.mil/Airman-and-Family/Transition-Assistance-Program/</p>
 <p>Marine Corps</p>	<p>Transition Readiness Program http://www.usmc-mccs.org/index.cfm/services/career/transition-readiness/</p>
 <p>Space Force</p>	<p>Department of the Air Force Transition Assistance Program https://www.afpc.af.mil/Airman-and-Family/Transition-Assistance-Program/</p>
 <p>Coast Guard</p>	<p>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/</p>

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, meet any of the following criteria:

- Involuntarily separating from active duty under honorable conditions and receiving VSI or VSP.
- 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 or 12304b orders.

- Separating from active duty following involuntary retention (stop-loss) 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 RC (affiliation as SelRes member of an RC must be the immediate day after active duty ends).

Service members should check with their personnel office to see if they qualify for TAMP, and to confirm their status shows in Defense Enrollment Eligibility Reporting System (DEERS). For more information, visit: <http://www.tricare.mil/tamp>.

If eligible, you may enroll yourself and your eligible family members in TRICARE Prime (if in a Prime Service Area or waive your drive-time standard), TRICARE Prime Overseas, or US Family Health Plan (USFHP); 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 health plan during your active duty period and reside in a Prime location during TAMP, you must enroll or reenroll within 90 days of your TAMP period to continue Prime coverage with no gap in coverage. TRICARE Prime Remote is not available during TAMP for the Service member or family members.

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 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.

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 find contact information at the website below.

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/care-coordination/e2i/>.

SECTION 5: COMPUTER/ELECTRONIC ACCOMMODATIONS PROGRAM (CAP)

Mission

Provides Assistive Technology (AT) and accommodations to support employees with

disabilities and wounded, ill and /or injured Service members at no cost to agencies throughout the DoD 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 AT to customers listed below.

Customers

- DoD civilians with disabilities
- Active duty service members with functional limitations
- DoD employees with disabling conditions who are also:
 - Workers' Compensation beneficiaries
 - Term and temporary employees
 - Workforce Recruitment Program (WRP)
 - Detail appointments
- DoD managers ready to hire and accommodate
- Federal agencies with CAP partnership agreements

Stakeholders

- Department of Defense (DoD)
- Defense Human Resource Activity
- Defense Personnel and Family Support Center
- Wounded, Ill and/or Injured Service Members

Goals

1. Ensure quality, timely service, and accommodations to DoD civilian employees, DoD agencies and wounded, ill and/or 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 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 AT CAP provides to them upon separation. CAP supports wounded Service members, working closely with medical providers, therapists, case managers, and military liaisons at Military Medical Treatment Facilities (MTFs) to increase awareness and availability of AT.

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

Military Medical Treatment Facilities

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

SECTION 6: VETERAN READINESS AND EMPLOYMENT (VR&E)

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 (VR&E). The employment-oriented program provides comprehensive services leading to employment or assistance for individuals to live more independently. Services may include employment assistance, short and long-term training or formal education, 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 AND one of the following:

- Have a 20% or higher pre-discharge disability rating (memorandum rating) and will soon leave the military, or
- Are pending discharge due severe illness or injury that occurred in the line of duty.

Note: Once you are referred into integrated disability evaluation system you will be referred to a Vocational Rehabilitation Counselor (VRC) for a meeting.

Veteran and have:

- An honorable or other than dishonorable discharge, and
- A VA service-connected disability rating of 10% or more

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 VRC will determine your entitlement to the program and if an employment disability 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 if your discharge from active duty was before January 1, 2013:

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

If you were discharged on or after January 1, 2013, the 12-year basic period of eligibility does not apply to you; there is no time limit on your eligibility.



For more information on the program, visit the VR&E page:

<https://www.benefits.va.gov/vocrehab/index.asp>

SECTION 7: EMPLOYMENT PROGRAMS 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

These tools help Veterans translate MOC's into their civilian skill equivalents.

- Military Crosswalk Search:
<https://www.onetonline.org/crosswalk/MOC/>
- CareerOneStop:
<https://www.careeronestop.org/Toolkit/jobs/match-veteran-jobs.aspx>
- Military Skills Translator:
<https://www.military.com/veteran-jobs/skills-translator>

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. For more information on Job Banks visit:

<https://www.careeronestop.org/JobSearch/job-search.aspx?frd=true>

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.

For more information on Careers and Employment visit: <https://www.va.gov/careers-employment/#get-career-and-employment-assistance> or visit:

<https://www.military.com/veteran-jobs>

To access personalized employment services nationwide visit:

<https://www.dol.gov/veterans/findajob/>

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://msejobs.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, and the academic and health care sectors.

DOL Transition Employment Assistance for Military Spouses (TEAMS)

The TEAMS programs consist of four employment assistance classes designed to address the employment needs of transitioning military spouses. All workshops are conducted virtually. The TEAMS courses are Marketing Me, Your Next Move, Career Credentials, and Resume Essentials. For more information visit:

<https://www.dol.gov/agencies/vets/programs/tap/teams-workshops>.



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, trainings, 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/>.

Disabled Veterans Outreach Program (DVOP)

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 provides 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 small and medium sized local 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 at all AJCs, and disabled Veterans have additional resources available at:

<https://www.careeronestop.org/Veterans/BenefitsAndAssistance/for-disabled-veterans.aspx>.

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 and access personalized employment services nationwide, visit:

<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: <https://www.dol.gov/agencies/odep/publications>

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: <https://www.fedshirevets.gov/job-seekers/veterans/veterans-preference/>.

