



# The Bald Eagles

**Fall - 2021  
Edition**

**ARLINGTON HEIGHTS NEWSLETTER**  
*\*\*A Satellite of Scott Air Force Base, Illinois\*\**

This office continues to serve as a link between retirees, dependents/annuitants, and their entitlements. Our host organization is **85th SUPPORT COMMAND**. Volunteers staff the office from 0900 to 1500 hours, Monday through Friday. Our mailing address and other contact information is presented below:

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**ID Card self-appointments <https://rapids-appointments.dmdc.osd.mil/>**

Our apologies –We **no longer** have a **toll-free number**. If and when a toll-free number becomes available we will contact all our email subscribers and inform them of the toll-free number.

### IF YOU'RE VISITING US

Our building has an electronic entry system. Please use the yellow telephone outside the entrance to call our office for entry and escort to your destination. Unlike in the past, you'll have to use the 10 digit number. Please note, due to Covid Restrictions you may be required to wear a mask while visiting with us.

The DCMA/USAR Building 203 is located behind the flagpole and completely accessible to handicapped individuals. Handicap parking spaces are near the door and the building has elevators for your use.

**Contact us for a strip map to help you find the Arlington Heights Army Reserve Center**

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This Satellite Retiree Assistance Office [SRAO] newsletter is authorized under Air Force Instruction (AFI) 36-3106. While every effort is made to provide accurate information, we cannot be responsible for errors or omissions in material from other sources. Any opinion or beliefs found in this newsletter do not reflect the opinion or beliefs of the Department of Defense, the Department of Homeland Security or any other government agency. We invite input from our readers and reserve the right to edit content.

*[Note - the below article as well as others contained in this edition of the Bald Eagles Newsletter were reprinted from the MOAA Newsletter and were authorized with the permission of Lindsey Wray (MOAA) on August 24, 2021]*

### **SPACE AVAILABLE FLIGHT ELIGIBILITY**

A recent regulations change allows dependent family members of permanently and totally disabled veterans to fly on space-available, or Space-A, flights. On Oct. 23, 2020, a change to DoDI 4515.13 updated the eligibility requirements for Space-A travel, adding dependents of permanently and totally disabled veterans. In 2019, those veterans became eligible to fly Space-A on regularly scheduled military passenger aircraft, joining retirees and their spouses; National Guard and Reserve members on the Active Status List; and surviving spouses of those who died on active duty. However, the dependents of those disabled veterans were not allowed to accompany them on Space-A flights.

The regulation change states that dependents of permanently and totally disabled veterans may accompany the veteran on flights within the continental United States (CONUS) or on flights between CONUS and Alaska, Hawaii or U.S. territories. Dependents cannot travel without the

veteran sponsor. Space-available flights, also known as military hops, allow eligible passengers to fill unused seats on Defense Department-owned or controlled aircraft. Space-A passengers can fly only after all the space required passengers and cargo have been accommodated. Space-A passengers are then loaded by priority group; those on emergency leave are the top priority, or category 1, and retirees and disabled veterans are the lowest priority [category 6].

Other categories of Space-A travelers include those on environmental and morale leave (EML), house hunting leave, or other mission-critical or official travel. For up-to-date information and details, check out the Air Mobility Command's Space-A travel website. <https://www.amc.af.mil/Home/AMC-Travel-Site/AMC-Space-Available-Travel-Page>. Note that Due to the COVID-19 pandemic, Space-A travel is strictly limited to official travel and to certain personnel in specific locations until further notice.

*[Source: MOAA Newsletter | February 24, 2021]*

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### **COMMISSARY SURCHARGE**



There's good news and bad news. First, the good news is that the surcharge is definitely not going up. And in case you don't believe me, here's a quote straight from the commissary headquarters: Kevin Robinson, a commissary spokesperson, told us, "It would take a change in law to raise the commissary surcharge and, to date, and no legislation has been proposed to do so." The commissary surcharge has long been set at 5%. You'll find it noted at the end of

your commissary receipt, and it is calculated on your total purchase amount before coupons are deducted. Revenue from the surcharge pays for commissary construction and infrastructure update.

There is, however a relatively recent additional fee for some shoppers using debit or credit cards. Service connected disabled veterans rated below 100%, Purple Heart recipients and their caregivers registered with the VA's caregiver program are authorized access to the commissary starting Jan.1, 2020. But when adding those users to the system, DeCA also added a credit and debit card fees for those users. For credit cards the fee is 1.9% and for debit card use a 0.5% fee. These don't come into play if you pay with cash, check or the Military Star card.

*[Source: Military.com via <https://retireenews.org> | November 30, 2020]*

**Permission to use the above article was obtained from Galen at Retireenews.org on March 24, 2021.**

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## TRICARE PHARMACY PROGRAM



### How to Locate a Pharmacy to Fill Your Needs

More than 56,000 pharmacy locations are in the TRICARE retail pharmacy network, including national chains, grocery chains and independent pharmacies. You can click on or paste the below url to your web browser: <https://www.expressscripts.com/medco/consumer/mybenefits/medPPOEntry.jsp?mentype=tricare&accessLink=TRICARE> and enter your zip code to locate one nearest to you. There you can also locate those in Guam, the U.S. Virgin Islands and the Northern Mariana Island.

### How to Find a Pharmacy that Offers Vaccines

Vaccines administered at your retail pharmacy usually don't require an appointment and use the same effective medications as your physician's office.

- Some pharmacies on the list may have an on-site clinic that offers flu vaccines. Be sure to get your vaccine from the pharmacist, not from a health provider, to avoid possible out-of-pocket costs.
- Before you visit the pharmacy, call them to verify their current vaccination schedule, availability and any age restrictions. Phone numbers are available through Tricare’s Pharmacy locator website above.
- At [https://xforce-tricare-prod.s3.amazonaws.com/s3fs-public/2021-01/Vaccine\\_List1.7.2021.pdf](https://xforce-tricare-prod.s3.amazonaws.com/s3fs-public/2021-01/Vaccine_List1.7.2021.pdf) you can review TRICARE's list of covered vaccines.
- Be sure to present your military ID at the time of service.

### Find a Specialty Pharmacy

There are a variety of convenient pharmacy choices to fill your specialty medications:

- **Military Pharmacies** - Visit [tricare.mil/mtf](http://tricare.mil/mtf) to find a military pharmacy near you. Call your military pharmacy, where there is no cost to fill your specialty prescriptions, and ask whether your drug is available ahead of time.
- **TRICARE Home Delivery Pharmacy Program** - Fill your specialty prescriptions through [home delivery](#). Along with your military pharmacy, home delivery from Express Scripts Pharmacy® is the best option for specialty medications and may save you money.
- **Retail Pharmacies** - Use the below find pharmacies near you for filling your specialty prescriptions:
  - Walmart 1-800-Wal-Mart <http://www.walmart.com/store/finder>
  - Sam's 1-800-Wal-Mart <http://www.samsclub.com/clublocator>
  - Walgreens 1-800-walgreens <https://www.walgreens.com/storelocator/find.jsp>
  - Kroger 1-800-576-4377 <https://www.kroger.com/stores/search>
  - Rite Aid 1-800-748-3243 <http://www.riteaid.com/pharmacy>

[Source: <https://militaryrx.express-scripts.com/find-pharmacy> / February 6, 2021 +]

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# TRICARE RETIREMENT BROCHURE

When you retire from active duty, you experience a major life change. Some parts of your TRICARE coverage will also change. Understanding your new options will help you and your family make the best health care decisions. Wouldn't it be helpful if you had a resource you could download? Now you do. Check out the TRICARE Retiring from Active Duty Brochure at:

[file:///C:/Users/User/AppData/Local/Temp/AD\\_Retire\\_Br.pdf](file:///C:/Users/User/AppData/Local/Temp/AD_Retire_Br.pdf).

