

#### UNITED STATES ARMY RECRUITING COMMAND























# **USAREC** Recruiting Overview









# Monday, 21 October









# Monday Morning Admin Notes

- Restrooms are to the right, turn by exit sign
- Water cooler by restrooms
- Please fill out evaluations!
- Questions for CG/CSM
- Parking Lot
- Lunch will be in Elizabethtown
- Pictures for social media









## **Ground Rules**

- Cell phones silent
- Speak one at a time
- Be open minded
- Limit sidebars
- Timeliness
- Participation is key
- •
- •
- •





#### UNITED STATES ARMY RECRUITING COMMAND























# Questions?









# Day 1 Afternoon Admin Notes

- Evaluations
- Training tomorrow is at Palma Hall
- Be thinking of questions for the CG and CSM





#### UNITED STATES ARMY RECRUITING COMMAND















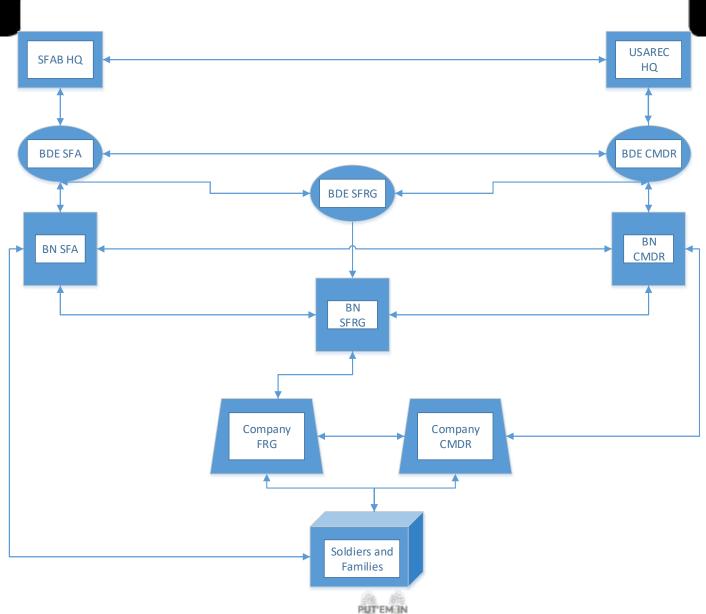




# Communication Flow













# Questions?









# Tuesday, October 22









# Tuesday Morning Admin Notes

- Restrooms are to the left down the hall on the right
- Please fill out evaluations!
- Questions for the CG/CSM working lunch.
- Parking Lot
- Pictures for social media
- Lunch









## **Ground Rules**

- Cell phones silent
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- •
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# Building Resilience through Self-Care

Lisa Landry, Ph.D.



#### UNITED STATES ARMY RECRUITING COMMAND



















#### Agenda





Due Outs Unattainable

Due Outs In Progress

Due Outs Completed





#### **Due Outs Unattainable**





- 1) Closing down the shooting range on post
- 2) Moving buildings
- 3) BDE Night Out was Cancelled
- 4) MilAir/Space A use for training





#### **Due Outs In Progress**





- 1) VTC/DCO for non-attending spouses to join/view
- 2) USAREC PCC
- 3) Revise "Day in the Life of a Recruiter" video





#### **Due Outs Completed**





- 1) Pre-conference information be sent to spouses
- 2) SFAs Meet and Greet
- 3) "Let me take it back" resources list
- 4) Welcome Letter from Mrs. Muth
- 5) DCGO send out QOL minutes
- 6) Communication flowchart
- 7) Requested Future Soldier Families to have a FB page
- 8) Request funding for SFRG advisor/leader to have paid travel for emergency relief situations.
- 9) Fundraising for FRGs
- 10)Senior Spouse FB Page









# Questions?







# HQDA Soldier and Family Readiness Program Updates

*for* US Army Recruiting Command
Annual Leader Training Conference
22 October 2019

Dr. Najah A. Barton

Program Specialist, Family Programs

Office of the Deputy Chief of Staff for Installations (DCS, G-9)

"People are always my #1 priority: Our people are our Soldiers, Family members, Department of the Army Civilians, and Soldiers for Life (retirees, and veterans). We must take care of our people and treat each other with dignity and respect. It is our people who will deliver on our readiness, modernization and reform efforts."

GEN James McConville, Chief of Staff of the Army Initial Message to the Army Team



## **Agenda**



- Opening/Introductions
- Soldier and Family Readiness Groups
- Resources
- Building Healthy Military Communities
- Exceptional Family Member Program
- Questions/Discussion







"We will stop at nothing to make sure that we are doing the right thing by our Soldiers".

Honorable Mr. Ryan McCarthy Secretary of the Army



#### **Priorities**





#### **Secretary of the Army:**

"I intend to ensure Soldiers and their families have the resources to thrive. This includes quality and safe housing, reliable health care, and access to childcare. Taking care of the force leads to a better quality of life, retention of world-class Soldiers, and ultimately improved readiness".

Secretary Ryan McCarthy Confirmation Hearing, September 2019



#### **Chief of Staff Priorities:**

- 1. People
- 2. Readiness
- 3. Modernization
- 4. Reform

- a. Housing
- b. Health care
- c. Child care
- d. Spouse employment
- e. PCS moves

"The Army expects a lot from their Soldiers and Families and really to maximize the readiness of our Soldiers, they must know that the Army is caring for their Families."

GEN James McConville, Chief of Staff of the Army













## Soldier & Family Readiness Groups



#### Overview

- Army Directive 2019-17, Changes to Soldier and Family Readiness Groups
  - Refocus SFRG as communication enabler and community/network builder
  - Integrate entire unit roster and Family Members
  - Reduce restrictions on fundraising and use of funds
  - Reduce reporting/inspection requirements
- Shift leader responsibilities to Commander
  - Commander led Commander priorities
  - Supported by commander appointed unit personnel (Family Readiness Officer, Fund Custodian)
- Promote use of social media
- Leverage volunteers as needed in support of unit activities and advisement



#### **SFRG Goals/Expectations**

- Act as an extension of the unit command, providing official, accurate command information
- Connect Soldiers and Families to the chain of command and provide support between the command and SFRG members
- Connect SFRG members to available on- and offpost community resources
- Offer a network of mutual support



Impacts all Components - Active, Guard, and Reserve

Critically links Commands to Families to enhance Army Readiness



#### SFRG Model



#### SFRG Command Team

Community Support Network

Soldier & Family Programs Chaplains Legal **Medical Personnel** 

> **Local Agencies** State Agencies **National Agencies**

Commander **Command Sergeant Major First Sergeant** 

> SFRG Fund Custodian Rear Detachment

Soldier

Soldier Support Network

Spouse Partner

Parent Community

Children

Sibling

**Employer** 

#### Communicating and connecting

Readiness/Resilience Events\*

MWR events Community events **Speakers** Classes

Some events/program authorized participation limited by statute and policy

Inter and Intra networking highly encouraged

#### Types of official communication

Training holidays Schedules - Unclassified **Delayed reporting** Unit events Key points of contact



## **SFRG Next Steps**



# Working Group with Commands, Senior Spouses, Spouse Representatives

- Identified requirements to translate policy into practice
- Reviewed other Services SFRG models
- Discussed SFRG goals and objectives and how to measure success
- Solicited the voice of the Commands and Spouses

#### Training Working Group

- Identify training requirements, objectives, and content
- Coordinate with TRADOC and AMC representatives for training

#### Strategic Communication

- Bugle Note
- Army.mil Article
- Public Affairs Guidance
- Senior Leader and Spouse Engagement
- AUSA Family Forums
- Solicit Feedback from SFRG and Members (allranks)
  - Metric validation
  - Implementation requirements
  - Training content validation

#### Develop and roll-out training

- Company Commander/First Sergeants Course
- Computer based training for Leaders, Soldiers and Family Members
- Examine enhancements to "virtual FRG" system
  - o Social Media Link
  - Simplified registration and support
  - Link to community resources
- Identify and Recognize Best Practices



#### Resources



COMPLIANCE

Overseas Area	Regional Call Center	TRICARE Area Office
Eurasia-Africa European and African continents, all Middle Eastern countries, Pakistan, Russia and several former Soviet Republics. This includes Baltic States, Ukraine, Georgia, Kazakhstan, Kyrgyzstan and Uzbekistan.	•+44-20-8762-8384 •1-877-678-1207 (toll-free from the U.S.)	•Commercial: +49- (0)06371-9464-2999 •DSN: 314-590-2999 •Toll-Free: 1-888- 777-8343 (if calling from the U.S.) •Send an email message
Latin America and Canada Area Central and South America, the Caribbean Basin, Canada, Puerto Rico and the Virgin Islands.	•1-215-942-8393 •1-877-451-8659 (toll-free from the U.S.)	•Commercial: 1- 210-536-6080 •DSN: 761-1153 •Toll-Free: 1-888- 777-8343, option 2 • <u>Send an email</u> <u>message</u>
Pacific Area Guam, Japan, Korea, Asia, Australia, New Zealand, India and Western Pacific remote countries.	Singapore Call Center •+65-6339-2676 •1-877-678-1208 (toll-free from the U.S.) Sydney Call Center •+61-2-9273-2710 •1-877-678-1209 (toll-free from the U.S.)	•Commercial: +81- 98-970-9155 •DSN: 315-643-2036 •Toll-Free: 1-888- 777-8343 (if calling from the U.S.) •Send an email message



TRICARE East	TRICARE West
Humana Military	Health Net
1-800-444-5445	1-844-866-9378











#### Military OneSource Training **Resources:**

https://www.militaryonesource.mil /training-resources/podcasts



#### Military Installations:

https://installations.militaryonesource.mil/

Ready and Resilient Total Force



## **Geographically Dispersed**



- OSD leading a multi-year effort, Building Healthy Military Communities (BHMC)
  - Understand unique challenges faced by geographically dispersed Service members and their Families
- Outcome: A strategy to support Total Force Fitness



https://cms.jointservicessupport.org/BHMC

Impacts all Services, Guard, Reserve, Recruiters, and Cadets

- Three interventions:
  - State coordinators
  - Targeted information campaign in pilot states
  - Utilize mobile healthy technologies



The BHMC pilot is being conducted in 7 pilot states: Florida, Indiana, Oklahoma, Maryland, Minnesota, Mississippi, and New Mexico

Pilot states rapid needs assessment trend results impacting Soldier and Family readiness:

TRICARE
Family Support

Communication/Coordination DoD/Non-DoD entities>

★ Mental Health/Substance Abuse Treatment

Transportation

**\*** Employment

- Joint Working Groups drafted potential solutions
- Measurements: Individual medical readiness, qualify of life, social media, pilot state metrics
- Army working communication plan to strengthen awareness/sync of existing resources

Ready and Resilient Total Force



# **Exceptional Family Member Program**



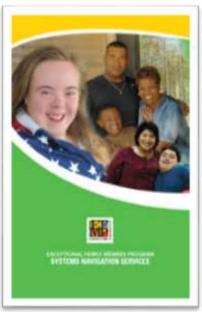
#### Comprehensive, Coordinated, Multi-Agency Support

- Comprehensive, coordinated, multi-agency program including community support, housing, medical, educational, and personnel services
- Approximately 9% of Active Duty Soldiers have Family members (children, spouses, or dependent parents) with special needs that require medical or educational services
- Army Senior Leaders want Soldiers and Families to have greater voice in support and assignment selection process.