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: COORDINATED TRANSITION TO VA HEALTH CARE

After you separate from the military, you may be eligible to receive care from the Veterans Hospital Administration (VHA). VA liaisons for healthcare are available to assist you with transitioning your health care to VA and coordinating your initial care, customized to your individual needs. Before you leave the military installation, you or your DoD Case Manager can find your VA Liaison for Health-care (on-site or virtual) contact information at the

VA website: <https://www.oefoif.va.gov/valiaisons.asp>.

Every VA medical center (VAMC) has a Transition and Care Management (TCM) team ready to welcome you to VA. Your TCM Case Manager will connect you with VA health care and coordinate your ongoing care, tailored to your individual needs. Also, TCM teams can link you to VA services and benefits, as well as community resources to help ease your reintegration.

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>.

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 web-site:

https://www.va.gov/healthbenefits/resources/publications/IB10-438_combat_veteran_eligibility.pdf.

If you recently separated from the military, you may use the VA Health Care Explorer site to determine if you are eligible for care through VHA: <https://www.va.gov/health-care/about-va-health-benefits/>.

If you wish to skip the Explorer, you may apply for VA healthcare enrollment through one of the following methods:

- **By phone:** Call (877) 222-VETS (8387)
- **By mail:** Print and fill out VHA Form 10-10EZ at: <https://www.va.gov/health-care/how-to-apply/> and mail it to your local VAMC Enrollment and Eligibility Department, or to this address: Health Eligibility Center, 2957 Clairmont Road, Suite 200, Atlanta, GA 30329.
- **Online:** Click on "Apply for health care benefits" at: <https://www.va.gov/health-care/apply/application/>.
- **In person:** Go to your nearest VAMC or clinic. You may bring the VHA Form 10-10EZ with you.



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 you and 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.

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

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. GI Bill benefits help you pay for college and graduate school and training programs. The current GI Bill Education programs are: The Post- 9/11 GI Bill (Chapter 33); the Montgomery GI Bill (MGIB) - Active Duty (Chapter 30); and the Montgomery GI Bill- Selected Reserve (MGIB-SR) (Chapter 1606). Individual education benefits are dependent upon several factors determined by the Chapter (30, 33, or 1606) you may qualify for. For more information visit:

[https:// www.va.gov/education/about-gi-bill-benefits/](https://www.va.gov/education/about-gi-bill-benefits/).

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

- Honorably discharged from the Armed Forces
- REFRAD 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
- REFRAD with service characterized as honorable for further service in a RC; 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
- OTJ training
- Flight training
- Correspondence training
- Licensing and national testing programs
- Entrepreneurship training
- Tutorial assistance

For more information, call the GI Bill Hotline at 1-888-GIBILL-1 (1-888-442-4551), or visit: <https://www.va.gov/education/>.

Post-9/11 GI Bill



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.

- 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.
- Money for housing (if you are in school more than half-time). VA will base your monthly housing allowance on the cost of living where your school is located and where the student physically attends the majority of their classes. *NOTE:* Active duty students (and their spouse transferees) are not eligible for the Monthly Housing Allowance portion of the Post-9/11 GI Bill.
- 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-9/11 GI 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 processing through the disability evaluation system may request an exception to extend Service to meet the Service obligation for the transfer of Post-9/11 GI Bill benefits.

To learn more about the Yellow Ribbon Program, visit the VA website at this new address: <https://www.va.gov/education/about-gi-bill-benefits/post-9-11/yellow-ribbon-program/>.

Montgomery GI Bill – Active Duty (MGIB-AD)

The MGIB-AD program provides up to 36 months of education benefits. Benefits may be used for degrees, non-college degrees, technical or vocational school, OTJ training and apprenticeship programs, license, certification costs, national tests, and preparatory programs. 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-AD may be available to you if you meet the following requirements:

- 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.

To learn more about Montgomery GI Bill-AD specifics visit:

<https://www.va.gov/education/about-gi-bill-benefits/montgomery-active-duty/>.

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 the VA may verify your eligibility.

For more information on the MGIB-SR visit:

<https://www.va.gov/education/about-gi-bill-benefits/montgomery-selected-reserve/>.

U.S. Department of Education Financial Aid Programs

Federal Student Aid | PROUD SPONSOR of the AMERICAN MIND®
An OFFICE of the U.S. DEPARTMENT of EDUCATION

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: <https://studentaid.gov/understand-aid/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 Free Application for Federal Student Aid (FAFSA®) form at: <https://studentaid.gov/h/apply-for-aid/fafsa>. You should also create a Federal Student Aid (FSA) ID, which is a username, and password that will allow you to sign your application electronically. You can obtain additional information and create your FSA ID at: www.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. Find FAFSA4caster at: <https://studentaid.gov/aid-estimator/>.

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 Upward Bound (VUB) Program



U.S. Department of Education

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 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>.

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 OTJ 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 (SE) 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 REFRAD 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 military occupational specialty (MOS), and other training. Visit your Service specific COOL websites at:

- **Army:** <https://www.cool.osd.mil/army/index.htm>
- **Marine Corps:** <https://www.cool.osd.mil/usmc/>
- **Navy:** <https://www.cool.osd.mil/usn/>
- **Air Force:** <https://afvec.us.af.mil/afvec/Public/coc/>

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, and copies if the original DD 214 is not available, for any 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 for at least 90 consecutive days of active duty to include active duty for 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 include the following:

- 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: <https://www.dodtap.mil/dodtap/app/home>.

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 for corrections.

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, and 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/DPPF, Attn: VMET Correction, 550 C Street West, Suite 37, Randolph AFB TX, or by fax to 210-565-3385 or DSN 312-665-3385.