Here are just a few things this brochure will help you learn.

## 1. Actions You Need to Take

When you retire, you want to make a smooth transition. Do you know what steps to take to avoid a break in your TRICARE coverage? The brochure highlights some important actions you need to take, including:

- Get a new Uniformed Services ID card.
- Update your information in the Defense Enrollment Eligibility Reporting System (DEERS).
- Decide which health plan you want to use, which will depend on your eligibility and location.
- Enroll in a plan and pay enrollment fees within 90 days of your retirement date.
- Sign up for Medicare Part B if you're entitled to Medicare Part A, if applicable.

## 2. Ways to Get Care

As a retiree, you may get care differently from when you were an active duty service member. You may or may not be seen at a military hospital or clinic. If you choose a TRICARE Prime plan, your primary care manager will provide your routine care and refer you to a provider for specialty care. If you enroll in TRICARE Select, you'll visit the TRICARE-authorized provider of your choice for routine and specialty care. The brochure also goes into details about other plans that you and your family members may be eligible for after retiring. And it discusses costs. As a retiree, you'll now pay retiree costs for care. To see what your retiree costs with your health plan will be, you can use the TRICARE Compare Cost Tool.

## 3. Options for Pharmacy, Dental, and Vision Care

As stated in the TRICARE Retiring from Active Duty Brochure, "If you have a TRICARE health care plan, you have pharmacy coverage." Your options for filling prescriptions depend on the type of drug your provider prescribes and where you live. Keep in mind, most retirees and their families have to fill select maintenance medications using the TRICARE Pharmacy Home Delivery. What about your dental and vision coverage options? The brochure introduces you to the Federal Employees Dental and Vision Insurance Program (FEDVIP), offered by the U.S. Office of personnel Management. You and your family members may qualify to purchase dental and vision coverage through FEDVIP.

[Source: TRICARE Communications | June 17, 2021]

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## SOME EXPIRED IDs VALID THROUGH JAN. 22



Retiree and certain family member identification cards that expired between Jan. 1, 2020, and July 31, 2021, will remain valid until Jan. 21, 2022, according to the Defense Human Resources Activity.

For a listing of ID card issuing sites and appointment information, visit the ID card office online at <https://idco.dmdc.osd.mil/idco/#/>.

[Source: Afterburner Vol 63-1]

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## VIRTUAL BENEFITS FAIR

*[The below message was received by the SRAO from Will Foley of FedPoint [trade name of the legal entity Long Term Care Partners, LLC® , a wholly owned subsidiary of John Hancock Life & Health Insurance Company] on July 28, 2021 and is presented here in the event you may be interested in participating in the Benefits Fair in November and December 2021.]*

“Greetings:

Mark your calendars for the 2021 Virtual Benefits Fair. Our annual event will be held throughout the Federal Benefits Open Season this fall. The Virtual Benefits Fair is an online health fair that houses 2022 plan information in a single online location, enabling federal employees to browse exhibits, view and download plan brochures, and connect with program representatives via chat. Last year, more than 43,000 people visited the fair.

Participants in this year’s event include all of the Federal Employees Dental and Vision Insurance Program (FEDVIP) carriers, more than 20 Federal Employees Health Benefits (FEHB) Program carriers, and representatives for both the Federal Long Term Care Insurance Program (FLTCIP) and the Federal Flexible Spending Account Program (FSAFEDS).

There will be four live chat days: **November 12, November 19, December 1, and December 8.** Because you are included in our registry of human resources and/or benefits contacts, **you will receive a notice when we open registration in September. This notice will include a registration link that can be shared with employees.** As we get closer to open season, we will also be able to provide you with flyers and other promotional media. I am happy to answer any questions you have about the event.

Thank you. We will be in touch.

Sincerely,

Will Foley  
Fed Point | Defense Account Manager  
Federal Long Term Care Insurance Program  
BENEFEDSP: 603.816.9994  
Email: [wfoley@fedpointusa.com](mailto:wfoley@fedpointusa.com) “

**The Virtual Benefits Fair will be available from November 8 - December 13, 2021.**



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## TRICARE OPEN SEASON

TRICARE’s 2021 Open Season will run Nov. 8 through Dec. 13, giving eligible beneficiaries a little more than a month this fall to make changes to their coverage. Anyone enrolled in, or eligible for, a TRICARE Prime or TRICARE Select plan can enroll in a plan or make changes to their coverage during this period. Updates would take effect Jan. 1, 2022. Reenrollment is not required; if you like the plan you’re in, you’ll continue with it as long as you remain eligible. Coverage changes outside Open

Season require a Qualifying Life Event (QLE). You’ll have 90 days after a QLE to make changes; a QLE for any family member allows all family members to change health plans. Get a list of these events and details on how to initiate enrollment changes after a QLE at: <https://www.tricare.mil/lifeevents>.

The TRICARE Open Season generally takes place on or near the same dates as the Federal Employees

Dental and Vision Insurance Program (FEDVIP) Open Season. FEDVIP is a separate program offering coverage to some retirees, reservists, family members, and survivors; learn more about eligibility and program details at:

<https://www.benefeds.com/eligibility>.

Servicemembers can register for FEDVIP benefits from 31 days prior to their military retirement to 60

days after their retirement, in addition to during Open Season. They may also register after QLEs, but these events may differ from TRICARE QLEs; learn more at:

<https://www.benefeds.com/education-support/qles>.

*[Source: MOAA Newsletter | Kevin Lilley |September 08, 2021]*

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### **DEPENDENCY INDEMNITY AND COMPENSATION**



January 1, 2021 begins the first phase. In 2021, surviving spouse SBP annuity payments issued by DFAS will be reduced (offset) by no more than two-thirds of the amount of DIC (issued by the VA) rather than by the entire amount of DIC, even though eligible surviving spouses will continue to receive the full amount of DIC from the VA.

Beginning January 1, 2022, the second phase, surviving spouse SBP annuity payments will be reduced (offset) by no more than one-third of the amount of DIC (issued by the VA) rather than by the entire amount of DIC, even though eligible surviving spouses will continue to receive the full amount of DIC from the VA.

