



# ARMY FAMILY ACTION PLAN

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**"AFAP...Changing the Army One Issue at a Time"**

*11-15 January 2010*

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# Mobilization, Deployment and Family Readiness Strengths

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1. Army Community Service including Army Family Action Plan, Army Family Team Building, Financial Counseling, Survivor Outreach Services, Family Advocacy, Volunteer Program, New Parent Support, etc.
2. Army Wounded Warrior Program
3. Chaplains' Programs including Strong Bonds and Unit Ministry Team, etc.
4. Army Family Covenant and Community Covenant
5. Morale, Welfare and Recreation Programs including Fitness, Better Opportunity for Single Soldiers, Leisure Travel, and other Recreation Programs



# Mobilization, Deployment and Family Readiness Challenges

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1. High Suicide Rate
2. Length of Deployments
3. Impact of Deployment on Children and Youth
4. Duplicate Programs (e.g., ACS and Family Assistance Centers and Support for Wounded Warriors)
5. Funding for Family and Deployment Support Programs



# Critical 6 Active AFAP Issues

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1. Issue 524: Military Spouse Unemployment Compensation
2. Issue 465: Reserve Component Post Mobilization Counseling
3. Issue 596: Convicted Sex Offender Registry
4. Issue 604: Retroactive Traumatic Service Member Group Life Insurance
5. Issue 628: Bereavement Permissive TDY
6. Issue 620: Medical Entitlements for College Age Family Members



# Top 5 Conference Issues

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1. Monthly Stipend to Ill/Injured Soldiers for Non-Medical Caregivers
2. Funding Service Dogs for Wounded Warriors
3. Behavioral Health Service Shortages
4. Family Readiness Group External Fundraising Restrictions
5. Exceptional Family Member Program Enrollment Eligibility for Reserve Component Soldiers



# Workgroup Briefings

*Army Family Action Plan...*  
*Changing the Army One Issue at a Time*



# Work Group: Employment

Spokesperson: Kevin Herman



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## **TITLE:** Compensatory Time for Department of the Army Civilians

**SCOPE:** DA Civilians who work irregular or occasional overtime receive compensatory time at a disproportionate rate than overtime pay. Compensatory time is granted at one-hour off for each hour of overtime worked. Overtime pay is usually paid at 1.5 times the hourly rate. Receiving one compensatory hour for each overtime hour neither acknowledges nor compensates the employee for the impact of lost evenings or weekends.

**RECOMMENDATION:** Increase compensatory time for DA Civilians to 1.5 hours off for each hour of overtime worked.



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**TITLE:** Reserve Component Government Employees' and their Family Members' Access to TRICARE Reserve Select

**SCOPE:** Individuals eligible for health insurance under the Federal Employees Health Benefits (FEHB) Program and their Family members who serve as Reserve Component (RC) Personnel are excluded from TRICARE Reserve Select (TRS) under Public Law 109-364, the 2007 John Warner National Defense Authorization Act. In contrast, a military retiree who becomes a federal employee can choose to enroll in TRICARE in lieu of one of the FEHB programs; however, RC Personnel who become eligible for FEHB by employment or marriage does not have this option. Providing RC Personnel the option of their health care benefit program would positively impact job satisfaction and allow them to take full advantage of their benefits.

**RECOMMENDATION:** Provide all Government employees and their Family members who serve in the RC with the option of selecting either FEHB Program or TRS.



# Work Group: Family Support I

Spokesperson: Vanessa Goodwin



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## **TITLE:** Exceptional Family Member Program Enrollment Eligibility for Reserve Component Soldiers

**SCOPE:** Reserve Component (RC) Soldiers are ineligible for enrollment in the Exceptional Family Member Program (EFMP). Army Regulation 608-75 dated 22 November 2006, paragraph 1-7a. (2) states mobilized and deployed Soldiers are not eligible for enrollment in EFMP. In order to be eligible for all benefits of the EFMP, you must be enrolled. Enrollment allows EFMP to expedite the process of identifying and providing support to eligible RC Soldiers and Families.

**RECOMMENDATION:** Authorize RC Soldiers enrollment in the EFMP.



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**TITLE:** Availability of 24/7 Child Care within Child, Youth and School Services Delivery Systems

**SCOPE:** Many Garrisons' Child, Youth and School Services (CYSS) do not provide 24/7 child care, which do not account for non-traditional work schedules or additional responsibilities and duties. Although CYSS has some existing programs, they have not been implemented Army wide and are not available for use by all CYSS patrons. Numerous caregiver arrangements financially burden Families, strain morale, and are not in the "best interest" of the child. Multiple Delivery Systems are needed to account for all age groups during these non-traditional hours.