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 Service 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/dodtap/app/resources/forms>

SECTION 15: OTHER IMPORTANT DOCUMENTS

As you transition out of the military, you might also need the following documents and should ensure you have a copy for your personal files:

- Medical records: Complete copy of medical records; this includes in-patient, out-patient, mental health, dental records, all of which may have to be solicited separately (collectively, these documents comprise your service treatment record (STR))
- Service records: Official Military Personnel File (OMPF) Officer Qualification Records, Service Record Books, etc.
- Evaluations (especially last year of reports)
- Social Security Card
- Birth Certificate
- Awards, Certificates, etc.

SECTION 16: VA SOLID START

VA Solid Start provides one-on-one support in your first year of separation from the military to help you transition to civilian life. A VA Solid Start representative will call you at around 90, 180 and 365 days post-separation to help you understand your benefits and connect you with resources based on your interest and needs. In addition to three

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phone calls, you will receive reminder emails from the VA about upcoming calls that include links to resources and additional information on VA benefits and services.

VA Solid Start representatives are prepared to help you with a variety of topics, including VA health care, life insurance, dental care, mental health services, education and career counseling, GI Bill, and disability claims.

Solid Start will contact you regardless of your service branch or character of discharge. Update your contact information on VA.gov and save 1-800-827-0611 as the VA Solid Start number so you'll know when VA is calling.

For additional information on the VA Solid Start program, visit:

<https://benefits.va.gov/transition/solid-start.asp>

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. For instance, drilling reservists who never received a DD 214 may be eligible for disability compensation if injury or illness occurs while in a drilling or training status.

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 (REFRAD), you may be eligible to receive monthly disability compensation from VA if you have a service-connected disability.

VA disability compensation is a monthly tax-free payment to Veterans who were disabled due to disease or injury while serving in the military. You may qualify for VA disability benefits for physical conditions (like a chronic illness or injury) and

mental health conditions that developed before, during, or after service.

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 (LOD).

Note: The duty requirement may not apply to you if you were discharged for a disability incurred or aggravated in the LOD. 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 (MST)).

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

VA Liaisons for Healthcare are available to assist you with transitioning your health care to VA and coordinating your initial care, customized to your individual needs. Before you leave the military installation, you or your DoD Case Manager can find your VA Liaison for Healthcare (on-site or virtual) contact information at the VA website: <https://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 LOD, 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); or

- Veterans eligible only for (or seeking only) care related to sexual assault or sexual harassment experienced during military service (i.e., Military Sexual Trauma (MST))

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.*

Coordinated Transition to VA Health Care

Every VA medical center (VAMC) has a Transition and Care Management (TCM) team ready to welcome you to VA. Your TCM Case Manager will connect you with VA health care and coordinate your ongoing care, tailored to your individual needs. Also, TCM teams can link you to VA services and benefits, as well as community resources to help ease your transition from active duty to civilian life. VA Liaisons for Healthcare and TCM teams work closely together to ensure you have a seamless transition into VA health care. TCM program points of contact for every VAMC can be found at:

<http://www.va.gov/POST911VETERANS/index.asp>.

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, your hospital or outpatient medical appointment will be prioritized and scheduled according to medical acuity (the severity of your condition and the level of attention or service from professional staff to address your condition).

Combat Veterans

If you served in a theater of combat operations 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 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 not 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 eligible for 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 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 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;
- Do 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 since discharge; and/or
- Do not need to have a specific diagnosis.

To learn more about VA’s services for MST, Veterans can speak to the designated MST Coordinator at their nearest VAMC, speak to a Vet Center provider, or ask their current VA health care provider. You can visit:

<https://www.benefits.va.gov/benefits/mstcoordinators.asp> or call 1-800-827-1000 to contact a female or male MST Outreach Coordinator at their local regional office for assistance with the claims process.

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 LOD; 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 January 9, 1962, and May 7, 1975. Veterans who served in the Southwest Asia theater of operations from August 2, 1990, through November 11, 1998. Veterans who served in a theater of combat operations after November 11, 1998, as follows: Veterans discharged from active duty on or after January

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 August 1, 1953, and ending December 31, 1987. Veterans who were exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki or participated in Project 112/SHAD.

- **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 hospital care or medical services in a timely manner, because VA does not provide the care you need, or because of where you live.

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; mental health and substance abuse preventive services; immunizations against infectious disease; prevention of musculoskeletal deformity or other gradually developing disabilities of a metabolic or degenerative nature; genetic counseling concerning inheritance of genetically determined diseases; routine vision testing and eye care services; periodic reexamination of members of high-risk groups for selected diseases and for

functional decline of sensory organs, and the services to treat these diseases and functional declines inpatient hospital, medical, surgical, and mental health care, including care for substance abuse.

- 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 Veteran certifies an intention to live, as necessary and appropriate, 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: <http://www.gov/health-care/about-va-health-benefits/dental-care/>.

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 VAMC 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 VAMC. 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 LOD and not due to such person's own misconduct.
- An individual designated by VA as a primary family caregiver and who is not entitled to care or services under a health-plan contract.

Generally, under CHAMPVA, medical services and supplies are obtained through non-VA 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/program/s/dependents/champva/>.

To apply for CHAMPVA benefits, mail a VA Form 10-10D to the VHA Office of Community Care, CHAMPVA Eligibility Department, 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.

Veterans Community Care Program (VCCP)

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 to avoid being billed for the care.

SECTION 3: VA LIFE INSURANCE PROGRAMS

Servicemembers' Group Life Insurance (SGLI)

SGLI offers low-cost term coverage to eligible service- members. If you are a Service member who meets certain criteria, you will receive automatic SGLI coverage unless you opt out. You can get coverage up to the maximum limit of \$500,000, in \$50,000 increments, and you can get 120 days of free coverage from the date you leave the military. Visit the VA website for more information at: <https://www.va.gov/life-insurance/options-eligibility/sgli/>.