#### Initiatives include:

- Re-assignment options for EFMP Families
- Survey Soldiers enrolled in EFMP to share their experiences with the program
- Deploy new web-based enrollment system (webEFMP)





Giving Soldiers and Families a greater voice



## **Spouse Employment**



#### **Home Based Business (HBB)**

- Army Senior Leader initiatives:
  - Reduce barriers
  - Standardize processes
  - Encourage reciprocity
- Senior Commanders final approval authority and encouraged to recognize reciprocity
- Generally do not compete with on-post commerce
- Uniform procedures/processes
   Development: 1 SEP to 30 OCT 2019
- NLT 31 OCT 19, implement procedures that standardize and streamline the application process for HBB on installations
- Local laws, licensing, host nation requirements, and Status of Forces agreements, etc. continue to apply

#### **Spouse Licensing & Employment**

- AD 2019-18 provides spouse re-credentialing reimbursement after PCS
- The Defense State Liaison Office (DSLO)
   continues to approach state governments to assist
   with reciprocity concerns, expedited applications,
   and state exceptions
- DSLO working with Department of Labor to inform military spouses of state efforts and improvements
- State Employment Commission office(s) offer information and services to aid military Families
- My Career Advancement Account (MyCAA)
  - Provides up to \$4,000 of financial assistance to Army spouses in pay grades E-1 to E-5, O-1 to O-2, and W-1 to W-2 who are pursuing a license, certification or Associate's degree in a portable career field and occupation
- Military Spouse Employment Program
  - 390+ partners committed to recruit, hire, promote, and retain military spouses

Army spouse employment is a senior leader focus area





# **Questions/Discussion**

# Military Community Support Programs

Powered by the commitment to help service members and their families thrive

October 22, 2019



## What is Military OneSource?



### Confidential Help

# Call center, outreach and online support

- No cost for service members and their families
- Support for challenges unique to military life
- Master's-level consultants and trained experts
- Non-medical counseling, specialty consultations and more

State consultants in military and civilian communities also provide outreach and support.





# Scenario #1 New To The Military

Sergeant Martinez and his spouse, Nicole, have been married for one year and have a nine-month-old son. He reported feeling financially strained since the birth of their son. Nicole would like to enhance her employability by returning to school. She would also like to financially contribute to the household with a job that allows her to work from anywhere.

 What resources and tools are available for Sergeant Martinez and his spouse, Nicole?



# Spouse Education & Career Opportunities (SECO) Career Center

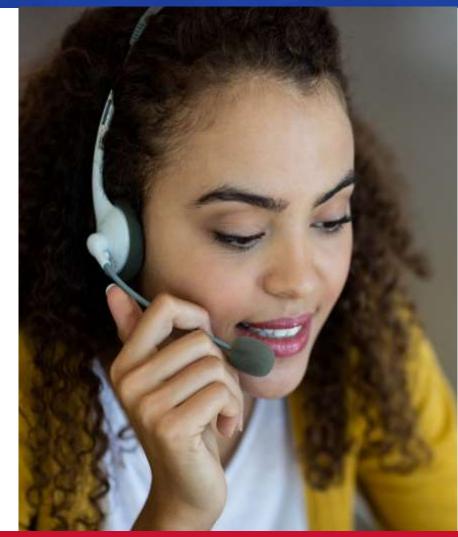
# SECO connects military spouses to tools, information and resources:

- Certified career coaches through the Military OneSource SECO Career Center
- MySECO website with information, resources and interactive features
- My Career Advancement Account (MyCAA) scholarship for tuition assistance
- More than 400 Military Spouse Employment Partnership (MSEP) employers committed to military spouses











Quality of life policies and programs that help our guardians of country, their families and survivors be well and mission ready.

# Financial Counseling

Military OneSource accredited financial counselors share information to help service members and families evaluate opportunities and risks — so they can make smart decisions about:

Pension IRA Retirement Mortgages
TUITION Mutual funds 401(k)
Child care Savings CDs
Money markets

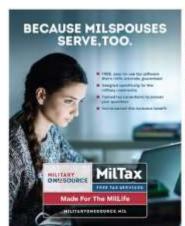


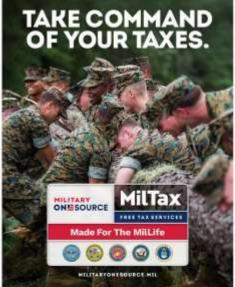
# Tax Consultations and Filing Assistance

#### MilTax: Tax Services for the Military

Take command of taxes with free tax services:

- Easy-to-use software for preparing and filing your taxes online
- Experienced consultants trained in tax considerations for the military
- Made for military life. For example, complete and electronically file your federal return and up to three state tax forms













# Scenario #2 Major Life Events

Sergeant Roberts, who is currently deployed overseas, will rejoin his spouse in the United States in a few months. His spouse is pregnant with their second child and is feeling greater stress than usual.

- What other challenges might this family have?
- What would you tell this Soldier if he came to you for guidance?





## Confidential Non-medical Counseling

#### Military OneSource offers:

- Face-to-face, online, by phone and video sessions
- Short-term, up to 12 sessions, per issue
- Available to children and teens with some guidelines
- · Can address issues such as:
  - Stress management
  - Marital and communication issues
  - Adjustment and deployment challenges
  - Parenting skills
  - Grief or loss





# Military and Family Life Counseling Program

# Additional access to non-medical counseling

Military and family life counselors, or MFLCs, and child and youth behavioral MFLCs offer:

- Face-to-face counseling and presentations to the military community
- Services in a variety of locations:
  - Military and family support centers
  - · Child development centers
  - School and youth camps
  - Embedded in military units
  - Targeted "surge" locations
  - On-demand events

Request support at:

https://supportrequest.militaryonesource.mil/



Quality of life policies and programs that help our guardians of country, their families and survivors be well and mission ready.

# Impact of Non-medical Counseling

# RAND evaluation of DoD Non-medical Counseling Programs found:

- 77% of participants experienced a reduction in problem severity
- 74% experienced a reduction in interference with daily life
- 91% said they were likely to use nonmedical counseling again
- 95% said they were likely to recommend non-medical counseling to a friend



## An Evaluation of U.S. Military Non-Medical Counseling Programs

Thomas E. Trail, Laurie T. Martin, Lane F. Burgette, Linnea Warren May, Ammarah Mahmud, Nupur Nanda, Anita Chandra





# Scenario #3 Building Resiliency

You overhear a spouse discussing the challenges of being geographically separated from her Soldier. The couple's phone conversations have become routine. The spouse would also like to have a more active lifestyle, but lacks the motivation to get started. She feels that her mood and relationship need a boost.

- What would you tell this spouse if she came to you for advice?
- What tools and resources would help this couple's relationship?



## **Building Healthy Relationships**

# Military OneSource offers couples and parent/child relationship support:

- Motivational interviewing model focused on communication skills
- Six session curriculums with guided exercises
  - Building Healthy Relationships with Your Significant Other
  - Communication Refreshers
  - Staying Connected While Away
  - Blended Family
  - Reconnecting After Deployment
- Consultations available by phone and video





## Self-Help Tools

#### **Mobile Resilience Tools**



#### MoodHacker

This self-management tool helps users track, understand and improve their mood.



#### CoachHub

Personal online coaches help individuals meet their stress management goals and stay on track with online support.



#### **Love Every Day**

Text messages encourage couples to connect in a fun and meaningful way for a few minutes a day for 21 days.



## Digital Library Resources

#### The Morale, Welfare and Recreation Digital Library

- Provides service members and their families with:
- Access to free library resources via computer
- Any time and any place where there is internet access
- Resources include:
- Universal Class
- Audiobooks Collection
- Culture Grams
- Mango Languages
- Ancestry Library Edition

- Chilton's Auto Repair
- ArtistWorks Music Lessons
- Career Transitions
- Gale LegalForms





# Scenario #4 Transitioning Military and Family

You overhear a Soldier and his spouse talking about separating from the military. The Soldier is concerned about his transition to civilian life.

 What advice do you provide to the Solider and/or his spouse?



# Support for Transitioning Soldiers and Army Families

# Military OneSource is now available for up to 365 days post separation or retirement:

- Became effective with the signing of the John S. McCain National Defense Authorization Act of 2019
- Expanded eligibility from six months to up to one year after separation from military service
- Ensures that service members and their families have access to Military OneSource's suite of services during their transition to civilian life
- Includes Coast Guard members and their families



Master your transition to civilian life. Take advantage of Military OneSource services 24/7 for up to one year after separation or retirement. Services after 365 days may be provided through the Department of Veterans Affairs or other community resources. With Military OneSource, you get:

#### Personal Support

- Non-medical counseling to ease the emotional stress associated with transitions
- Spouse relocation and transition help to sort through renting vs. buying, choosing your next location, switching schools and other questions
- Connections to transition assistance programs that help you through this milestone
- Pre-separation counseling to identify transition needs and a personal plan

#### **Education Assistance**

- Sessions with an education consultant to identify benefits such as Post-9/fl GI Bill, federal grants and tax deductions to take you to the next level
- Information on colleges and online resources, such as College Navigator and TA DECIDE

#### Career Resources

- · Expert consultations on identifying career goals
- Help with mapping your military experience to civilian jobs via the Career Transitions database
- Spouse Education and Career Opportunities, or SECO, offering support for career exploration, education, training and licensing and more

#### Financial and Tax Help

- Financial planning with an accredited financial counselor, including strategies on saving for transition and building emergency funds
- Guidance on military benefits, such as converting your Servicemembers' Group Life Insurance plan to Veterans Group Life Insurance and transferring your GI Bill to your children and spouse
- Help identifying military tax deductions and allowances, such as combat pay exclusion and moving expenses
- Secure, easy-to-use tax fi ling software with 100 percent guarantee for accuracy by the software provider



# Range of Support





# New Specialty Consultations from Military OneSource

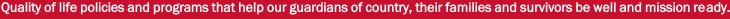
#### **New MilParent:**

- Supports the early stages of pregnancy through the development of children up to age five
- Sessions consist of a variety of parenting topics, resources, tools and tips
- Available by phone and secure video

#### **Transitioning Veteran:**

- Personalized, one-on-one sessions by phone or secure video
- Master's level consultants with first-hand experience in military life
- Explores essential topics such as employment, relocation, and communitybased resources





# A Top Priority for 2019

Increase and sustain maximum level of awareness and engagement with Military OneSource.