**RECOMMENDATION:** Require the availability of 24/7 child care for all age groups through CYSS Delivery Systems at all United States Army Garrisons.



# Work Group: Family Support II

Spokesperson: Dale Alexander



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**TITLE:** Supplemental Mission Funds for Reserve Component Family Readiness Groups

**SCOPE:** Reserve Component (RC) Family Readiness Groups (FRGs) are not authorized Supplemental Mission Funds. Reserve Component FRGs are expected to perform the same functions as Active Component FRGs with less funding. Supplemental Mission Funds will permit the RC to accept and manage donations from outside sources. Supplemental Mission Funds augment FRG Informal Funds, reducing the stress of additional fundraising. Supplemental Mission Funds will allow RC FRGs to further connect Families and focus on their mission.

**RECOMMENDATION:** Authorize Supplemental Mission Funds for RC FRGs.



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## **TITLE:** Family Readiness Group External Fundraising Restrictions

**SCOPE:** Family Readiness Group (FRG) informal funds can only be obtained through unsolicited donations and fundraising efforts on a military installation or through the Unit membership. DoD 5500.7-R (Joint Ethics Regulation) Section 2, 3-210a (6) (Fundraising and Membership Drives) and AR 608-1 (ACS), Appendix J (FRG Operations) restrict external fundraising. Without external fundraising capabilities, the majority of the funds raised come from within the FRG membership. External fundraising will ease the financial burden placed on Soldiers and Family Members.

**RECOMMENDATION:** Authorize FRGs to fundraise in public places external to National Guard Armories, Reserve Centers and military installations.



# Work Group: Housing & Facilities

Spokesperson: Terry Rasch



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## **TITLE:** Standard Level of Security Measures in Barracks

**SCOPE:** Security measures in the barracks are not standardized Army-wide. The Office of the Assistant Chief of Staff for Installation Management has authorized security standards in its Installation Design Standard. However, not all existing barracks are being upgraded to the same level of security and additional measures are needed. Without standard security measures, Soldiers' welfare and protection of their personal belongings are at risk of being compromised.

### **RECOMMENDATION:**

1. Require the installations of visual monitoring systems for surveillance of hallways, common areas and parking lots for barracks Army wide.
2. Require keyless entry and peep holes in barracks Army wide.



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## **TITLE:** Standardization of Privatized Housing Application Process

**SCOPE:** The privatized housing application process is not standardized across installations. Multiple partners manage privatized housing at CONUS installations and each utilizes their own application process. The lack of a uniform standard allows for inconsistencies in the application process requirements such as: applying online, faxing orders upon receipt or submitting in-processing paperwork upon arrival at the gaining installation. The stress of relocation is intensified by a lack of predictability in the application process.

**RECOMMENDATION:** Standardize the housing application process across privatized installations.



# Work Group: Medical & Dental I

Spokesperson: Dianna Brice



## **TITLE:** Behavioral Health Services Shortages

**SCOPE:** Soldiers, Retirees, Family Members and previously deployed DA Civilians are not able to access timely behavioral health services needed for their treatment and recovery because of the shortage of providers. Between Jun-Oct 09, the Army lost 72 Psychiatrists and 50 Psychologists and reported an unmet requirement of 923 behavioral health providers. The shortage of behavioral health services impacts individual health and ultimately contributes to the rising suicide rates, drug and alcohol abuse.

### **RECOMMENDATION:**

1. Increase the number of readily available behavioral health providers and services.
2. Increase the use of alternative methods of delivery such as tele-Medicine.



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## **TITLE:** Active Duty Family Members Prescription Cost Share Inequitability

**SCOPE:** There is an inequality of prescription (Rx) cost share benefits for Active Duty Family Members (ADFM) not enrolled in a Military Treatment Facility (MTF). Rx's filled at a MTF are provided at no cost. ADFMs not enrolled at a MTF utilizing retail or mail order pharmacies are required to pay cost shares. These ADFMs incur cost share fees (\$3 generic, \$9 brand, \$22 non-formulary, per Rx, per ADFM) which quickly add up for multiple Rx requirements (i.e., AW2, EFMP, etc.). These additional expenses are inequitable and create a financial burden above those who acquire from the MTF.