Veterans' Group Life Insurance (VGLI)

With VGLI, you may be able to keep your SGLI coverage after you leave the military for as long as you continue to pay the premiums. You can get \$10,000 to \$500,000 in life insurance coverage based on the amount of SGLI coverage you had when you left the military. You can also increase your coverage by \$25,000 every 5 years— up to \$500,000—until you are 60 years old. 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.

- **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.

Visit the VA website for more information at:

<https://www.va.gov/life-insurance/options-eligibility/vgli/>.

Servicemembers' Group Life Insurance Disability Extension allows service members who are totally disabled at time of discharge to retain SGLI coverage they had in service at no cost for up to two years. The SGLI Disability Extension is available to you if you are totally disabled at the time of discharge. 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>.

Servicemembers' Group Life Insurance Traumatic Injury Protection (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 LOD 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.

Information on SGLI and TSGLI can be found at:

<http://militarypay.defense.gov/Benefits/ServicemembersGroupLifeInsurance.aspx>.

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 REFRAD 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. 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. Mortgage insurance reduces the amount owed on your mortgage in the event of your death. 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.

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 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 while on active duty.
- 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 (POW); and/or
- Are a Service member, Veteran, or dependent currently eligible for VA education benefits.

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 (OJT). 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:
<https://www.va.gov/education/survivor-dependent-benefits/dependents-education-assistance/>.

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 LOD 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, or the Colmery Act 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:
<https://www.va.gov/education/survivor-dependent-benefits/fry-scholarship/>.

VA Beneficiaries may qualify for one or more VA education programs, in which case the beneficiary must choose which program to use. The choice is generally one time and irrevocable. To assist you with such decisions, please see the GI Bill Comparison Tool and other resources on the VA website: <https://www.va.gov/education/#more-information-and-resources>.

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 under conditions other than dishonorable within six months; or
- Separated from active duty under conditions other than dishonorable not more than one year ago; or
- Qualify as a Veteran or Service member for educational assistance under a VA educational program; or
- Are a Service member, Veteran, or dependent currently eligible for VA education benefits.

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

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

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

VA provides eligible individuals born with spina bifida and other qualifying birth defects a monthly monetary allowance based on the individual’s degree of disability, health care benefits, and 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.

- Biological 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.
- Biological 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. For more information visit:

<https://www.publichealth.va.gov/exposures/agentorange/benefits/children-birth-defects.asp>.

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 hip (Note: This qualifies you for adaptive-equipment grant only).

The automobile adaptive equipment program provides necessary equipment program provides necessary equipment to eligible Veterans.

For more information visit:

<https://www.va.gov/disability/eligibility/special-claims/automobile-allowance-adaptive-equipment/>.

SECTION 9: SPECIALLY ADAPTED HOUSING PROGRAM

VA's Loan Guaranty Service provides grants to eligible individuals, which can include Service members and Veterans, with certain service-connected disabilities to help with the purchase or construction of an adapted home or the modification of 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. In certain circumstances, grants may be available to eligible Service members and Veterans who are, or will be, temporarily residing in a home owned by a family member. If a natural or other disaster substantially damages or destroys a home that was previously adapted with VA assistance, VA may be able to help with a new grant. Additionally, VA may provide assistance to an eligible individual who needs to adapt a home to accomplish the purposes of a Veteran Readiness and Employment program.

VA can provide up to six grants of assistance under Specially Adapted Housing. Individual grant amounts vary, and there is a cap on the maximum total dollar amount of grants. The current maximums are listed on the VA website listed below. These amounts are adjusted annually based on a cost-of-construction index.

For more information, visit the VA website at:

<https://www.va.gov/housing-assistance/disability-housing-grants/>.

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 Veterans with a service-connected skin

conditions and prescribed skin medications (ointments, lotions, etc.) that cause irreparable damage to outer garments. A Veteran may receive one to four clothing allowance payments.

For eligibility or application information for Clothing Allowance, 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. Beginning January 1, 2020, eligible Veterans can use their VHIC cards to shop at the canteens and Morale, Welfare, and Recreation (MWR) facilities. 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:

<https://www.va.gov/records/get-veteran-id-cards/>.

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, health care insurance through CHAMPVA, mental health counseling, and a designated caregiver support coordinator located at every VAMC.

Family members may be eligible to receive a stipend when they are designated as the primary caregiver of a Veteran. Veterans who qualify for the PFAFC include those who:

- have a total VA disability rating of 70% or higher; and
- were discharged from the military or has a future medical discharge date; and
- need at least six months of continuous, in-person care services; and
- are enrolled in VA health care.

Active duty Service members are eligible for this program and may begin the application process; however, the Service member cannot receive both the VA benefit and the SCAADL benefit simultaneously.

Please refer to Chapter 4 Section 1 for more information about SCAADL. Additional information is available at:

<https://www.caregiver.va.gov/> or by calling the VA Caregiver Support Line at 1-855-260-3274.

SECTION 14: RESPITE CARE PROGRAM

VAMC's 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.

Nursing home respite care services are available. Respite care may be provided at a VAMC, 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.

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.

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. Eligibility for medical services provided outside the United States is different than eligibility for care provided in the United States. The FMP 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>.