Campaign delivered more than 30 million impressions and 6 million video views



# Outreach Campaigns: All the Ways & From Alpha To Zulu











# What They're Saying

We receive feedback every month.

Here's just a sample of what individuals tell us:

- This is my third time using this service and you have kept my marriage together and kept my family together through deployments and everything else.
- Not once did I feel embarrassed or reluctant to give information or feel like I was just another Soldier.
- Every time I call, I learn about more resources available. I always wish I knew sooner!





# Tools for a Thriving Soldiers and Army Families

### Help us reach service members and families where they are and when they need us

- Connect with a Military
   OneSource state consultant
- Link to MilitaryOneSource.mil
- Explore our online products, training and webinars
- Subscribe to our e-newsletters
- Engage with us through social media











# Tuesday Afternoon Admin Notes

- Same room tomorrow
- Evaluations!
- Questions for the CG/CSM working lunch.
- Parking lot









# Wednesday, October 23









# Wednesday Admin Notes

- Evaluations!
- Questions for the CG/CSM working lunch tomorrow
- Parking Lot





### **United States Army Human Resources Command**





#### <u>Purpose</u>

Provide fellow EFMP stakeholders information related to the HRC EFMP Team mission and functions

#### **Agenda**

**Branch Organization and Mission Explain Command Role Assignment Nominative Process Discuss EFMP Determinations Discuss Compassionate Actions** Discuss Special Conveyance **Discuss Stabilization Process** Discuss SecArmy EFMP Initiatives Discuss EFMP Outreach/Initiatives

Mr. Ron Neal Medical Coordination/Family Travel Team Chief

Commanding General - MG Joseph R. Calloway Command Sergeant Major - CSM Lynice D. Thorpe-Noel 1 August 2019

"Soldiers First"



# **Special Actions Branch**



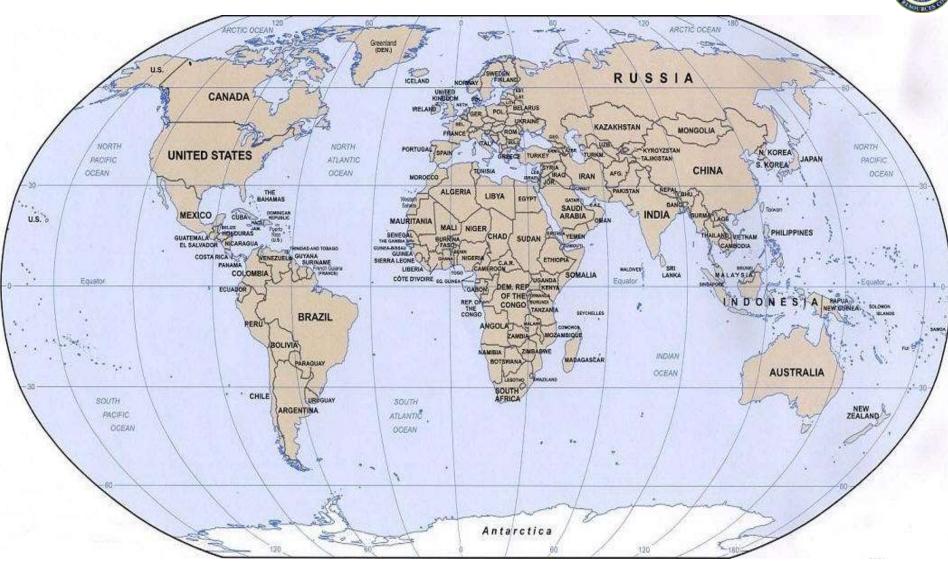
Team Line and email 502 613 5859 usarmy.knox.hrc.mbx. epmd-security@mail.mil	Special Programs  Team Line and email 502 613 5440 usarmy.knox.hrc.mbx.epmd -remissions@mail.mil	Medical Coordination  Team Line and email 502 613 5861 usarmy.knox.hrc.mbx.epmd -efmp-poc@mail.mil	Compassionate Actions  Team Line and email 502 613 5840 usarmy.knox.hrc.mbx. epmd-compassionate- section@mail.mil	Team Line and email 502 613 5195 usarmy.knox.hrc.mbx.epmd -special-actions- branch@mail.mil
<ul> <li>Functions</li> <li>Personal Security office for IRR, IMA, Retiree Recall and pre-commissions</li> <li>Data reconciliation; ERB/ORB corrections</li> <li>Career Branch Support</li> <li>G1/G2 Support</li> <li>Centralized Background Screening</li> <li>Customers</li> <li>Active Officer/Enlisted</li> <li>Reserve Officer/ Enlisted</li> </ul>	<ul> <li>Functions</li> <li>Remissions and Cancelation of Indebtedness</li> <li>Sole Surviving Son or Daughter</li> <li>Hostile Fire Area Exemption</li> <li>Career Intermission Pilot Program</li> <li>Customers</li> <li>Active Officer/Enlisted</li> <li>Reserve Officer/ Enlisted</li> <li>National Guard Officer/Enlisted</li> </ul>	<ul> <li>Functions</li> <li>Exceptional Family Member Program</li> <li>Overseas Family Travel (AGR)</li> <li>Compassionate medical recommendation</li> <li>EFM Stabilization (IMCOM/MEDCOM)</li> <li>COAD medical checks</li> <li>Medically based/MEDCOM requested PCS coordination</li> <li>In transit medical recommendation</li> <li>Branch requested medical recommendation</li> <li>Customers</li> <li>Active Officer/Enlisted</li> <li>AGR Officers/ Enlisted</li> </ul>	<ul> <li>Functions</li> <li>Deletions, deferments, curtailments, attachments and PCS</li> <li>Blue Bark</li> <li>EFM Stabilization (4 year)</li> <li>Death of a Spouse Stabilization (2 year)</li> <li>Customers</li> <li>Active Enlisted</li> <li>AGR Enlisted</li> </ul>	Functions  Expedited Transfer of Sexual Assault Victims  In transit; delete, defer, attach or assignment change  Medically based/ MEDCOM requested PCS execution  Continuation on Active Duty/ Reserve requests/ management  HIV Management  Pregnancy Curtailments  Return of Felon/ Court Martial assistance  Threat to Life  Return to Duty  O9U Assignments  Customers  Active Enlisted  AGR Enlisted

Commanding General – MG Joseph R. Calloway Command Sergeant Major – CSM Lynice D. Thorpe-Noel



# HRC (Personnel) Footprint





CCommanding General - MG Joseph R. Calloway CCommand Sergeant Major - CSM Lynice D. Thorpe-Noel



"Soldiers First"

POC: Ron Neal, (502) 613-5861

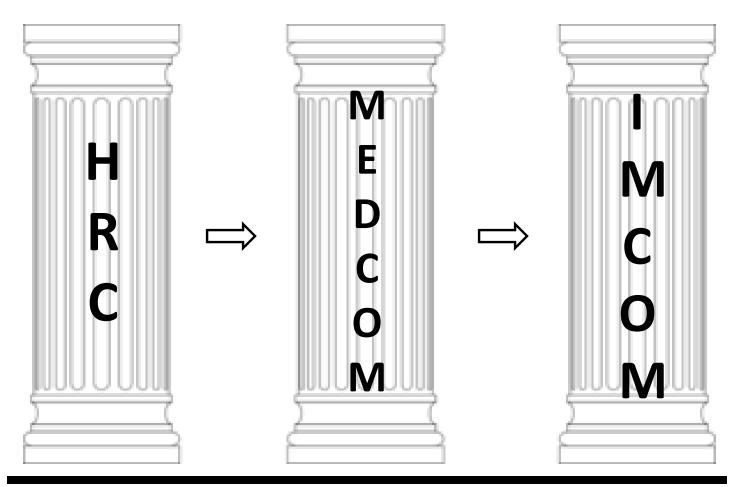


## **EFMP Components/Mission**

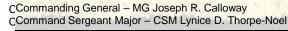


Assignment **Coordination** 

**Medical Support & EFMP Determination**  **Family** Support



<sup>\*</sup>All three agencies work in concert to ensure Military Families with special needs have access to the required medical and/or educational resources at their assignment location.





POC: Ron Neal, (502) 613-5861



### **HRC** Role



- ☐ Serve as SME for all assignment related issues □ Implement and maintain an automated data system for assignment processing >Ensure EFMP indicator is annotated on personnel records □ Coordinate w/MEDCOM Special Needs Advisors to determine care availability >This occurs prior to assignment instructions release ■ Notify Soldiers to update their EFMP profile prior to the 3d anniversary of their enrollment
- >Generate e-message notification on set schedule



### HRC Role (cont.)



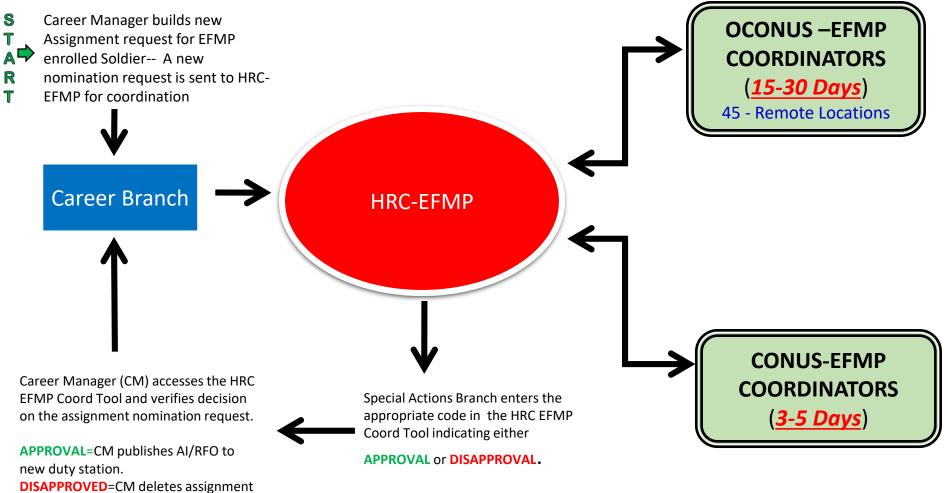
- ☐ Provide technical support to IMCOM G-9
- ☐ Provide annual reports of Prevailing Rates of disabling conditions among Military Families
- Supports OTSG effort to provide yearly EFMP Report for ARSTAF/DOD
- ☐ Provide a representative to assist with EFMP training and technical assistance visits
- ☐ Provide a representative to the DOD & HQDA EFMP Committees
- □ Support DOD EFMP standardization effort
- > FMTS

as of 1 October 2019



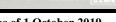
## **Assignment Nomination Process (Old)**