**RECOMMENDATION:** Eliminate Rx cost shares for ADFM not enrolled at a MTF.



# Work Group: Medical & Dental II

Spokesperson: Christopher Dunning



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## **TITLE:** TRICARE Allowable Charge Reimbursement of Upgraded/Deluxe Durable Medical Equipment

**SCOPE:** When the TRICARE beneficiary chooses an upgraded/deluxe Durable Medical Equipment (DME), they must pay full cost out-of-pocket with no reimbursement for the TRICARE allowable charge. DME providers are limited to accepting the TRICARE allowable charge as payment in full for the medically necessary standard DME. Purchasing the upgraded/deluxe DME could improve patient compliance, quality of life, comfort or function. Reimbursement of the TRICARE allowable charge offsets the increased cost of the upgraded/deluxe DME incurred by the TRICARE beneficiary.

**RECOMMENDATION:** Authorize reimbursement of the TRICARE allowable charge for the standard DME when a patient chooses an upgraded/deluxe DME.



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## **TITLE:** Extended Transitional Survivor Spouses' TRICARE Medical Coverage

**SCOPE:** Transitional Survivor Spouses maintain enrollment in the TRICARE Prime for only three years. This status change requires medical coverage at the retiree payment rate. In FY01, legislation changed the survivor spouse transition period from one to three years. In FY06, Congress extended the eligibility of survivor dependent children coverage. The transition period after a death is stressful and challenging for surviving Family Members. The extension of Transitional Survivor Spouses' TRICARE Prime will provide additional time for rebuilding after the death of the active duty Service Member.

**RECOMMENDATION:** Extend Transitional Survivor Spouses' TRICARE Prime medical coverage at the active duty Family Member status from three to five years.



# Work Group: Soldier Support I

Spokesperson: De'Keither Stamps



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**TITLE:** Monthly Stipend to Ill/Injured Soldiers for Non-Medical Caregivers

**SCOPE:** The Army does not offer a monthly stipend to injured/ill Soldiers who do not qualify for Traumatic Service Members' Group Life Insurance (TSGLI) and are in need of a non-medical caregiver's assistance. Although compensation is provided through the National Defense Authorization Act FY10, there may be additional costs incurred by the non-medical caregiver while caring for the Soldier. In the absence of the monthly stipend for non-medical caregivers, the Soldiers that do not qualify for TSGLI could require residential institutional care.

**RECOMMENDATION:** Provide a monthly stipend to Soldiers that do not qualify for TSGLI and are certified to be in need of assistance from a non-medical caregiver.



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## **TITLE:** Funding Service Dogs for Wounded Warriors

**SCOPE:** The Department of Defense does not offer a formal program that funds service dogs for Wounded Warriors. There is significant anecdotal evidence that animal assistance programs help patients of all types recover and heal from wounds, injuries and illnesses, both physical and psychological. Service dogs may assist Wounded Warriors in attaining a higher level of independence and self-reliance which allows them to function more successfully in their community and jobs.

**RECOMMENDATION:** Fund a formal program to provide service dogs For Wounded Warriors.



# Work Group: Soldier Support II

Spokesperson: Jessica Hinojos



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## **TITLE:** Reserve Component Inactive Duty for Training Travel and Transportation Allowances

**SCOPE:** There is no legal authority for training travel and transportation allowances for Reserve Component (RC) Soldiers conducting Inactive Duty for Training (IDT) when the training duty station, drill site or assigned unit location is over 50 miles from home of record. Soldiers often travel significant distances to duty locations due to unit relocation, individual assignments and other factors. Soldiers can incur expenses that exceed the actual pay received. Providing allowances for RC Soldiers will alleviate financial burdens and mitigate risks associated with traveling to and from the training duty station.

**RECOMMENDATION:** Authorize travel and transportation allowances for RC Soldiers traveling over 50 miles for IDT.



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**TITLE:** Reduced Eligibility Age for Retirement of Reserve Component Soldiers Mobilized in Support of Overseas Contingency Operations

**SCOPE:** Reserve Component (RC) Soldiers with Overseas Contingency Operations (OCO) eligible active duty (AD) service between 11 Sep 01 and 28 Jan 08 do not receive credit for active service towards reduced retirement age. Soldiers mobilized in support of OCO after 28 Jan 08 will have their retirement date reduced by three months for each cumulative total of 90 eligible days of active duty. Mobilized Soldiers incur the same sacrifices and warrant the same credit of service toward reduced retirement eligibility age regardless of when they served.

**RECOMMENDATION:** Credit OCO eligible AD service prior to 29 Jan 08 towards reduced eligibility age for retirement of RC Soldiers.