On January 1, 2023, the SBP-DIC offset will be fully eliminated. That means, beginning in 2023, SBP payments will no longer be offset by DIC. Spouses will receive full SBP (issued by DFAS) and full DIC.

*[Source: (MOAA) The Standard Bearer, Vol XXXII, No. 2 February 2021]*

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### **MILITARY LENDING ACT**



The Consumer Financial Protection Bureau (CFPB) codified its stance on weeding out predatory lenders with the release last month of an interpretive rule on its enforcement of the Military Lending Act (MLA) via lender examinations. The rule “affirms the CFPB’s ongoing commitment to the financial protection of our servicemembers and their families,” Jim Rice, assistant director for the CFPB’s Office of Servicemember Affairs said in a 16 JUN press release. CFPB Acting Director Dave Uejio announced in January a policy change by the CFPB to “supervise lenders with regard to the Military Lending Act.”

Two dozen military and veterans service organizations wrote to President Joe Biden in January seeking a return to these supervisory examinations as a way to strengthen the MLA, which saves millions of dollars a year and improves readiness, per DoD estimates, by preventing currently serving members from leaving service because of financial distress. (Click to read the MSO/VSO letter). The MLA prevents lenders from charging an annual percentage rate of more than 36% on loans to military borrowers, prohibits lenders from requiring arbitration, and prevents them from charging penalties to military borrowers who pay a loan back ahead of schedule, among other protections. The supervisory exams not only protect the borrowers, but may also sound alarms for loan providers before those businesses rack up steep fines.

The Military Officers Association of America and other groups began advocating for a return to tighter MLA supervision shortly after the CFPB decided in 2018 to stop supervising lenders related to these loans, relying instead on after-the-fact complaints from servicemembers and their dependents. Per the interpretive rule, “the Bureau is no longer persuaded by counterarguments that it does not have the relevant authority” to examine these lenders.

[Source: MOAA Newsletter | Kevin Lilley | June 29, 2021]

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### DFAS STATUS NOTIFICATION SYSTEM



Defense Finance and Accounting Service [DFAS] officials recently announced an improvement for retirees and Survivor Benefit Plan annuitants.

To be eligible to receive status notifications, customers should ensure their email address is available and updated in myPay. To add or ensure an email address is up-to-date, visit myPay.

DFAS is rolling out the use of status notifications to keep customers in the loop as forms or documents they submit move through the retired pay or annuitant pay processing cycles.

The first rollout of status notifications involved submissions related to the Survivor Benefit Plan, including the DD 2656-6 for SBP changes and the DD 2656-7 SBP annuity startup form, as well as school certifications, the direct deposit form-SF 1199, and change of address requests. These were followed by requests related to federal tax changes (for retirees or annuitants), state tax changes (for retirees) and the designation of beneficiary for arrears of pay. Status notifications for additional categories of requests will be added throughout the coming year.

Status notifications are a three-step process that updates customers when DFAS receives forms or documents for processing by mail or fax, or in some specific cases, through AskDFAS. Customers will receive separate status notifications when their form or document is:

Watch for more information on status notifications and other improvements from DFAS on the DFAS retired & annuitant pay website. (Courtesy of DFAS)

1. Received and queued in the DFAS work system
2. Assigned to be worked
3. Completed, with either a notification that processing is complete or a notification that DFAS is sending a request for additional information.

[Source: Afterburner Vol 63 No. 1]

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### ARMED FORCES RETIREMENT HOME

Did you serve at least 20 years on active duty in the Armed Forces, with the majority of your service time spent as an enlisted member or warrant officer? Are you seeking to live in a vibrant and affordable independent-living retirement community with other military retirees? Then The Armed Forces Retirement Home (AFRH) may be just for you! With locations in Washington, D.C., and Gulfport, Miss. – AFRH continues to welcome new residents. Rooms are currently available at both locations with no waiting period, down payment or contract required! The monthly rate for independent living is just 46.7%

of the resident’s gross monthly income or \$2,050.00, whichever is less.

All residents must be able to live independently upon moving to AFRH. We also provide advanced levels of care to our current residents as they age in place. Many veterans choose to live at AFRH for the superior medical, dental and vision care offered, with amenities that include private rooms with a shower, three delicious daily meals prepared by licensed nutritionists in our modern dining facility, a wellness program and deluxe fitness center, movie theater,

bowling center, and numerous hobby shops, clubs, and social activities. Services include recreational activities and resident day trips, a full-service library, barber shop, beauty salon, 24/7 security, computer center, mailboxes, ATM, campus PX/NEX and convenient transportation available to local hospitals and appointments. Residents also have access to additional services such as on-site physical and occupational therapy, in-room internet and cable TV, podiatry, and counseling.

In Washington, D.C., AFRH offers residents a scenic, wooded campus just minutes from downtown -home to museums, monuments, and a host of local entertainment, sports and other cultural options. In Gulfport, Miss. AFRH offers residents a beautiful view of the Gulf of Mexico, with an outdoor swimming pool, walking path to the beach, reflecting pool, art studio and modern media room.

Veterans who do not have at least 20 years of active service time may also be eligible to live at AFRH if they have a service-connected disability of 50% or greater, or if they served in a war theater (such as in Vietnam, Kuwait, Iraq and Afghanistan) and now have an injury, disease or disability. Married couples are welcome to apply for residency at AFRH:

- If both individuals meet all military and other eligibility requirements in their own right, or
- If the eligible veteran completed at least 20 years of active service and married current spouse prior to military retirement.

Please call for details regarding married couples' fees – discounts are available! Veterans convicted of a felony or who are not free of drug, alcohol, or psychiatric problems are ineligible to become a resident.

For further information or to request an application, visit <https://www.afrh.gov/apply> or contact the Office of Public Affairs at [admissions@afrh.gov](mailto:admissions@afrh.gov) or 1-800-422-9988.

Armed Forces Retirement Home officials expect residents and staff members of the two campuses to be offered the COVID-19 vaccine “within the next week,” a spokesman said 17 DEC. The two AFRH campuses have been designated a top priority for initial deliveries of the COVID-19 vaccine, said AFRH spokesman Chris Kelly. All AFRH residents and staff members will be offered the vaccine, he said. “Our team is working diligently with the DoD to finalize logistics and to establish a vaccination start date,” he said. The average age of the residents is 83. The Washington, D.C. campus has 259 residents, and the Gulfport, Miss. campus has 439 residents.

*[Source: DFAS Newsletter & MilitaryTimes | December 17, 2020]*

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## **TRICARE SHINGLES COVERAGE**

How coverage of the shingles shot works under TRICARE is a common question among retirees. TRICARE covers the shingles vaccine two different ways – under your medical coverage, or under your pharmacy coverage. The guidance below can help you understand which one you want to use and take the appropriate action.

### **Age 64 and Under, and Not on TRICARE For Life (TFL)**

All TRICARE Prime plans, U.S. Family Health Plans (USFHP), and TRICARE Select plans cover the full cost of the shot, at no cost to you, whether administered by a pharmacy under the pharmacy coverage or at a doctor's office under the medical coverage. Beneficiaries using any TRICARE Prime plan can go to any TRICARE network pharmacy, primary care manager, or network provider. USFHP members must use their USFHP pharmacy or primary care manager. Those using a TRICARE Select plan can go to any TRICARE network pharmacy or any TRICARE-authorized provider.