CCommanding General – MG Joseph R. Calloway CCommand Sergeant Major – CSM Lynice D. Thorpe-Noel

request, selects new duty station for the Soldier, and then submits a new nomination to start the process again

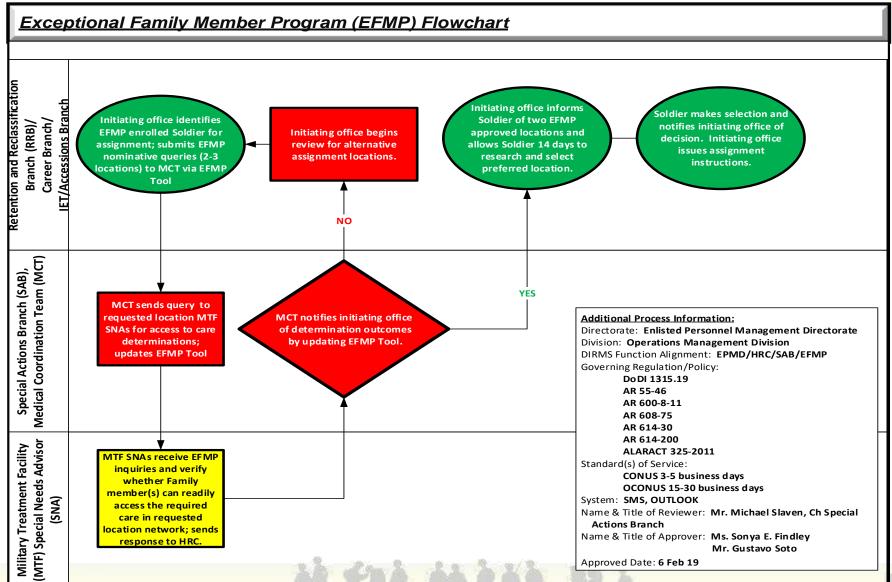


POC: Ron Neal, (502) 613-5861



## **Assignment Nomination Process (New)**





CCommanding General – MG Joseph R. Calloway CCommand Sergeant Major – CSM Lynice D. Thorpe-Noel

LLS RAWY



### **Assignment Nomination Process (New) (cont.)**

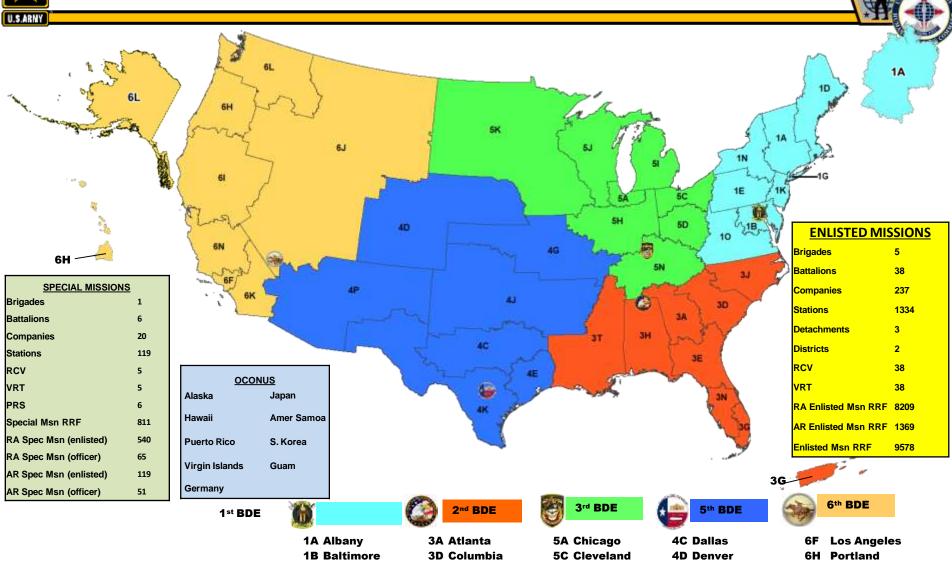


- > Soldiers receive "TWO" EFMP cleared locations for PCS consideration
  - Locations are based on Army Readiness requirements
  - Soldiers do not dictate which locations are offered
  - Soldiers must have valid enrollment to participate
- > Soldiers have "14" days to decide which location best suits Family
  - Soldiers must respond to HRC with decision NLT "14" days after notification
  - > If Soldiers don't respond in allotted time, HRC may select IAW Army needs
- Soldiers have option to use System Navigators, Militaryonesource ROC, and other EFMP staff to confirm resource(s) availability
  - System Navigators can assist with point-to-point information gathering
  - Militaryonesource ROC has multiple resources available for individual usage
- > HRC initiates assignment activity once Soldier responds with decision
  - Assignment Instructions are published to servicing MPD
  - Soldier is notified of pending PCS move/LEVY Brief ensues
  - OCONUS moves still subject to FMTS review/determination

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### **USAREC BN Boundaries 1Q20**



1D New England 1E Harrisburg

1G New York **1K Mid-Atlantic 1N Syracuse** 

10 Richmond

3E Jacksonville 3G Miami

**3H Montgomery** 3J Raleigh

51 Great Lakes 5J Milwaukee 3N Tampa **5K Minneapolis** 5N Nashville 3T Baton Rouge

5D Columbus

5H Indianapolis

**4E Houston** 

**4G Kansas City** 

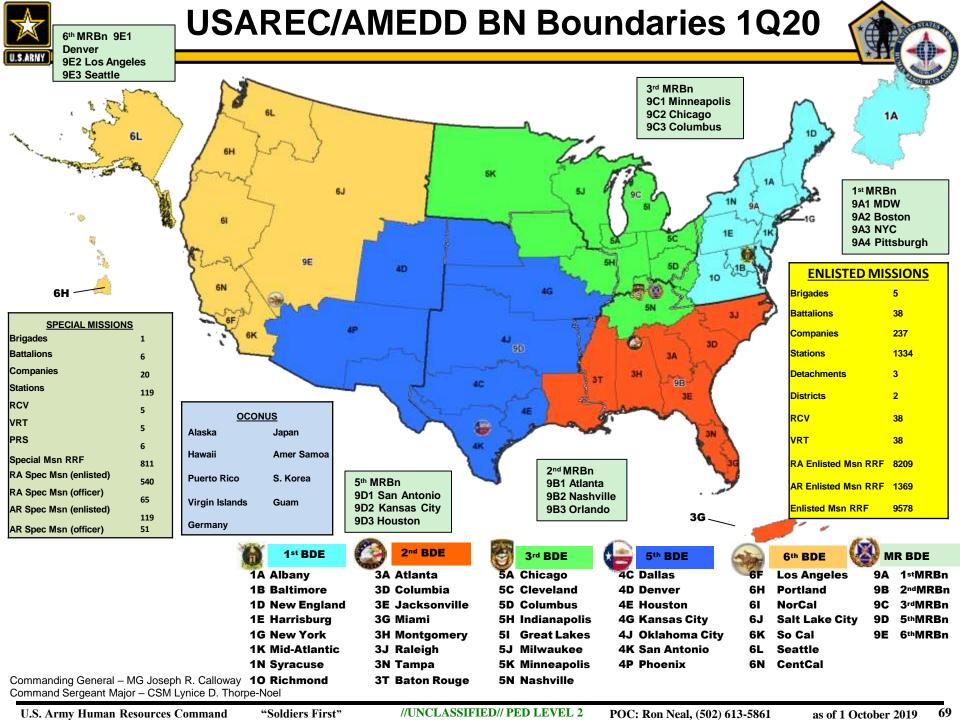
4J Oklahoma City **4K San Antonio 4P Phoenix** 

NorCal

**Salt Lake City** So Cal

Seattle 6N CentCal

Commanding General - MG Joseph R. Calloway Command Sergeant Major - CSM Lynice D. Thorpe-Noel



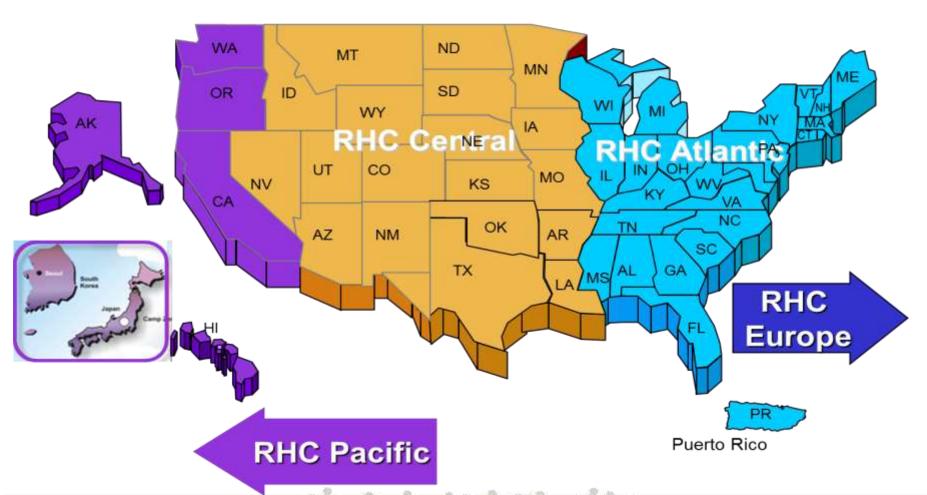


## **MEDCOM** Regional Alignment





#### **EFMP REGIONAL HEALTH COMMANDS**



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as of 1 October 2019

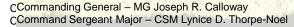


### **EFMP Determinations**



### **Critical Factors**

- Required services and problem severity Can or Can Not be met.
- Frequency of care required EFM needs weekly, monthly, quarterly, bi-annually, or annually; ex: if can't be seen for 9 months after arrival and needs monthly access = No Go.
- ➤ Distance/Environmental consideration\* One (1) hour Drive time one way, or 40-60 miles distance one way. Distance can increase with lesser frequency.
  - \*Seasonal weather also a factor
- Doctor's notes within the EFMP profile if questionable, misleading, or a condition was/is pending further evaluation, or surgery.