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

Appendix A: Tricare Benefits and Plans

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 <ul style="list-style-type: none"> • 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
<p>TRICARE Prime</p>	<p>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.</p> <p>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.</p> <p>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 (January 1 – December 31) 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.</p> <p>For current rates, visit: https://tricare.mil/Plans/Enroll/Prime/EnrollmentFees.</p> <p>When retired Service members and their families become eligible for TRICARE For Life, they are no longer able to enroll in TRICARE Prime.</p> <p>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).</p>
<p>TRICARE Prime Remote</p>	<p>TRICARE Prime Remote is a managed care option similar to TRICARE Prime for active duty Service members (including National Guard and Reserve members activated for more than 31 days in a row) while they are assigned to remote duty stations 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. Family members must reside with their sponsor to qualify for TRICARE Prime Remote. Like Prime, enrollment is required, and you must use a TRICARE network Primary Care Manager if one is available in the local area. There are no enrollment fees. Qualifying Service members and their families can enroll in TRICARE Prime Remote within 90 days of updating their address in DEERSTRICARE Prime Remote 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 and check your home and work ZIP codes to see if you may qualify.</p>

TRICARE Plan	Details
<p>TRICARE Prime Overseas</p>	<p>TRICARE Prime Overseas is a managed care option in overseas areas near military hospitals and clinics.</p> <p>More information is available at the TRICARE Prime Overseas website: http://tricare.mil/Plans/HealthPlans/TPO.aspx.</p>
<p>TRICARE Prime Remote Overseas</p>	<p>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.</p> <p>More information is available at the TRICARE Prime Remote Overseas website: http://tricare.mil/Plans/HealthPlans/TPRO.aspx.</p>
<p>TRICARE Select</p>	<p>TRICARE Select may be the right choice for you if you live in an area where TRICARE Prime is not available, you have other health insurance in addition to TRICARE, such as Medicare or an employer-sponsored health insurance, or you are seeing a provider who is not in the TRICARE network, and you do not want to switch.</p> <p>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 <u>Transitional Assistance Management Program</u>; 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 are on active duty (including activated Guard/Reserve members), you cannot use TRICARE Select.</p> <p>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.</p> <p>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.</p> <p>More information is available at the TRICARE Select website at https://tricare.mil/Plans/HealthPlans/TS and the TRICARE® Online Patient Portal at https://www.tricareonline.com/tol2/prelogin/mobileIndex.xhtml.</p>

Appendix A: Tricare Benefits and Plans

TRICARE Plan	Details
<p>TRICARE Select Overseas</p>	<p>TRICARE Select Overseas provides comprehensive coverage in all overseas areas and may be your only option when you live overseas.</p> <p>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.</p>
<p>TRICARE For Life</p>	<p>TRICARE For Life is Medicare-wraparound coverage for TRICARE-eligible beneficiaries who have Medicare Part A and B.</p> <p>For more information, visit the TRICARE for Life website: http://tricare.mil/Plans/HealthPlans/TFL.aspx.</p>
<p>TRICARE Reserve Select (TRS)</p>	<p>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.</p> <p>Monthly premiums, payable by the member, are subsidized and represent only 28% of the full cost of the coverage.</p> <p>For more information, visit the TRICARE Reserve Select website: http://tricare.mil/Plans/HealthPlans/TRS.aspx.</p>
<p>TRICARE Retired Reserve (TRR)</p>	<p>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 do not have to change providers if you already have one.</p> <p>Monthly premiums, payable by the member, are not subsidized and represent the full cost of the coverage.</p> <p>For more information, visit the TRICARE Retired Reserve website: http://tricare.mil/Plans/HealthPlans/TRR.aspx.</p>

TRICARE Plan	Details
<p>TRICARE Young Adult</p>	<p>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). TRICARE Young Adult provides healthcare coverage for those qualified adult dependent children until the dependent turns 26 years old.</p> <p>For more information, visit the TRICARE Young Adult website: http://tricare.mil/Plans/HealthPlans/TYA.aspx.</p> <p>To see if you are eligible, check https://tricare.mil/Plans/Eligibility.</p>
<p>US Family Health Plan (USFHP)</p>	<p>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.</p> <p>For more information, visit the U.S. Family Health Plan website: http://tricare.mil/Plans/HealthPlans/USFHP.aspx, or call 1-800-748-7347.</p>
<p>TRICARE Active Duty Dental Program</p>	<p>TRICARE Active Duty Dental Program covers civilian dental care. Current contractor is United Concordia.</p> <p>For more information, visit the Active Duty Dental Program website: http://tricare.mil/Plans/DentalPlans.aspx or call toll-free 1-866-984-2337.</p>
<p>TRICARE Dental Program</p>	<p>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.</p>
<p>Office of Personnel Management Federal Employees Dental and Vision Insurance Program (FEDVIP)</p>	<p>The Federal Employees Dental and Vision Insurance Program (FEDVIP) is a voluntary, enrollee-pay-all dental and vision program available to certain retired Service members, active duty family members, and survivors. It is sponsored by the U.S. Office of Personnel Management and offers eligible participants a choice between ten dental and four vision carriers. Premiums are paid post-tax. Dependent children are covered until age 21 (non-students) or 23 (full-time students). More information can be found at https://www.benefeds.com/education-support/dental-vision.</p>

Appendix A: Tricare Benefits and Plans

TRICARE Plan	Details
<p>TRICARE Transitional Assistance Management Program (TAMP)</p>	<p>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.</p> <p>For more information, visit http://www.tricare.mil/Plans/SpecialPrograms/TAMP.aspx.</p>
<p>TRICARE Special Programs</p>	<p>TRICARE offers supplemental programs tailored specifically to beneficiary health concerns or conditions.</p> <p>To find out if you are eligible and to learn more, visit https://www.tricare.mil/Plans/SpecialPrograms.</p>



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

United States, Guam, and Puerto Rico: Visit <https://mhsnurseadviceline.com/> for web chat and video chat or dial 1-800-TRICARE (874-2273).