## On TRICARE For Life (Normally Age 65 and Over)

Medicare is your primary health coverage under Parts A and B. Medicare covers the shingles shot **but** does so as a pharmacy issue under the pharmacy Part D insurance, **not** under Parts A or B (learn more [at this link](#)). Most military retirees do not have Part D coverage because we use our TRICARE pharmacy plan. In our cases, Medicare will not cover the shot; the entire cost falls to TRICARE For Life as your Medicare supplement. For those of you still under the USFHP, stay within your USFHP plan pharmacy or primary care managers for your coverage. Having another pharmacy program besides our TRICARE pharmacy plan disqualifies us from the TRICARE home delivery program and can cause us to file manual claims to TRICARE pharmacy for reimbursement (learn more [at this link](#)). So, *we do not want a Part D plan*.

Based on the above, TRICARE becomes your shingles shot insurance. You have two TRICARE options to get the shot.

1. The easiest and cheapest option: Use your TRICARE **pharmacy benefit coverage** by going to a TRICARE network pharmacy for the shot. You can get the shingles vaccine for free at a participating TRICARE network pharmacy. That's it.

2. Go to your doctor for the shot. This isn't the best option, because Medicare will not be picking up any of the cost for retirees. Under this option, TFL covers the shingles shot as a **medical coverage**, not pharmacy coverage. So, the process goes like this:

- You get the shingles shot at the doctor's office.
- Medicare won't cover the shot because you do not have Part D Medicare, so the total cost falls to TFL.
- TFL covers the shot as a **medical** cost not covered by Medicare Parts A nor B.
- When medical costs are not covered by Medicare, TFL deductibles and cost shares apply. The deductible is \$150 for individual coverage (\$300 for families), and you may face a 20% co-pay after the deductible (learn more about costs [at this link](#)). Bottom line: You pay for the shot. Choose wisely under TFL. Whether pharmacy or medical coverage is used makes a big difference.

[Source: MOAA Newsletter / January 7, 2021]

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## DENTAL CARE

### How Much is Enough Calcium?

When it comes to taking care of your teeth, brushing and flossing are only half the battle. You're getting the right amount of calcium matters, too. Calcium is one of the most important nutrients for your teeth. It strengthens the tooth enamel your teeth's defense against erosion and cavities and helps hold your teeth in place. The amount of calcium you need depends on your age. The National Institutes of Health recommends that

children ages 9–17 consume 1,300 mg of calcium per day by eating healthy foods. What does that much calcium look like? Here are some examples of calcium-rich foods you can add to your diet:

- Fortified oatmeal: 1 packet contains 350 mg of calcium
- Cheddar cheese: 1 ½ ounces (shredded) contain 306 mg of calcium
- Milk (nonfat): 1 serving (8 fluid ounces) contains 302 mg of calcium

- Yogurt (plain, low fat): 1 serving (8 ounces) contains 300 mg of calcium
- Soybeans (cooked): 1 serving (8 ounces) contains 261 mg of calcium
- Orange juice (fortified with calcium): 6 fluid ounces contain 200-260 mg of calcium
- Salmon (canned with edible bones): 3 ounces contain 181 mg of calcium

Be sure to check the nutrition label of specific foods to see the recommended serving size and

amount of calcium per serving. You can find many foods with high amounts of natural calcium. But there are others with an added boost. For example, fortified soy milk can be a great substitute if you don't drink milk or you're lactose-intolerant. Taking a vitamin supplement, like a multivitamin, may be another way to help you get the calcium your bones and teeth need. Want to learn more about calcium-rich foods and calcium intake?

For more information visit: [www.ods.od.nih.gov/factsheets/calcium-consumer](http://www.ods.od.nih.gov/factsheets/calcium-consumer)

*[Source: TRICARE Denial Program Newsletter | Issue 1 2021]*

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## **SURVIVING SPOUSES - PREPARING FOR THE UNPREDICTABLE**



Many women — and men — are blindsided by the death of a spouse, because couples rarely talk about the inevitable. When you are at your most vulnerable, you must make choices that will have an enduring impact. Should the body be cremated or preserved? What type of service and where will it be held? Will he or she be buried in a hometown family plot or in a national cemetery many miles away? To be better prepared for these difficult decisions, take time to have that important conversation with your spouse and your children about death and what happens after death. This conversation is a gift of love that each member of a marriage or family makes to the other.

Resources are available on MOAA.org and other websites that will help you have those conversations and make planning for the unknown perhaps a little easier. Find out who your local veteran service officer is, get to know them before you really need them, and then make sure they are the first on your list to contact. Steps to take:

- Prepare and organize important documents (such as DD Form 214, wills, living will, durable power of attorney, insurance policies, birth/marriage certificates, passwords, bank account and investment information).
- Make sure utilities are in both names.
- Open a credit card account in your name.
- Establish eligibility for burial in a VA National Cemetery.
- Make a list of helpful resources, including MOAA, the VA, AARP.org, Military OneSource,
- MOAA Minnesota Chapter “The Day After Calls,” MOAA’s Surviving Spouse Virtual Chapter, and MOAA’s Surviving Spouses and Friends Facebook group.

As spouse and surviving spouse, it is important you think about yourself and your survivors and the things they will need to know. Be prepared!

*[Source: MOAA Newsletter | Gail Joyce | June 2020]*

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## HOMELESS VETS

Veterans and their families who are homeless or at imminent risk of homelessness are strongly encouraged to contact the National Call Center for Homeless Veterans at (877) 4AID-VET (877-424-3838) for assistance. This number may also be used by them to access VA services. If they have access to a computer they can explore [www.va.gov/homeless](http://www.va.gov/homeless) to learn about VA programs for Veterans who are homeless and share that information with others.

If you see or know a person you believe to be a vet at imminent risk of homelessness you can make the call yourself. You will be asked for information about that individual such as their location and a physical description. As noted in the VA video:

[https://youtu.be/8Ngor\\_HOn5A?list=RDCMUCBvOzPLmbzjtpXHtstp2vw](https://youtu.be/8Ngor_HOn5A?list=RDCMUCBvOzPLmbzjtpXHtstp2vw) a trained VA representative team member will then be dispatched to locate the individual, verify they are a veteran, and discuss with them ways the VA can help them obtain stable housing and other ways VA can help them obtain services they may need.

If Veterans do not have access to a phone or the internet, only then are they to visit their closest VA medical center without calling in advance. VA also

urges Veterans who are not homeless or at risk of homelessness to contact their VA medical center before visiting for any reason. These steps are necessary to prevent the spread of COVID-19. Each VA facility has created separate areas or zones to isolate Veterans with possible or confirmed COVID-19 from uninfected patients who need other routine and emergent care. VA is also identifying appropriate quarantine options for Veterans who are homeless to receive treatment if they are symptomatic or screen positive for COVID-19 but are not ill enough for hospital-level care.