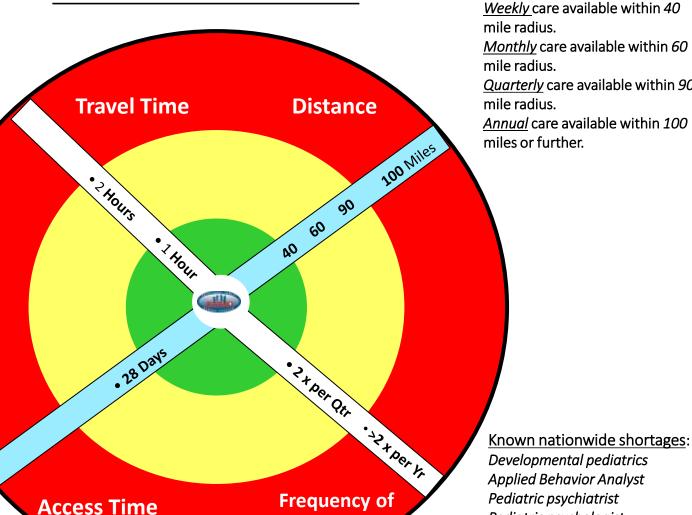


### **EFMP Determinations**



Blue Spokes are critical elements in the decision process. White spokes are consideration elements when the critical elements approach red.

**SNA Decision Chart** 



Weekly care available within 40 mile radius.

Monthly care available within 60 mile radius.

Quarterly care available within 90 mile radius.

Annual care available within 100 miles or further.

Push network based on access to care standards and numbers of beneficiaries sent to the network for specialty care.

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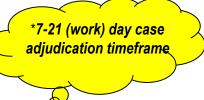
Pediatric psychologist

Medical vs educational speech



#### **Compassionate Actions**

- ☐ Officers Governed by AR 614-100, Chapter 6
- □ NCOs/Enlisted Governed by AR 614-200, Chapter 5
- ☐ Submission/Decision Procedures:
- > DA 4187 & DA 3739 Thru Chain, Endorsed by COL or above to HRC
- > MPD Chief can also submit based on situation:
  - Attached Soldiers
  - In-transit Soldiers
- □ Burden of Proof Rests with the Soldier
- ➤ Supporting Medical and/or Educational Documentation
- □ Requests are submitted thru the S-1 or MPD to the Compassionate Actions Functional Mailbox
- usarmy.knox.hrc.mbx.epmd-compassionate-section@mail.mil
- > usarmy.knox.hrc.mbx.opmd-ofc-compassionate-actions@mail.mil



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#### SFA Role (COMPATS)



#### □ Assisting Units and Soldiers with the Compassionate Action Process

- > AR 614-100 (Officer), Chapter 6, Para 6-1 thru 6-24
- > AR 614-200 (NCO/Enlisted), Chapter 5, Para 5-14 thru 5-19
- > Call HRC for Assistance if necessary (Numbers on later slide)
- ☐ Advising/Assisting Soldiers with Request Preparation/Completion
- DA Form 3739/DA Form 4187/DA Form 4187-1
- Coaching, and providing guidance and direction/Problem resolution
- ☐ Linking Soldiers with the Appropriate Agency/Provider(s)
- Primary Care Manager/Education Counselor/Specialist/SNA
- Acquire evidentiary/supporting documentation
- ☐ Communicate/Coordinate with MTF SNA
- > Ensures Soldiers Receive Consistent Message from local Stakeholders
- Limits Possibility for Confusion/Chaos

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POC: Ron Neal, (502) 613-5861



#### **Special Conveyance Moves**



#### JTR, Chapter 2, Para 020206.K

- DOD Policy (JTR) authorizes special EFM transport when competent medical authority determines:
  - Other than economy/coach accommodations are required (business class/first class/premium class)
  - EFM cannot be transported via POC/POV
  - ➤ EFM requires around-the-clock/life supporting medical care during travel
  - > EFM must travel with special medical equipment
  - > EFM requires special air transport/ambulance



#### Special Conveyance Moves (cont).



#### **Process Requirements:**

- Soldier must notify MPD staff/career manager once reassignment info is received—sooner is better
- Burden of proof rests with Soldier Nurse Case Manager assists with move
- Requests must be submitted well in advance of travel to allow necessary coordination/scheduling
- Must be vetted and approved by OTSG EFMP Office authority granted by Army Budget Office (ABO)
- Soldier orders require specific language to ensure funding/payment - Amendment maybe necessary

//UNCLASSIFIED// PED LEVEL 2



#### **Army Strength/EFMP Snapshot**



#### **EFMP Numbers** – as of 1 Aug 19:

\*AC Strength - 477,196 (does not include USMA Cadets-4,548)

\* EFMP Enrollment - 43,656 Soldiers = 9% of total Soldier population

\*Expired profiles - 4835 expired = 11% of enrolled population.

\*<u>AGR Strength</u> - 16,426

\*<u>EFMP Enrollment</u> – <u>1,569</u> Soldiers = <u>9%</u> of total Soldier population

\*Expired Profiles – 595 expired = 38% of enrolled population



#### **EFMP Myths**



Soldiers tell us...



\*Don't exist, despite what many Soldiers think



\*Entitlements Based on Soldier Location



\*Professional Development/Schools/PME



\*Filed Divorce Actions - Case-by-Case Basis

□REFUSAL TO UPDATE WILL KEEP SOLDIER IN PLACE





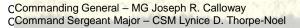














#### NDAA '10 Mandated Special Needs Stabilization



#### "4-Year Stabilzation"

#### □ Eligibility Criteria:

- > EFMP Enrollment (Medical and/or Educational)
- PCS Move Would Disrupt Access to Required Services/Care
- EFM Requires Extensive Support –TRICARE/STATE/LOCAL Resources
- > Current Services/Care Difficult to Reacquire/Readily Replicate Elsewhere
- > Family has Multiple EFMs Receiving Support from Multiple Resources
- Family under PCS consideration recently received required services/access to resources after lengthy wait (i.e. MEDICAID)

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<sup>▶\*</sup>Specific Information / Guidance found in MILPER 17-093 and AR 614-200. Para 5-17 – AR 614-100 still in staffina.



#### NDAA '10 Mandated Special Needs Stabilization(cont.)



"4-Year Stabilization"

#### □ <u>Submission/Decision Procedures</u>:

- > DA 4187 & DA 3739 Thru Chain, Endorsed by COL or Above
- > Supporting Medical and/or Educational Documentation
- Staffed to OTSG/MEDCOM for Recommendation
- Decision is Based on Actual Need(s) vs. Want(s)
- > EPMD/OPMD Directors Approval/Disapproval Authority
- Army Readiness is a factor in the decision outcome (See next)
- > Stabilization Period Begins on the Date Services were Acquired
- > Soldier Available for TDY/Deployment After 1st Year
- Soldier May Request Termination at Any Time

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#### NDAA '10 Mandated Special Needs Stabilization(cont.)



#### NDAA '10, Section 563, Sec 1781 c.(e).1-3.

- "(e) POLICY.—(1) The Office shall develop, and update from time to time, a uniform policy for the Department of Defense regarding military families with special needs. The policy shall apply with respect to members of the armed forces without regard to their location, whether within or outside the continental United States.
- "(2) The policy developed under this subsection shall include elements regarding the following:
- "(A) The assignment of members of the armed forces who are members of military families with special needs.
- "(B) Support for military families with special needs.
- "(3) In addressing the assignment of members of the armed forces under paragraph (2)(A), the policy developed under this subsection shall, in a manner consistent with the needs of the armed forces and responsive to the career development of members of the armed forces on active duty, provide for such members each of the following:
- "(A) Assignment to locations where care and support for family members with special needs are available.
- "(B) Stabilization of assignment for a minimum of 4 years.



POC: Ron Neal, (502) 613-5861



#### **SecArmy Family Readiness Inititiatives**









#### Army Family Readiness

Taking care of our Soldiers, Families, and Civilians is an enduring priority for the Army. As a result of feedback received from the field, the Army has recently begun implementing changes to policies and implementing initiatives to improve quality of life and to better support our communities. The Secretary of the Army has launched a new webpage to help communicate these changes, which is located at: www.army.mil/leaders/sa/questions. The implemented changes and pending initiatives include:

- Spouse Employment: The Army developed a Child & Youth Service (CYS) Employee Assignment Tool (CEAT) to support transitioning military spouses working in CYS programs and puts them back to work more quickly. CEAT eliminates unnecessary background checks and better streamlines the notification and hiring processes for transferring spouses. The tool launched 1 August 18.
- Child Care: The Secretary of the Army signed two new Army Directives providing priority access to active duty Soldiers and eligible Reservists with the greatest child care needs. Additionally, the Army is actively working to reduce civilian hiring times, which will help fill vacancies in areas like civild care where shortages have a substantial impact.
- Home-Based Businesses: The Secretary of the Army signed an Army Directive on Home-Based Businesses (HBB) on 17 December 18 that will streamline the HBB approval process. It also allows people residing in Army Installation housing to work remotely out of their residence and/or operate
- Parental Leave Program: The Secretary of the Army signed an Army Directive on Parental Leave Program on 22 January 19. The Program allows for six of the 12 weeks of maternity leave to be used at any time within the first year of a child's birth. Previously, leave wan 12 consecutive weeks. It also provides the secondary caregiver 21 days of leave during the first year, replacing the 10 days that had to be used within 45 days of a child's birth.
- Spouse Credentialing: The Army Is working on a policy that would allow most military spouses to get reimbursed for expenses fied to transforring occupational licenses or certifications.
- Family Readiness Groups: The Army leadership is finalizing an Army Directive on Family Readiness Groups (FRGs) that will expand the activities and events that FRGs can support, allows for on-post fundraising and eliminates unnecessary paperwork. It refocuses FRGs to serve as a community network for unit camaraderie and spousal awareness.
- Army Housing: The Army is analyzing data from the housing survey that was sent out to families on January 15th and will recommend further improvements to Army housing to address their feedback. We are committed to providing a safe and secure environment on our installations. Additionally, the Army is planning a significant investment across 2020-2024 to improve 100 percent of the Armyowned Family Housing inventory to the highest quality standards by the end of FY26.



- Exceptional Family Member Program: The Army is developing a policy that will give Soldiers and families a greater voice in the EFMP assignment process. They will be given pre-screened PCS location choices to research and choose from. Additionally, by the end of 2019, all families will complete the same standard DOD screening forms, rather than branch-specific forms, and families will be allowed to be screened at any Military Treatment Facility.
- Total Army Sponsorship Program: A new Army Directive will mandate that Senior Commanders ensure first term and junior enlisted Soldiers (our vulnerable population) have sponsors before PCS'ing to a new duty station.
- Household Goods: The Army will increase quality assurance inspections of Household Goods (HHG) carrier companies to hold them accountable. The Army will also provide online access to customer satisfaction scores of HHG carrier companies and establish a 24/7 hotine to address moving concerns.