OCONUS: Contact your local facility or visit <https://mhsnurseadviceline.com> for web chat, video chat, or to find country-specific numbers.

Other TRICARE Programs

TRICARE Dental Program: 1-844-653-4061 TRICARE For Life: 1-866-773-0404

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 For country-specific toll-free numbers, visit

<http://www.tricare-overseas.com/contact-us>

TRICARE Area Offices (TAOs)

TAO-Pacific:

Commercial: +81-98-970-9155

DSN: 315-643-2036

Toll-Free: 1-888-777-8343 (if calling from the U.S.)

TAO-Latin America and Canada:

Commercial: 1-210-536-6080

DSN: 761-1153

Toll-Free: 1-888-777-8343, option 2

Appendix A: Tricare Benefits and Plans

TAO-Eurasia-Africa:

Commercial: +49-(0)06371-9464-2999

DSN: 314-590-2999

Toll-Free: 1-888-777-8343 (if calling from the U.S.)

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., 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 Defense Health Agency (DHA) Privacy and Civil Liberties Office website at healthmil/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)



NATIONAL RESOURCE DIRECTORY

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

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 Program
- Other Services & Resources
- Transportation & Travel

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

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.

- Air Force Association
- American Legion
- American Red Cross
- AMVETS
- Armed Services YMCA
- Association of the United States Army
- Blue Star Families
- Disabled American Veterans
- Fisher House Foundation, Inc.
- Iraq and Afghanistan Veterans of America
- Institute for Veterans and Military Families
- Marine Corps League
- Military Child Education Coalition
- Military Officers Association of America
- Military Order of the Purple Heart
- National Guard Association of the United States
- National Military Family Association
- Navy League of the United States
- Operation Homefront
- Reserve Officers Association
- Student Veterans of America
- Tragedy Assistance Program for Survivors
- U.S. Chamber of Commerce Foundation (Hiring Our Heroes Program)
- USO, Inc.
- Veterans of Foreign Wars of the United States
- Vietnam Veterans of America
- 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
State Department of Veterans Affairs	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

Appendix E: Reintegration to Civilian Life Resources

Organization/Program	Resources
Military Spouse Employment Partnership (MSEP)	https://msejobs.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 Disability Resources U.S. Department of Labor (dol.gov)
Veterans' Preference Information	General Information: https://www.fedshirevets.gov/job-seekers/veterans/veterans-preference/ Veterans' Preference Advisor: Veterans' Preference Information U.S. Department of Labor (dol.gov)
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	https://studentaid.gov/
Department of Education – Veterans Upward Bound (VUB) Program	https://www2.ed.gov/programs/triovub/index.html
VA Solid Start	https://benefits.va.gov/transition/solid-start.asp

Organization/Program	Resources
<p>Uniformed Services Employment and Reemployment Rights Act (USERRA)</p>	<p>General Information http://www.dol.gov/vets/programs/userra USERRA and the ADA http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm</p>
<p>DD Form 214 (Certificate of Release or Discharge from Active Duty)</p>	<p>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/</p>
<p>DD Form 2586 (Verification of Military Experience and Training)</p>	<p>Verification of Military Experience and Training (VMET) https://milconnect.dmdc.osd.mil/milconnect/public/faq/Training-VMET Download Form at: https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd2586.pdf <i>Service-specific Administrative Contacts:</i> 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: 1-800-525-0102 (Total Force Service Center) Marine Corps Call: 1-877-4-USMCWW (487-6299)</p>
<p>DD eForm 2648 – Service Member Pre-Separation / Transition Counseling and Career Readiness Standards eForm for Service Members Separating, Retiring, Released from Active Duty (REFRAD)</p>	<p>https://www.dodtap.mil/forms.html</p>

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 | Service Officers, Inc. |
| American Legion | National Association for Black Veterans, Inc. |
| American Red Cross AMVETS | National Law School Veterans Clinic Consortium |
| American Ex-Prisoners of War, Inc. | National Veterans Legal Services Program |
| Armed Forces Services Corporation | Navy Mutual Aid Association |
| Blinded Veterans Association Catholic War Veterans of the U.S.A. Dale K. Graham Veterans Foundation Disabled American Veterans | Paralyzed Veterans of America, Inc. |
| Fleet Reserve Association | Polish Legion of American Veterans, U.S.A. |
| Gold Star Wives of America, Inc. | Swords to Plowshares, Veterans Rights Organization, Inc. |
| Green Beret Foundation | The Retired Enlisted Association |
| Jewish War Veterans of the United States of America | United Spinal Association, Inc. |
| Legion of Valor of the United States of America, Inc. | Veterans of Foreign Wars of the United States |
| Marine Corps League | Wounded Warrior Project |
| Military Officers Association of America | |
| National Association of County Veterans | |

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, Disability Evaluation System Manual: Processes

http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/133218m_vol1.pdf

DoDM 1332.18, Vol. 2, Disability Evaluation System (DES) Manual: Quality Assurance Program (QAP)

http://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/133218m_vol2.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>

Appendix G: Useful Links & Resources

Recovery Care Program

<https://warriorcare.dodlive.mil/Care-Coordination/recovery-coordination/>

Crisis Lines

Military Crisis Line

<https://www.veteranscrisisline.net/get-help/military-crisis-line>

Veterans Crisis Line

<https://www.veteranscrisisline.net/> Call: 988, then Press 1

Text: 838255

Army Suicide Prevention

<https://www.dspo.mil/>

Navy Suicide Prevention

<https://www.mynavyhr.navy.mil/Support-Services/21st-Century-Sailor/Suicide-Prevention/>