No Veteran Should Be Without a Place to Call Home. VA is committed to ending homelessness among Veterans. Their focus is threefold:

- Conducting coordinated outreach to proactively seek out Veterans in need of assistance.
- Connecting homeless and at-risk Veterans with housing solutions, health care, community employment services and other required supports.
- Collaborating with federal, state and local agencies; employers; housing providers, faith-based and community nonprofits; and others to expand employment and affordable housing options for Veterans exiting homelessness.

[Source: <https://www.va.gov/homeless> | March 4, 2021]

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## DEERS REMINDER



When TRICARE officials tried reaching a group of retirees with critical information recently, more than 6 out of 10 had incorrect information in DEERS.

To maintain medical benefits and receive crucial health care and benefit communications, retirees and surviving spouses must maintain accurate information in the Defense Enrollment Eligibility Reporting System.

Beneficiaries need to update their information in DEERS so that health care teams can contact people with critical healthcare and appointment information; vital authorizations; claims; and enrollment information.

Retirees and surviving spouses enrolled in any TRICARE plan need to update DEERS as soon as possible anytime they move, change contact information, or experience a qualifying life event such as:

- Change in sponsor’s status
- Having a baby or adopting
- There is a change in a student’s full-time enrollment status
- Becoming eligible for Medicare
- Death of sponsor or family member
- Marriage or divorce

For a more extensive list of qualifying events, visit the TRICARE website.

Besides notifying DEERS, beneficiaries should also notify their regional contractor. To learn how to update DEERS, visit <https://www.TRICARE.mil/DEERS>; call 800-538-9552 (TTY/TDD: 1-866-363-2883); fax updates to 800-336-4416 (primary) or 502-335-9980 (alternate); or mail updates to Defense Manpower Data Center Support Office, Attn: COA, 400 Gigling Road, Seaside, CA 93955-6771. (Courtesy of Defense Health Agency).

[Source: Afterburner Vol 63-1]

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**AIR FORCE DEBUTS NEW RECORDS CORRECTION WEBSITE**



ARLINGTON, Va. -- The Department of the Air Force debuted a new website for past and present Airmen and Guardians to correct their military records, April 5.

Members, and those submitting on their behalf, can submit applications and supporting documents to four boards: The Air Force Board for Correction of Military Records, Air Force Discharge Review Board, Department of Defense Discharge Appeal Review Board and Department of Defense Physical Disability Board of Review.

"Across the Air Force, our workload kept increasing with more and more applications for records corrections, but without a corresponding increase in manpower," said Clifford Tompkins, Air Force Review Boards Agency mission support director. "We had to become more efficient and one area identified was the amount of physical time that it took to handle hard-copy mail, so the idea of having an electronic way that people can apply, made sense."

The Air Force Review Boards Agency has worked on the new website since last year to improve efficiency for record corrections. To make the portal accessible to both current and former service members, the website does not require a Common Access Card. Instead, a unique e-application number will be provided to track each case.

Despite the launch of the website, people can still submit applications via mail; however, processing times may be slower. People can use their unique e-application number to check the status of their application, whether it was submitted online or via mail.

"In the application portal, we designed a decision tree that guides members through the process of figuring out which board they should apply to and determine their eligibility to apply based on their service and the issue they're trying to get corrected for the records," Tompkins explained.

Additionally, the website will serve as a single source of information on other boards:

- Air Force Civilian Appellate Review Office
- Air Force Personnel Board

- Civilian and Military Service Review Board
- Secretary of the Air Force Personnel Council
- Secretary of the Air Force Remission Board
- Security Protection Directorate

"Our intent is to provide updated and unified information through this single site, describing all of our boards, their requirements, eligibility and the methods for applying to those boards," Tompkins said.

Visit the records correction website at <https://Afrba-portal.cce.af.mil>.

*[Source: Afterburner Vol 63-1 (Tech. Sgt. Areca T. Wilson Secretary of the Air Force Public Affairs)]*

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### **TRICARE OPEN SEASON**

TRICARE’s 2021 Open Season will run Nov. 8 through Dec. 13, giving eligible beneficiaries a little more than a month this fall to make changes to their coverage. Anyone enrolled in, or eligible for, a TRICARE Prime or TRICARE Select plan can enroll in a plan or make changes to their coverage during this period. Updates would take effect Jan. 1, 2022. Reenrollment is not required; if you like the plan you’re in, you’ll continue with it as long as you remain eligible. Coverage changes outside Open Season require a Qualifying Life Event (QLE). You’ll have 90 days after a QLE to make changes; a QLE for any family member allows all family members to change health plans. Get a list of these events and details on how to initiate enrollment changes after a QLE at <https://www.tricare.mil/lifeevents>.

The TRICARE Open Season generally takes place on or near the same dates as the Federal Employees Dental and Vision Insurance Program (FEDVIP) Open Season. FEDVIP is a separate program offering coverage to some retirees, reservists, family members, and survivors; learn more about eligibility and program details at <https://www.benefeds.com/eligibility>. Servicemembers can register for FEDVIP benefits from 31 days prior to their military retirement to 60 days after their retirement, in addition to during Open Season. They may also register after QLEs, but these events may differ from TRICARE QLEs; learn more at <https://www.benefeds.com/education-support/qles>.

*[Source: MOAA Newsletter | Kevin Lilley |September 08, 2021]*

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### **MEDICARE AND LONG-TERM CARE BENEFITS**

#### **LONG TERM CARE BENEFITS**

Original Medicare will pay for services in a skilled nursing home and some home health services. Medicare Advantage Plans are required to provide the same benefits, however they may charge different copays and/or change the eligibility standards.

#### **SKILLED NURSING FACILITY (SNF)**

You can receive care in a skilled nursing facility for a limited number of days (Original Medicare helps pay costs for up to 100 days in a benefit period) if your doctor decides that you require *skilled* care after a hospital



stay. The facility must be certified by Medicare. *Skilled* care means services are provided by skilled nursing or rehabilitation staff, such as a nurse or physical therapist.

### Your Skilled Nursing Facility Costs under Original Medicare

- Days 1 - 20: \$0 for each **Benefit period**
- Days 21 - 100: \$170.50 **Coinsurance** per day of each benefit period
- Days 101 and beyond: all costs

*If you selected a Medicare Advantage Plan, your costs will vary based on that specific plan.*

### HOME HEALTH SERVICES

If your doctor decides that you are **home-bound** (your condition keeps you from leaving home without significant effort), then you may be eligible for home health services under hospital insurance (Part A) and medical coverage (Part B). Covered services may include (but are not limited to):

- Intermittent skilled nursing care
- Rehabilitation (physical/occupational/speech therapy)
- Assistance with activities of daily living
- Medical supplies/equipment to use at home

Services must be ordered by a physician and provided by a Medicare-certified home health agency for Original Medicare enrollees. Medicare Advantage Plan members must use a home health agency that accepts their plan's payment.