FOR PUBLIC RELEASE



as of 1 October 2019

## U.S.ARNY

#### **EFMP Enrolled Soldier Choice Initiative**







- ☐ SecArmy concluded Families should be more involved in the assignment decision making process
- □ Directed ACSIM/MEDCOM/HRC to modify current practices and allow greater Family voice in the EFMP
- ☐ HRC Modified Assignment TTPs Soldier is now offered two EFMP cleared locations from which to choose
- ☐ Soldier has 14 days to research and decide notifies manager of decision afterwards manager issues Al
- ☐ Soldier must have valid enrollment to participate
- □ ACS EFMP Coordinates with the Servicing Special Needs Advisor to support SecArmy assignment choice initiative
  - Assist Affected Soldiers Seeking Installation/Area EFMP Information
  - System Navigators Assist with Point to Point Coordination
  - Militaryonesource EFMP Resources, Options, & Consultations

"Soldiers First"







- Family Member Travel Screening Deployment on hold – pending DHA action
- > EFMP Web System Deployment
  - Phase I testing began 8 Aug 19
  - Phase II development begins Sep 19
- Continued Progress Toward EFMP Interoperability (Purple) via DOD Workgroups
- Improved Outreach MilitaryOneSource/ROC

as of 1 October 2019



#### **EFMP ROC Initiative**





#### UNDER SECRETARY OF DEFENSE 4000 DEFENSE PENTAGON WASHINGTON, D.C. 20301-4000

MAY 1 6 2018

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
CHIEFS OF THE MILITARY SERVICES
CHIEF OF THE NATIONAL GUARD BUREAU

SUBJECT: Announcement of the Exceptional Family Member Program ROC – Resources, Options, and Consultations

The Department recognizes that strong and resilient families are the key to mission readiness, and we are committed to ensuring that all military families are empowered to thrive and face the unique challenges of military life. Through the Exceptional Family Member Program (EFMP), the Department provides comprehensive support to military families with special needs to improve their quality of life and assist with access to a variety of programs and services.

The EFMP is designed to allow for easy enrollment, assist families by facilitating transitions between duty stations, and provide information and resources regarding special medical and/or educational needs. Families enrolled in EFMP must have access to timely and accurate information and resources. To this end, I have directed my staff to enhance the level of service provided to families with special needs through Military OneSource. After extensive collaboration and assistance from subject matter experts from the Military Services, I am pleased to announce that these enhanced services will be known as "EFMP Resources, Options, and Consultations," or "EFMP ROC." The ROC represents a robust system of support, delivered through Military OneSource, that expands access for families with exceptional family members to subject matter experts in key areas of special needs. In addition, enhanced services via the ROC will feature consultations provided through both telephonic and a secure video modalities.

I am also pleased to announce that the ROC will be officially launched and available on May 30, 2018. I am confident that these resources, coupled with the robust and individualized support available at the installation level, will provide the level of care our military families with special needs want and deserve. I encourage you to pass the word about the ROC to all your Service members and families – active, National Guard, and reserve – and to encourage them to explore Military OneSource and ROC resources, available at www.militaryonesource.mil or by calling toll-free 1-800-342-9647. Thank you for your support as we work together to assist our military families with special needs.

Plt L. Wilkie

POC: Ron Neal, (502) 613-5861

Robert L. Wilkie



#### **EFMP Outreach (Information)**





The Exceptional Advocate

A newsletter for military families with special needs

April 2017



#### **April Is Month of** the Military Child

April is Month of the Military Child, when we celebrate the sacrifice and service of military children and honor their courage and strength. To support military children including those with special needs - Military OneSource highlights some programs.

(More about Month of the Military Child) >





#### **MilParent Power for Families with** Special Needs

The military community is also a parenting community. Knowing when to ask for support, and making a few small changes in your daily routine can help power up your parenting.

(Learn more) >



Newsletter











Standardizing the **Exceptional Family Member Program** 

With standardization, the Exceptional ily Member Program is becoming more

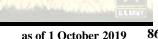


#### **National Autism Awareness Month**

April is National Autism Awareness Month. Some 3.5 million Americans live with autism, and tens of thousands receive an

http://public.militaryonesource.mil/news/2/2017/april

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#### **EFMP Outreach (Useful Links)**



http://www.militaryonesource.mil/efmp/overview
http://download.militaryonesource.mil/12038/EFMP/eLearning/EFMP%20Overview%20(web)/player.html
http://efmp.amedd.army.mil/
http://www.militaryonesource.mil/efmp/service-providers?content_id=287813
https://www.youtube.com/watch?v=JOMAMVr4s24&index=13 &list=PLwJycwX3ubJ-HhQSEUiFYNtaKe_3S7wt-

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"Soldiers First"



#### **Contact Information**



#### **TELEPHONE**

**Enlisted Matters** Officer Matters

DSN - 983-6829/6386 DSN - 983-5861

CML - 502-613-6829/6386 CML - 502-613-5861

#### E-MAIL:

#### **Enlisted Matters**

usarmy.knox.hrc.mbx.epmd-efmp-poc@mail.mil usarmy.knox.hrc.mbx.epmd-family-travel@mail.mil Ronald.s.neal.civ@mail.mil

#### **Officer Matters**

usarmy.knox.hrc.mbx.opmd-ofc-compassionate-actions@mail.mil

#### CONCLUSION





- ✓ Explained Branch Organization and Mission
- ✓ Explained Command Roles
- ✓ Explained Assignment Nomination Process
- ✓ Discussed EFMP Determinations
- ✓ Discussed Compassionate Actions
- ✓ Discussed Special Conveyance
- ✓ Discussed Stabilization Process
- ✓ Discussed SecArmy EFMP Initiatives
- ✓ Discussed EFMP Outreach/Initiatives





## **QUESTIONS**

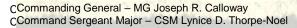
?







## THANK YOU!









## Ready and Resilient

Meagan Guevara, M. A., MRT-PE

Contractor

R2 Performance Center

Fort Knox, KY

303-718-1088

GuevaraMH@magellanhealth.com









#### Wednesday Admin Notes

- Tomorrow Command Conference Room at HQ USAREC
- Evaluation!
- Questions for the CG/CSM working lunch tomorrow
- Tomorrow is interactive so be ready to participate!









## Thursday, October 24th









### Thursday Morning Admin Notes

- Welcome SFA's!
- Restrooms are to the left, down ramp, on the right
- Questions for the CG and CSM
- Pictures for social media
- Today is interactive
- Dig in and have fun!









#### **Ground Rules**

- Cell phones silent
- Speak one at a time
- Be open minded
- Limit sidebars
- Timeliness
- Participation is key

•

•

• \_\_\_\_\_









## SFA and Senior Spouse Meet & Greet









#### STEP ONE

## Find the card with your location and title









### STEP TWO

## Find your counterpart









## STEP THREE

## Find your Brigade



# Investing in an SFRG in USAREC

**USAREC ALTC 2019** 

Facilitated by: Sara Jane Arnett & Katelyn Morris





Great Lakes Recruiting BN SFRG Senior Advisors & Leadership



## Class Objectives:

- Quantify SFRG Value
- Identify Your Best Role
- Discuss Effective Leadership
- Group Discussion

## Soldier and Family Readiness Value

## ... AND THE USAREC SFRG SURVEY SAYS ...

What kind of impact has an SFRG had on the morale and welfare of your Soldier and family?

**26.72%** Positive

■ 4.86% Negative

**■ 68.42%** Neither

In your opinion, would the morale and welfare of your Soldier and family improve with the presence of an active SFRG during your time in USAREC?

- 45.34% It would greatly improve
- 44.13% It would somewhat improve
- 10.53% It would not improve at all

# Overall, would you participate (attend events OR volunteer) if you had an active SFRG during your time in USAREC?

• 53.44 % said YES

• 35.63% said Maybe

• Less than 3% said NO



How have the spouses of your Battalion and Brigade Command Teams (Senior SFRG Advisors) impacted the success of your SFRG?



■ 13.36% Positively

■ 3.64% Negatively

■ 17% Neither

65.99% I don't know the Senior SFRG Advisors

# HOW DO YOU THINK AN SFA AND AN SFRG WOULD BENEFIT YOU AND YOUR FAMILY WHILE IN USAREC?

- Assistance in making connections with local community resources
- Making connections with other Army spouses and families in the local area
- Finding contacts for resources normally offered on a military installation (i.e. EFMP, Tricare, MWR, etc...)
- Assistance in navigating housing options, school options, etc during a PCS transition
- Communication regarding soldier business (work schedule, family events, achievements, etc...)

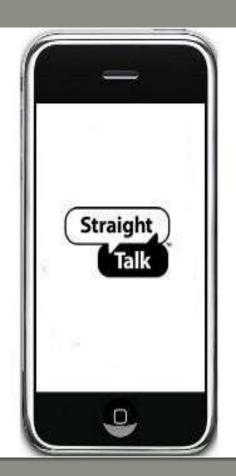
### **TOP SFRG ANSWER**

MAKING CONNECTIONS
WITH OTHER ARMY
SPOUSES AND FAMILIES IN
THE LOCAL AREA

#### **TOP SFA ANSWER**

FINDING CONTACTS FOR RESOURCES NORMALLY OFFERED ON A MILITARY INSTALLATION (I.E. EFMP, TRICARE, MWR, ETC...)

# Straight from the horses mouth ...



"Due to the lack of post resources while remotely located, the SFRG is needed the most during these assignments."

"Spouses want to be involved they just need a coordinator to bring everyone together and make things happen."

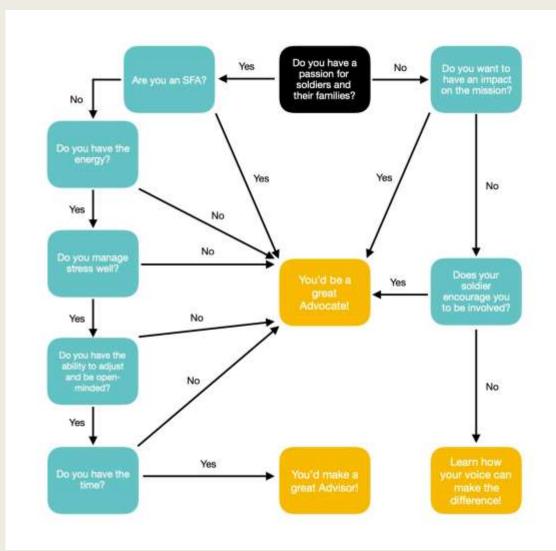
"We used to have an amazing senior advisor who inspired the whole BN. As soon as she left it all fizzled out, now there is no one to advocate for the SFRG, there is no one to advocate for the families."