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/Transition-Assistance-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://dodtap.mil/dodtap/app/resources/forms>
- DD Form 2948: https://www.woundedwarrior.af.mil/Portals/23/documents/08_SUPPORT/04_Transition/01_Pre-Transition/07_A_DD%20Form%202948.pdf
- DHA warrior care: <https://warriorcare.dodlive.mil/>
- Transition Assistance Program: www.dodtap.mil

Appendix G: Useful Links & Resources

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/>

Wage and Hour Division (WHD)

<https://www.dol.gov/agencies/whd>

Family and Medical Leave Act information

<https://www.dol.gov/agencies/whd/fmla>

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:** <https://www.benefits.va.gov/INSURANCE/resources-forms.asp>

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

[Army Recovery Care Program \(ARCP\) \(formerly known as Army Wounded Warrior Program \(AW2\)\) | The Official Army Benefits Website](#)

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/>

Appendix G: Useful Links & Resources

U.S. Special Operations Command Care Coalition

<https://www.socom.mil/care-coalition/>

Appendix H: Acronyms

ADA = Americans with Disability Act
ADOS = Active Duty Operational Support
AGR = Active Guard Reserve
AFW2 = Air Force Wounded Warrior Program
AJC = American Job Centers
ARCP = U.S. Army Recovery Care Program
AT = Assistive Technology
AWOL = Absent Without Leave
B2B = Boots to Business
BAH = Basic Allowance for Housing
BAS = Basic Allowance for Subsistence
BDD = Benefits Delivery at Discharge
BCMR/BCNR = Board for Correction of Military/ Navy Records
C2E = DoL Career and Credential Exploration
CAP = Computer/Electronic Accommodations Program
C&P = Compensation and Pension
CCA = Clinical Care Advocates
CFR = Code of Federal Regulations
CG SUPRT = Coast Guard Support
CHAMPVA = Civilian Health and Medical Program of the Department of Veterans Affairs
CMT = Care Management Team
COLA = Cost of Living Adjustment
COOL = Credentialing Opportunities Online
CORB = Secretary of the Navy Council of Review Boards
CPI = Consumer Price Index
CRD = Caregiver Resource Directory
CRDP = Concurrent Retirement and Disability Pay
CRP = Comprehensive Recovery Plan
CRS = Career Readiness Standards
CRSC = Combat-Related Special Compensation
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
DIC = Dependency and Indemnity Compensation
DISC = District Injured Support Coordinators
DoD = Department of Defense
DODI = DoD Instruction
DODM = DoD Manual
DoL = Department of Labor
DOLEW = DOL Employment Workshop
DRAS = Disability Rating Activity Site

Appendix H: Acronyms

DTMO = Defense Travel Management Office
DVOP = Disabled Veterans Outreach Program
E2I = Education and Employment Initiatives
ECHO = Extended Care Health Option
ED = Department of Education
EFCT = DOL Employment Fundamentals of Career Transition
EFMT = Emergency Family Member Travel
EHHC = ECHO Home Health Care
FAC = Family Assistance Center
FAFSA® = Free Application for Federal Student Aid
FAP = Family Advocacy Program
FDC = Fully Developed Claim
FEDVIP = Federal Employee Dental and Vision Insurance Program
FFSC = Fleet and Family Support Center
FLO = Family Liaison Officer
FMLA = Family Medical Leave Act
FMP = Foreign Medical Program
FMR = DoD Financial Management Regulation
FPEB = Formal Physical Evaluation Board
FRC = Federal Recovery Consultant
FRCO = Federal Recovery Consultant Office
FSA = Family Separation Allowance
FSA = Federal Student Aid
FSGLI = Family Servicemembers' Group Life Insurance
FSPA = Former Spouse Protection Act of 1981
HDP-L = Hardship Duty Pay-Location
HIPAA = Health Insurance Portability and Accountability Act of 1996
HITECH = Health Information Technology for Economic and Clinical Health Act of 2009
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
IDES = Integrated Disability Evaluation System
IDP = Imminent Danger Pay
IDP = Individual Development Plan
IIC = Individualized Initial Counseling Plan
IPEB = Informal Physical Evaluation Board
IRA = Individual Retirement Account
I-RILO = Initial-Review-In-Lieu-Of
ITA = Invitational Travel Authorization
ITP = Individual Transition Plan
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
MASP = Military Adaptive Sports Program