### WHAT IS NOT COVERED BY MEDICARE?

Custodial care is help with personal care needs such as dressing or bathing. If the **ONLY** type of care you need is custodial, then Medicare will not pay for your care in a nursing home or in your own home. Medicare may cover medical and rehabilitation services provided in an Assisted Living Facility, such as home health care ordered by your provider, but typically will not cover the costs of the facility – such as rent and meals.

*[Source: Medicare Benefits and Long Term Care - Geriatrics and Extended Care (va.gov) July 21, 2021]*

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### TRICARE NON-COVERAGE OF DEXILANT



A recent article addressing MOAA's work to improve TRICARE pharmacy coverage resonated with frustrated members, and many contacted them to share their experiences with the TRICARE pharmacy program. MOAA appreciates member feedback and will use these stories to build support for their pharmacy priorities as the FY 2022 National Defense Authorization Act (NDAA) moves forward.

Many MOAA members were surprised to learn nearly 19,000 beneficiaries have been negatively impacted by TRICARE's non-coverage of Dexilant, a drug treating gastroesophageal reflux disease (GERD) and used in the maintenance of healed erosive esophagitis. Among those who reached out to MOAA were two surviving spouses in their 90s:

- "I am a military widow, 94 years of age, and was on the medication Dexilant for 11 years with absolutely no problems, before TRICARE eliminated it. I have been on a number of medications to replace Dexilant

and none were effective. On June 20, 2021, I was taken to the ER where I was misdiagnosed with a heart attack, because my GERD was not under control since I was not on Dexilant. I appreciate you in trying to get Dexilant reinstated to the Tricare Formulary system as are the other 19,000 patients.”

- “I read your article and wanted to let you know I am one of the people affected by TRICARE’s decision to eliminate coverage for Dexilant. My doctor has been giving me samples, but at my last appointment she said she was running out. I’m afraid I won’t be able to get more and then my pain will return. I’m 91 years old and just trying to get through without suffering every day.”

Servicemembers and their families make extraordinary sacrifices in support of our nation. Their health care benefit should provide comprehensive coverage that is at least on par with commercial plans. MOAA’s research shows most commercial plans and other government payers cover Dexilant, so they have been focused on getting the drug reinstated to the TRICARE formulary. TRICARE formulary decisions involve a lengthy multistep review process required by statute. Where does Dexilant stand in that process? In February, the DoD Pharmacy and Therapeutics Committee reevaluated its non-coverage decision for Dexilant. The next step is a review by the Beneficiary Advisory Panel (BAP), but the BAP was suspended earlier this year as part of a zero based review of DoD Advisory Committees. The panel is preparing to reconvene, and MOAA expects a meeting announcement shortly.

*[Source: MOAA Newsletter| Karen Ruedisueli | August 24, 2021]*

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## TRICARE & MARRIAGE

### WHAT TO DO WHEN GETTING MARRIED



It’s a big moment when you say “I do.” It’s also important for your family health coverage. Spouses of service members are eligible for TRICARE coverage. And [getting married](#) is a TRICARE [Qualifying Life Event](#) (QLE). So, what does this mean and what steps do you need to take? “Getting married gives you an opportunity to look at your current health coverage, add a newly eligible family member, or make a change to existing coverage, if you choose,” said Valerie Palmer, management and program analyst

with the Policy and Programs Section of the TRICARE Health Plan at the Defense Health Agency. “With TRICARE, you have several excellent plan options to choose from depending on which TRICARE plan best meets your family’s health care needs.”

### HOW IS GETTING MARRIED A QLE?

Getting married is one of TRICARE’s QLEs, like giving birth, moving, or retiring. These life changes may mean different [health plans](#) are available to you and your family. And they allow you to make eligible enrollment changes outside of [TRICARE Open Season](#). As outlined in the [TRICARE Qualifying Life Events Fact Sheet](#), you can stay in the same plan, change plans, or enroll in a plan after a QLE. These rules apply to [TRICARE Prime](#) and [TRICARE Select](#). If you use [TRICARE For Life](#), marriage would be a QLE for your spouse if they’re under age 65. And keep in mind that premium-based plans ([TRICARE Reserve Select](#), [TRICARE Retired Reserve](#), [TRICARE Young Adult](#), and the [Continued Health Care Benefit Program](#)) offer continuous open enrollment throughout the year. You can read the [TRICARE Plans Overview](#) or use the [TRICARE Plan Finder](#) to learn about your family’s plan eligibility and options. Remember that different family members may be eligible for different plans.

## WHAT ACTIONS DO I NEED TO TAKE AFTER GETTING MARRIED?

After getting married, your spouse's options will depend on your military status and where you live. [Eligible children](#) may also gain TRICARE coverage. First, register your new spouse in the [Defense Enrollment Eligibility Reporting System](#) (DEERS), so they're eligible to get TRICARE benefits. You must update DEERS before contacting your [TRICARE contractor](#) to make any changes to your or your family member's health care coverage. To add your spouse to DEERS, you'll need to visit an [ID card office](#). Bring the original or certified copies of the [following documents](#):

- Marriage certificate
- Spouse's birth certificate
- Spouse's Social Security card
- Spouse's photo ID

You may also register [eligible children as dependents](#) until age 21 (or up to age 23 if in college) the same way. This includes unmarried biological children, stepchildren, and adopted or court-placed children. At age 21 or 23, they may qualify to purchase [TRICARE Young Adult](#). Bring [their documents](#) to your appointment as well:

- Birth certificate
- Social Security card
- Marriage certificate (for stepchild)

Finally, follow the steps to [enroll in a plan](#). You can do this online, by phone, or by mail. If you have questions, call your [regional contractor](#). Remember that the effective date of coverage will be the date of your QLE. In this case, this will be the date of the marriage. Your health plan coverage will continue unless you lose eligibility or dis-enroll from the plan.

## DO QLES IMPACT OTHER ELIGIBILITY?

When you gain access to TRICARE health coverage, you gain access to TRICARE [pharmacy](#) and [vision](#) benefits. The [TRICARE Dental Program](#) is offered to family members of active duty service members and National Guard and Reserve members. Some TRICARE beneficiaries can also enroll in dental and vision plans through the [Federal Employees Dental and Vision Insurance Program](#).

## How long does a new spouse have to enroll in TRICARE?

You have 90 days from the date of your marriage to change health plans or enroll any new eligible family members, if you choose. If you miss this window of opportunity that the [marriage QLE](#) provides, you'll have to wait until open season or another QLE to seek coverage. Once you're back from your honeymoon, act quickly. Learn more about your TRICARE health plan options after you [get married](#), and take command of your health with TRICARE.

*[Source: Tricare Newsroom | July 13, 2021]*

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## TRICARE DIVORCE IMPACT



If you're getting divorced, the future may seem uncertain. One question in your mind may be whether you'll still be eligible for

TRICARE. The answer depends on your sponsor status, length of your marriage, and other factors. "After a divorce, the sponsor and both the sponsor's biological and the sponsor's adopted children remain eligible for TRICARE," said Mark Ellis, chief of the Policy Programs Section



of the TRICARE Health Plan at the Defense Health Agency. “The former spouse only remains eligible for TRICARE if he or she meets certain criteria, and any stepchildren of the sponsor which the sponsor did not adopt lose eligibility.”