"My husband has been a part of USAREC for quite some time and no one has ever tried to contact me, assist me or made me feel like I had any help at all."

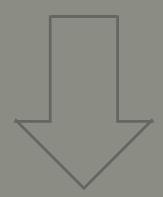
"The SFRG I was able to be apart of has impacted me in so many positive ways. They empowered me, supported me, and encouraged me. I just PCS'd and the strength I gained in my last SFRG has kept the fires burning! I can't wait to help spouses!!"

# Your Best Role as a Senior Advisor

# Are you an Advisor or Advocate?



# Effective Leadership



- 1) CONTINUALLY **INVEST**IN STRENGTHS
- 2) MAXIMIZE THE TEAM
- 3) UNDERSTAND
  FOLLOWERS' NEEDS

### 3 LESSONS FOR EFFECTIVE LEADERSHIP



## **DISCUSSION**







### Social Media

MAJ Jessica Rovero
Digital Media Chief
U.S. Army Recruiting Command



# SOLDIER & FAMILY READINESS VOLUNTEER PLAN

Interactive Workshop designed exclusively for USAREC Senior Spouses and SFAs

### **OBJECTIVES:**

- Build Social Media Community
- Understand Organizational Needs
- Assess, Identify and Prioritize Organizational Needs
- Introduce SFRG Strategic Plan
- Collaborate into Group Break-out Session
- Develop SFRG Volunteer Plan (Senior Spouse & SFA Teamwork Exclusive)



# BUILD A SOCIAL MEDIA COMMUNITY

# #ALTCCLASSOF2019 CREATE A FACEBOOK GROUP

**Facebook** 

# FACILITATING VIA FACEBOOK

- CREATE AN EVENT
- CREATE A MEETING
   AGENDA/MINUTES
- HOST AN SFRG MEETING

**Facebook** 

# UNDERSTAND ORGANIZATIONAL NEEDS



\*GROUP NORMS

\*COMPELLING PURPOSE

\*SHARED LEADERSHIP

\*JUST ENOUGH STRUCTURE

\*FULL ENGAGEMENT

\*EMBRACING DIFFERENCES

\*STRENGTHEN RELATIONSHIPS

\*GREAT RESULTS

# ASSESS, IDENTIFY AND PRIORITIZE ORGANIZATIONAL NEEDS



# BUILDING A MISSION STATEMENT

- WHAT ARE YOU GOING TO DO?
- WHO ARE YOU DOING IT FOR?
- How are you going to do it?

Our mi	ssion is to provide_		
	_	(what)	
for	through _		
(	who)	(how)	

Our mission is to build a strong group of leaders and advocates for USAREC Soldier and Family Readiness by connecting and empowering Senior Spouses and SFAs.

# SOLDIER & FAMILY READINESS GROUP STRATEGIC PLAN

### STRATEGIC PLAN FOR "IDEAL" SFRG:

- 1) Organize FOCUS GROUP
- 2) Initiate and coordinate SOCIAL MEDIA CAMPAIGN
- 3) Solicit ideas and FEEDBACK
- 4) Devise a PLAN to move forward
- 5) Publish RESULTS (optional)
- 6) Host SFRG KICK OFF EVENT



# SOLDIER & FAMILY READINESS GROUP VOLUNTEER PLAN WORKSHOP

Interactive Workshop designed exclusively for USAREC Senior Spouses and

SFAs



... TO USE
YOUR
EXPERIENCE
AND PAIR
INTO SENIOR
SPOUSE/SF
A TEAMS ...

# SENIOR SPOUSE/SFA VOLUNTEER PLAN PRESENTIONS

### That's a wrap!

Please fill out and turn in your class evaluation form and make sure to stay connected for support through our #altcclassof2019 Facebook group!







### Thursday Afternoon Admin Notes

- Tomorrow we are back at Palma Hall
- Evaluations!









## Friday, October 25th









### Friday Morning Admin Notes

- Evals, Evals, Evals!!!
- Certificates









### Resiliency

LTC Joseph Afanador, Psy.D.

Command Psychologist

Office of the Command Psychologist, USAREC



# Military Health System Reform Direct Care Access and Patient Experience

+

# Understanding TRICARE: Present and Future Challenges/Changes



Michael Griffin US Army Medical Command October, 2019



#### **Overview**

- MHS Reform/DHA Goals
- Our Journey
- Standard Appointing Processes to Improve Patient Experience
- A Market Approach
- The Way Ahead
- TRICARE/Military Health System Overview
- Comparison of TRICARE to US HC System
- Overview of recent changes



### **Department of Defense Lines of Effort**

- Restore Readiness and Lethality
- Strengthen Alliances
- Bring Business
   Reforms to DoD

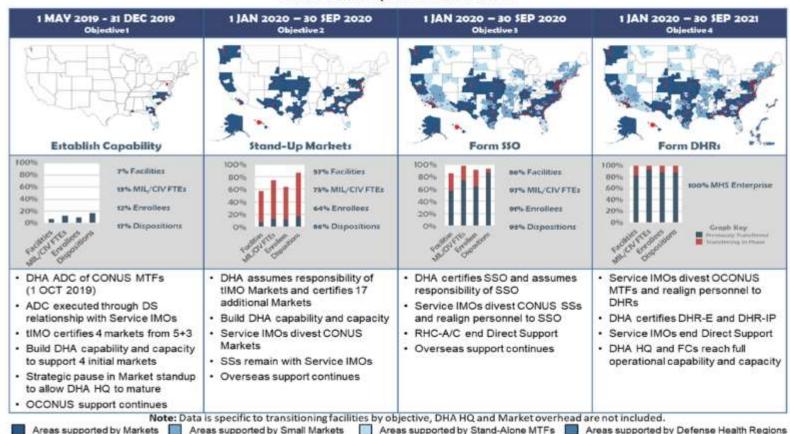




Tools

#### 1

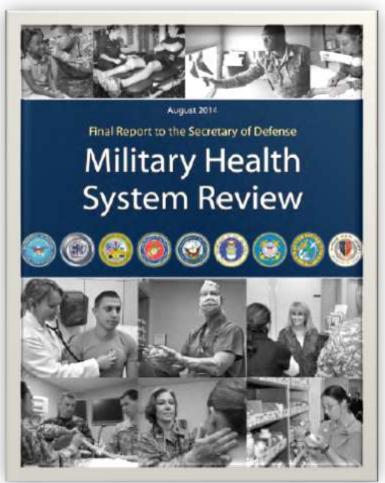
Exhibit 1: Plan 3 Implementation of NDAA 2017



# The Journey 2014 MHS Review of Access, Quality and Safety

" ... On average, access to care meets the identified standards; however, **performance varies** across the system ... "

" ... one important finding was the **notable difference** between data that reflect compliance
with access standards and the reported
satisfaction of patients with their ability to
receive timely care in MTFs ... "





#### **Our Goals**

### What Stays the Same?

- Support to the Mission
- Patient-Centered Care
- Integrated System of Readiness and Health

#### What's Changing?

- Standardized Appointing and Referrals
- Enhanced Patient Experience
- Market Approach



### What Does DHA Mean by Standardization?



What Standardization means: Consistent processes and experience among MTFs



What it does NOT mean: Our patients and their needs are all the same

The MHS uses a **population health**-based approach to care. MTF capabilities and preventive medicine services are aligned to address the special needs of **each MTF's** patient population.



#### **Benefits of DHA Assuming Responsibility for MTFs**

- Our patients can expect the same experience accessing care at each MTF
- DHA standards and processes are based on leading practices from highperforming MTFs and from industry
- DHA can adjust staffing at MTFs to better match supply (and type of supply) to meet patient demand for care (and type of care)
- DHA is developing civilian partnerships to support medical readiness and a ready medical force
- DHA is streamlining integration with the TRICARE network to reduce administrative burdens on our patients





## **Standardized Appointing Processes in DHA Policy 18-001**

- First Call Resolution to meet patients' needs the first time they call
- Optimized appointment availability
- Standard appointment lengths
- No "One Visit One Problem" experience
- Primary Care Provider Continuity, especially for chronic or follow-up reasons
- Active Duty Service Members can be appointed to any MTF
- Increased convenience:
  - Appointments available up to 180 days in the future
  - Primary care appointments available for TRICARE On-Line booking
  - Walk-in processes for common conditions (pregnancy tests, urinary tract infections, etc.)
  - More appointments for acute medical needs before/after weekends and during flu season
  - Increased availability of virtual appointments

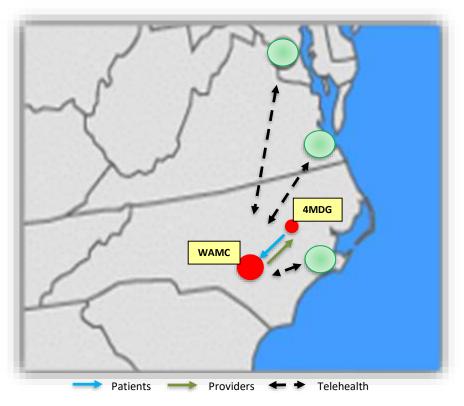


## **Specialty Referral and Appointing Processes**

- <u>Current</u> Standard Processes
  - Centralized MTF specialty referral review and appointing
  - MTFs must decide to accept a specialty referral or defer to the network within **24 hours**
  - Patients will receive a scheduled appointment date and time within 3 days of referral
- New Processes in Development for CY2020
  - Patients will be able to schedule a specialty appointment by calling a **single number** in each market the **next day for:** 
    - MTF specialty appointments
    - TRICARE network specialty appointments
    - Assistance for TRICARE for Life patients in seeking appointments with Medicare providers
  - Assistance with coordination and navigation services available upon request



## A Sample Market Approach to Specialty Care



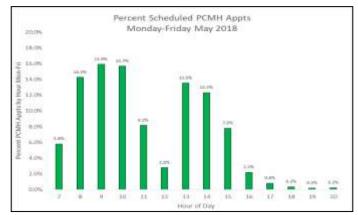
- Opportunities to avoid unnecessary network deferrals to save costs and support readiness:
  - Traveling specialists
  - Telehealth

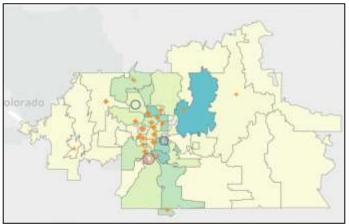
Specialty - 4 MDG Defer to Network	FY18 Total	Percent of Total
ORTHOPEDICS	1,310	13%
DERMATOLOGY	983	10%
ENT	844	8%
GASTROENTEROLOGY	627	6%
OB/GYN	928	9%
PHYSICAL THERAPY	467	5%
UROLOGY	393	4%
NEUROLOGY	372	4%
CARDIOLOGY	342	3%
PODIATRY	340	3%
SURGERY	338	3%
OPHTHALMOLOGY	279	3%
ENDOCRINOLOGY	205	2%
PHYSICAL MEDICINE & REHAB	177	2%
ALLERGY	173	2%