Appendix H: Acronyms

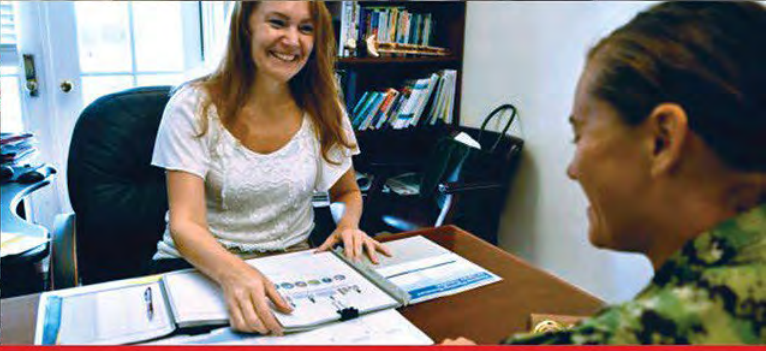
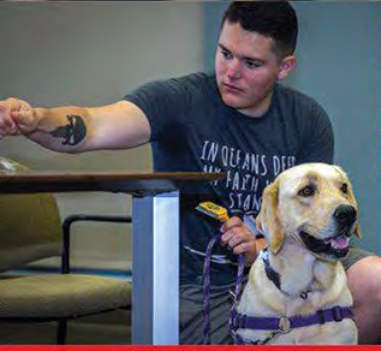
MCCM = Medical Care Case Manager
MCCYN = Military Child Care in Your Neighborhood
MCM = Medical Case Manager
MSC = Military Services Coordinator
MDB = Multi-Disciplinary Briefing
MEB = Medical Evaluation Board
MEDCOM = US Army Medical Command
MFLC = Military and Family Life Counseling Program
MGIB = Montgomery GI Bill
MGIB-SR = Montgomery GI Bill – Selected Reserve
MHS = Military Health System
MLC = Military Life Cycle
MOC = Military Occupational Code
MRP = Military Retired Pay
MSEP = Military Spouse Employment Partnership
MST = Military Sexual Trauma
MSO = Military Service Organization
MTF = Military Medical Treatment Facility
MYCAA = My Career Advancement Account
MYE = DoD Managing Your Education
MYT = Managing your Transition
MWR = Morale, Welfare, and Recreation
NADL = Native American Direct Loan
NARSUM = Narrative Summary
NCM = Nurse Case Manager
NIP = Natural Interest Person
NMA = Non-Medical Attendant
NMCM = Non-Medical Care Manager
NOAA = National Oceanic and Atmospheric Administration
NOE = Notification of Eligibility
NPSP = New Parent Support Program
NRD = National Resource Directory
NPWE = Non-Paid Work Experience
NWW = Navy Wounded Warrior
OASD(HA) = Office of the Assistant Secretary of Defense for Health Affairs
OMCC = Operation Military Child Care
OMPF = Official Military Personnel File
OPM = Office of Personnel Management
OJT = On-the-Job Training
OWF = Operation Warfighter
PAC = Pay and Allowance Continuation
PCAFCA = Program of Comprehensive Assistance for Family Caregivers
PCM = Primary Care Manager
PCS = Permanent Change of Station
PCPG = Personalized Career Planning and Guidance
PDRL = Permanent Disability Retirement List
PDS = Permanent Duty Station
PEB = Physical Evaluation Board

Appendix H: Acronyms

PEBLO = Physical Evaluation Board Liaison Officer
PEER = Personalized Experiences, Engagement and Resources
PHI = Protected Health Information
PII = Personally Identifiable Information
P & T = Permanent & Total
POW =Prisoner of War
PSD = Personnel Support Detachment
PSB-CY - Problematic Sexual Behavior in Children and Youth
PTDY = Permissive Temporary Duty
PTSD = Post Traumatic Stress Disorder
QAP = Quality Assurance Program
QoL= Quality of Life
RC = Reserve Component
RCC = Recovery Care Coordinator
RCP = Recovery Coordination Program
RSA = Rehabilitation Services Administration
RPA = Reserve Program Administrator
RCSBP = Reserve Component Survivor Benefit Program
REFRAD = Released from Active Duty
RSFPP = Retired Serviceman's Family Protection Plan
SBA = Small Business Administration
S-DVI = Service-Disabled Veterans Insurance
SBP = Survivor Benefit Plan
SCAADL = Special Compensation for Assistance with Activities of Daily Living
SE = Supported Employment
SEP = Special Enrollment Period
SGA = Substantial Gainful Activity
SGLI = Service members' Group Life Insurance
SMC = Special Monthly Compensation
SM/V = Service member/Veteran
SOF = Special Operations Forces
SRMM = Soldier Recovery Medical Manager
SRU = Soldier Recovery Unit
SSA = Social Security Administration
SSDI = Social Security Disability Insurance Program
SSI = Supplemental Security Income
STR = Service Treatment Record
SUD = Substance Use Disorder
TA = Tuition Assistance
TAD = Temporary Additional Duty
TAMP = Transitional Assistance Management Program
TAP = Transition Assistance Program
TBI = Traumatic Brain Injury
TCM = Transition and Care Management
TDRL = Temporary Disability Retirement List
TDY = Temporary Duty
TEAMS = DoL Transition Employment Assistance for Military Spouses
TERA = Temporary Early Retirement Authority
TRS = TRICARE Reserve Select

Appendix H: Acronyms

TRR = TRICARE Retired Reserve
TSGLI = SGLI Traumatic Injury Protection Program
TSP = Thrift Savings Plan
TWWIA = Ticket to Work and Work Incentives Improvement Act of 1999
USC = United States Code
USCG = United States Coast Guard
USDA = U.S. Department of Agriculture
USERRA = Uniformed Services Employment and Reemployment Rights Act
USFHP = US Family Health Plan
USSDP = Uniformed Services Savings Deposit Program
USSOCOM = U.S. Special Operations Command
VA = Department of Veterans Affairs
VAMC = VA Medical Center
VCCP = Veterans Community Care Program
VMLI = Veterans' Mortgage Life Insurance
VBA = Veterans Benefits Administration
VCP = Veterans Choice Program
VEC = Veterans Employment Center
VGLI = Veterans' Group Life Insurance
VHA = Veterans Health Administration
VHIC = Veteran Health Identification Card
VJB = Veterans Job Bank
VR&E = Veteran Readiness and Employment
VRC = Vocational Rehabilitation Counselor
VSO = Veteran Service Organization
VUB = Veterans Upward Bound
WHD = Wage and Hour Division
WRP = Workforce Recruitment Program
WWPMT = Wounded Warrior Pay Management Team
WWR = Wounded Warrior Regiment



<https://warriorcare.dodlive.mil/>