### **I’M THE SPONSOR. WHAT DO I DO?**

After the divorce is final, you must bring a certified copy of the divorce decree or annulment to a local [ID card office](#). This way, information in the Defense Enrollment Eligibility System (DEERS) can be updated. Because getting divorced is a TRICARE Qualifying Life Event (QLE), you and your eligible children may make changes to your TRICARE Prime or TRICARE Select health plans. You have 90 days after the divorce to do so, if you choose to do so. Check out the TRICARE Qualifying Life Events [Fact Sheet](#) to learn more about QLEs. And you can learn more about plan options with the [TRICARE Plans Overview](#).

### **I’M THE FORMER SPOUSE. HOW DO I KNOW IF I REMAIN ELIGIBLE?**

You remain eligible for TRICARE only if you meet certain criteria. Your sponsor’s military Service Component is responsible for determining your continuing eligibility. If you and your sponsor are separated or living apart, but not divorced, you keep TRICARE benefits. After a divorce, you may be eligible for TRICARE coverage if you fit into one of the following scenarios:

**20/20/20:** Under the 20/20/20 rule, you keep TRICARE health care benefits for as long as you remain eligible if:

- You were married to the service member for at least 20 years,
- The service member served in the armed forces for at least 20 years, and
- The marriage and the period of service overlapped for at least 20 years.

**20/20/15:** Under the 20/20/15 rule, you keep TRICARE health care benefits for one year if:

- You were married to the service member for at least 20 years,

- The service member served in the armed forces for at least 20 years, and
- The marriage and the period of service overlapped for at least 15 years.

If you don’t meet these criteria, you stay eligible up until the day the divorce is final. If the sponsor didn’t adopt his or her stepchildren, they also lose eligibility once the divorce is final.

### **I’M A FORMER SPOUSE WHO IS STILL ELIGIBLE BASED ON CRITERIA ABOVE. WHAT DO I DO NEXT?**

To establish eligibility, bring your marriage certificate, divorce decree, and proof of service (DD Form or Statement of Service from the applicable Service Personnel Component) to your local ID card office. “If you meet the former spouse requirements, you’ll be listed in DEERS under your own Social Security number or Department of Defense Benefits Number, not your sponsor’s,” said Ellis. When you qualify for TRICARE as a former spouse, you have the same benefits as a retired family member, and your health plan [options](#) depend on where you live. Keep in mind, you’ll lose TRICARE benefits if you remarry or enroll in an employer-sponsored health plan.

### **I’M THE FORMER SPOUSE AND DON’T QUALIFY TO KEEP TRICARE. WHAT ARE MY OPTIONS?**

If you don’t meet the requirements, you stay eligible up until the day the divorce is final. After that, you still have health care options. You may:

- Purchase temporary transitional coverage through the Continued Health Care Benefit [Program](#)
- (CHCBP). You must apply for CHCBP within 60 days from the date of the divorce. CHCBP coverage isn’t available to you if your sponsor served in NATO or Partners for Peace. Certain former spouses who haven’t remarried before age 55 may qualify for an unlimited duration of coverage.

- Search the Health Insurance [Marketplace](#) to find a civilian health plan or check eligibility for Medicaid in your state.
- Get coverage through your employer, school, or university.

**CONTINUING ELIGIBILITY FOR CHILDREN**

The sponsor’s biological and adopted children remain eligible for TRICARE after divorce. However, the sponsor’s children will lose eligibility when they turn age 21 (or 23 if in

college), marry, or serve on active duty. Once no longer eligible due to age, children up to the age of 26 may qualify to purchase [TRICARE Young Adult](#). If the sponsor didn’t adopt his or her stepchildren, they lose eligibility once the divorce is final. In that case, you may want to explore other health care coverage options available through an employer or the Health Insurance Marketplace.

Going through a divorce is hard. But you have health plan options for the road ahead. Learn more about [TRICARE coverage after divorce](#).

[Source: <https://www.tricare.mil/divorce> | March 26, 2021]

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**VET BENEFITS ~ REMARRIAGE**

Recent changes in law, including some stemming from legislation signed this month, have changed what remarriage will mean for you and your earned benefits. MOAA has heard from members seeking remarriage guidance, with many covered by the situations listed below. These represent some of the top remarriage concerns as they relate to finance.

**SITUATION 1: A RETIREE IS REMARRYING, AND THEIR FORMER SPOUSE HOLDS THE SURVIVOR BENEFIT PLAN (SBP).**

Once a former spouse is awarded SBP due to a legal divorce document, only a change to the legal document — or the death of the former spouse — will release the SBP back to the retiree. These actions allow the retiree to change the beneficiary to the current spouse. The ex-spouse and current spouse cannot be covered simultaneously.

**SITUATION 2: A SURVIVING SPOUSE WANTS TO REMARRY AND HAS CONCERNS ABOUT SBP AND DEPENDENCY AND INDEMNITY COMPENSATION (DIC) PAYMENTS.**

One’s age at remarriage can affect survivor benefits. If you are 55 years old or greater, SBP and DIC payments will continue after you get remarried. If you are younger than 55, both SBP and DIC payments will be suspended. If the remarriage ends, payments can start again. (While it’s a completely different topic, those with questions about the process eliminating the DIC offset from SBP payments can find answers at [this link](#).)

Unless you remarry another military retiree, all other military benefits stop during the remarriage (TRICARE and ID card-related). If the remarriage ends, ID card-related benefits will return, but TRICARE benefits are lost forever. If you have remarried a military retiree, all of these benefits will continue. If the retiree dies, survivor programs and benefits (including TRICARE) will start — unless the SBP is owned by a former spouse.

Regarding Social Security: Survivor payments continue for remarriages at/after age 60 (or age 50 if you’re disabled). If you are the divorced spouse of a worker who dies, you could get survivor benefits as long as your marriage lasted 10 years or more. To collect a survivor benefit, you must be age 60 or caring for a child

under age 16. As for retirement benefits, at age 62-plus, you can get retirement benefits on your new spouse's work if those benefits are higher. As a former spouse, you also have eligibility to a retirement benefit based on your ex-spouse's work record beginning at your age 62. See the Social Security pamphlets (downloadable PDFs) on [retirement](#) and [survivors](#) for more details.

**SITUATION 3: A FORMER SPOUSE IS AWARDED RETIRED PAY FROM A MILITARY RETIREE AND IS CONCERNED ABOUT WHAT HAPPENS TO THE RETIRED PAY IF THE FORMER SPOUSE REMARRIES.**

Was the retired pay awarded by the divorce court? If so, the retired pay was awarded to the former spouse by legal means and is in the divorce decree. Unless something about remarriage was stipulated in the divorce decree, the retired pay will continue to the ex-spouse. The only ways to change or stop the retired pay to a former spouse are:

- The former spouse gives up the payment through legal means (amended decree), or
- The former spouse dies. Upon the death of a former spouse, notify the pay agency with a death certificate and retired pay will be restored to the retiree. If the retired pay is being given voluntarily to the former spouse by the retiree with no legal direction, then the retiree controls where the money goes. All service members can find information on former spouse issues via the Defense Finance and Accounting Service at <https://www.dfas.mil/Garnishment/usfspa>.

**SITUATION 4: A RETIREE REMARRIES AND WANTS TO START SPOUSE BENEFITS?**

The SBP is suspended and no premiums are paid when a retiree does not have a beneficiary, like after a divorce or death of a spouse. To restart your SBP, make sure you notify DFAS (or your Coast Guard pay agent) within the first year of your remarriage. SBP will start again on the first anniversary unless your former spouse has the SBP. You can only have one SBP beneficiary: your spouse or your former spouse, not both. You will owe back premiums if you forget to notify your pay agency until after the first anniversary. Retirees have three SBP options after remarriage:

- Stay at your current coverage level.
- Increase your coverage level if your current coverage is less than the maximum coverage. The higher premium is retroactive, so you will owe the back premiums, plus interest.
- Cancel the coverage with spouse approval. Take your new spouse to the ID card office for an ID card and enrollment in the DEERS-TRICARE registration system.

**SITUATION 5: YOU DIVORCED A SERVICE MEMBER AND QUALIFIED FOR BENEFITS UPON DIVORCE (20/20/20 RULE).**

Upon remarriage, TRICARE health care is lost forever. Other ID card benefits are suspended until the remarriage ends. If you remarry a military retiree, all of these benefits will continue.

*Source: MOAA Newsletter | January 14, 2021]*

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**MHS NURSE ADVICE LINE**



When it comes to staying healthy, TRICARE knows having health and safety resources you can count on matters. One of those resources is round-the-clock health care advice? If you ever have health-related questions or concerns, the Military Health System (MHS) Nurse Advice Line is available 24/7 and at no cost to you. “Minor injuries can happen anywhere and at any time,” said U.S. Public Health Service Lt. Bobby Taylor, MHS Nurse Advice Line program manager. “Whether you have sick child or need health care

advice while traveling, the MHS Nurse Advice Line connects you to a registered nurse who can help you safely treat a non-emergency injury or illness from wherever you are.”

Depending on the severity of your injury or health concern, the nurse you speak with may help you get care at a nearby urgent care or emergency care facility. Your nurse can also:

- Provide evidence-based instructions to treat minor ailments at home
- Answer your health care questions
- Assess your symptoms and recommend the level of care you need
- Help you schedule an appointment within 24 hours at a military hospital or clinic (if you’re enrolled to one and were recommended by the nurse)

Nurses are available 24/7. Your options for connecting with one include starting a secure web chat or video chat on the MHS Nurse Advice Line website <https://mhsnurseadvice.com>. You can also call and speak to a nurse by phone. If you’re in the U.S., Guam, or Puerto Rico, call 1-800-TRICARE (**1-800-874-2273**) and choose option 1. For other country-specific numbers, you can find them on the website. Keep in mind, there’s no cost to use the MHS Nurse Advice Line. You just need to be a TRICARE beneficiary living or traveling in the U.S. or in a country with a military hospital or clinic. However, if you’re enrolled in the US Family Health Plan, you have a separate nurse advice line you can use. Remember, the MHS Nurse Advice Line isn’t for emergencies that threaten your life, limb, eyesight, or safety. If you reasonably think you have an emergency, call 911 or go to the nearest emergency room.

Did you know that the MHS Nurse Advice Line can help if you think you’re experiencing COVID-symptoms? A nurse will assess your condition and recommend [steps to take](#) based on guidance from the Centers for Disease Control and Prevention. Keep in mind, you should only use the advice line if you think you’ve been exposed to COVID-19 or you think you have symptoms. For general COVID-19 information, such as updates on the COVID-19 vaccine, visit TRICARE’s COVID Guidance website at <https://www.tricare.mil/coronavirus>. “The MHS Nurse Advice Line is committed to providing you with health care advice you can trust,” Taylor added. “So, take command of your health, and use this benefit whenever you need it.



*[Source: TRICARE Communications / March 22, 2021]*

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### **FREEDOM ISN'T FREE**

Have you ever wondered what happened to the 56 men who signed the Declaration of Independence?

- Five signers were captured by the British as traitors, and tortured before they died.
- Twelve had their homes ransacked and burned.
- Two lost their sons serving in the Revolutionary Army; another had two sons captured.
- Nine of the 56 fought and died from wounds or hardships of the Revolutionary War.
- They signed and they pledged their lives, their fortunes, and their sacred honor.



What kind of men were they?

- Twenty-four were lawyers and jurists.
- Eleven were merchants, nine were farmers and large plantation owners; men of means, well educated, but they signed the Declaration of Independence knowing full well that the penalty would be death if they were captured.
- Carter Braxton of Virginia, a wealthy planter and trader, saw his ships swept from the seas by the British Navy. He sold his home and properties to pay his debts and died in rags.
- Thomas McKeam was so hounded by the British that he was forced to move his family almost constantly. He served in the Congress without pay, and his family was kept in hiding. His possessions were taken from him, and poverty was his reward.
- Vandals or soldiers looted the properties of Dillery, Hall, Clymer, Walton, Gwinnett, Heyward, Rutledge, and Middleton.
- At the battle of Yorktown, Thomas Nelson, Jr., noted that the British General Cornwallis had taken over the Nelson home for his headquarters. He quietly urged General George Washington to open fire. The home was destroyed, and Nelson died bankrupt.
- Francis Lewis had his home and properties destroyed. The enemy jailed his wife, and she died within a few months.
- John Hart was driven from his wife's bedside as she was dying. Their 13 children fled for their lives. His fields and his grist-mill were laid to waste. For more than a year he lived in forests and caves, returning home to find his wife dead and his children vanished.

So, take a few minutes and silently thank these patriots. Remember: freedom is not and was never free! We need to thank these early patriots, in prayers, words, and deeds, as well as those patriots that are now still fighting to keep our freedom! We owe it to them to proclaim our patriotism now.

[Source: *Baguio Newsletter 01 August 2021*]

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### ***CO-DIRECTORS' COMMENTS***

We thought that placing the above article in the newsletter might generate some interest in volunteering at the SRAO. Unlike the signers of the Declaration of Independence, volunteers at the SRAO aren't expected to pledge their lives and fortunes, etc. All we ask is for a few hours a week of your time to staff the office. We could really use the assistance. Therefore, if any of you can spare a few hours of your time, we would greatly appreciate the assistance. We'll provide training and equip you with excellent working conditions and association with great co-volunteers. Give us a call or send an email and we'd be pleased to communicate further.

Sincerely,  
Maj Don Starzyk, USAF (Ret)  
Cpt Ross Rizzo, USAF (Ret)  
Co-Directors