## **Enhanced Urgent Care Access and Expanded Primary Care Hours**

- MTFs may not completely close except on weekends and federal holidays
- Primary care operating hours expanded to provide appointments on days and at times most convenient to patients
  - 12% of appointments available after 1500 hours
  - 56% of MTFs now open until at least 1700 hours
- Improved access to urgent care
  - MTFs are establishing urgent care clinics based on demand and readiness needs
  - Unlimited self-referred network Urgent Care Clinic visits, which will meet the same national standards of care as MTFs
- Identification of opportunities for MTF urgent care or expanded hours availability

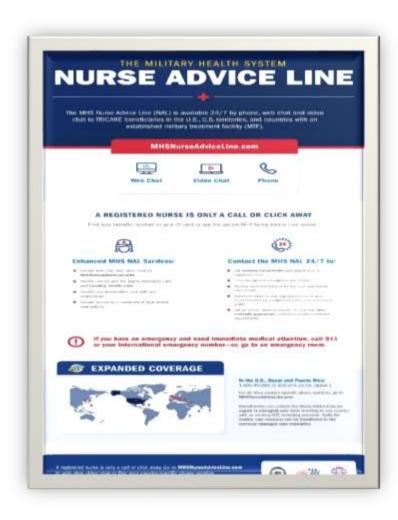






## **Global NAL**

- Advice on the most clinically appropriate level of care
  - Available by phone, text and video chat
  - Instructions emailed or texted to patients after the call
  - MTF appointments for empaneled patients
  - TRICARE network locator service
- On-Line NAL portal for Market and MTFtailored instructions
- Available to all eligible beneficiaries including TRICARE Reserve Select
- Pilot offering virtual appointments with a physician is underway
- 95% patient satisfaction





## Where Can I Get Help?

If a MTF is not complying with DHA guidance or you are not offered care within MHS Access Standards\*, ask to speak to the MTF Patient Advocate.







## **DHA Support to MTFs and Markets**

- To support policy implementation and compliance, DHA is:
  - Monitoring performance using central data systems
  - Holding twice weekly 2-hour webinars with all MTFs world-wide to answer questions and obtain feedback
  - Implemented computer-based training on access to care for all staff members involving in patient care
  - Conducting patient focus groups and site visits to MTFs and Markets
  - Assisting in implementation of Patient and Family Partnership Councils at each MTF to improve patient experience



## Way Ahead

- Continue MHS Reform efforts and implement additional programs and standard processes to improve access and patient experience
  - Customer Service and Patient Advocate Program Implementation
  - "Child Watch" program implementation in MTFs
  - On-boarding and patient education
  - Joint Outpatient Experience Survey via text
- Let us know how we can optimize the MHS for you



## Military Personnel Realignment Intent

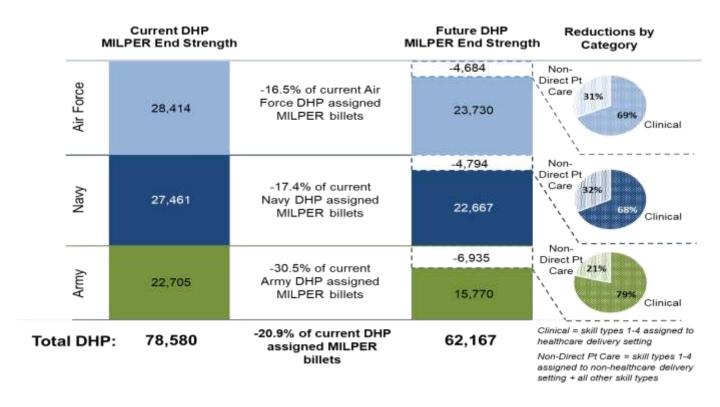
PURPOSE	Support the Services' requirement to realign military personnel (MILPER) billets from DHP to the line  Mitigate risks to medical readiness and beneficiary care and minimize
	the impact on the MHS
METHOD	<ul> <li>Identify potential capability gaps by analyzing health care demand signals and available sources of supply in each market</li> <li>Recommend solution sets to best to address capability gaps</li> </ul>
	<ul> <li>Define a process and develop an MOU between the MHS and Services for moving MILPERs out of the DHP to minimize disruptions to readiness and beneficiary care at MTFs</li> </ul>

#### **END STATE**

The MHS has an initial plan to mitigate the risk, a method to proactively identify and address capability gaps in the future, and a signed MOA establishing business rules allowing the MHS to seamlessly and transparently mitigate the risk to readiness and beneficiary care



# **Facts:** Reduction of 16,413 DHP MILPER Billets (-4k unencumbered billets)



### FY17 NDAA Section 703 Background and Timeline

- Title 10, USC 1073(d) defined the capabilities required for a Medical Center, Hospital or Ambulatory facility
- Secretary of Defense, in collaboration with the Secretaries of the Military Departments, was tasked to complete three primary lines of effort:
  - Apply criteria for medical centers, hospitals, and ambulatory care centers (ACCs)
  - Update the Military Health System (MHS) Modernization Study
  - Provide an implementation plan to identify future facility designations and describe planned changes to facility capability sets



#### 2016

Established senior-level workgroup to conduct update of MHS Modernization Study



#### 2018

Conducted initial analysis of Medical Center and Hospital/ACC criteria to generate preliminary recommendation for MTF restructure or realignment



#### Jun 2019

Final Report (703d) to Congress including final recommendations and implementation plans



Developed and applied methodology for updating the MHS Modernization Study that engages analytical communities and TRICARE Health Plan



#### **Dec 2018**

Began comprehensive assessments of each facility including:

- Military mission and installation support requirements
- Clinical performance
- Ability to integrate care with local providers



## MHS Section 703 Workgroup Objective

The MHS Section 703 Workgroup consists of representatives from Health Affairs, Defense Health Agency, Joint Staff, the Services and TRICARE Health Plan

The OSD P&R-led 703 Workgroup is responsible for:

- Developing MTF specific capability and capacity options and recommendations by applying decision criteria and analytic tools to assess MTFs against installation mission, ready medical force, and operational force requirements.
- Preparing use cases for each comprehensive MTF review highlighting its value to the installation, Service operational, and medical missions. Utilizing all available information, including the capacity and capabilities of the local network to support healthcare delivery to beneficiaries in the MTF market
- Supporting Senior DOD Leadership review of use cases and recommendations to finalize the scope and capabilities of care for all CONUS MTFs.
- Preparing and coordinating the final report to Congress as required by section 703d of FY2017 NDAA and section 711(a)(3) in FY2019 NDAA.



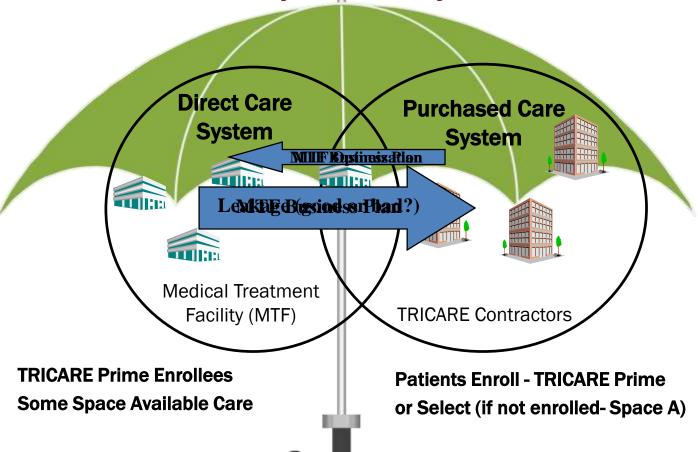
## What is TRICARE?



- DoD's integrated health care delivery system (MTF + civilian sector care).
- Administered by the ASD(HA).
- Congress and Legislation drives this train....



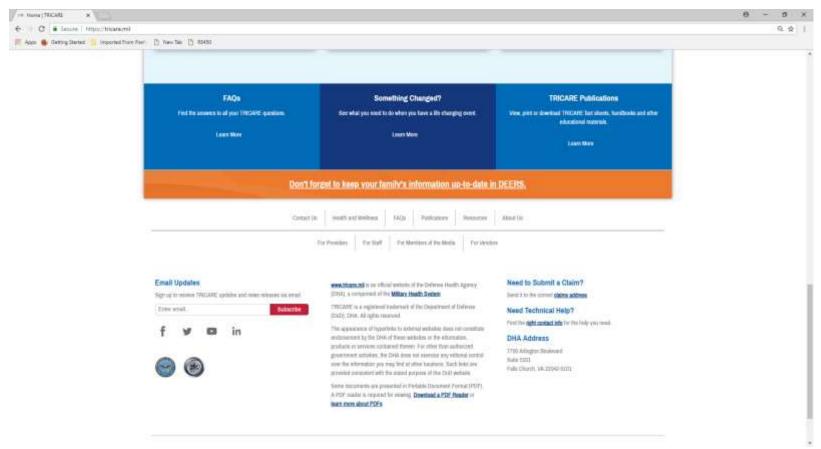
## Military Health System



**Enrollment required for both Prime and Select** 

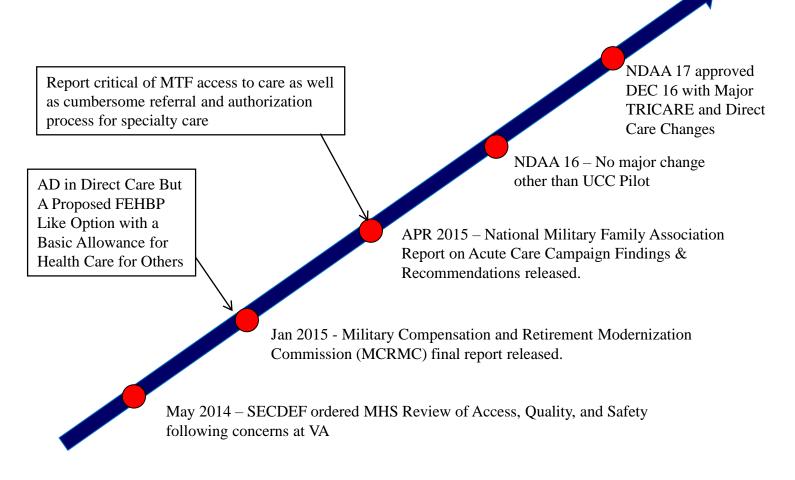


## Sign up for TRICARE Updates at <a href="https://TRICARE.mil">https://TRICARE.mil</a>

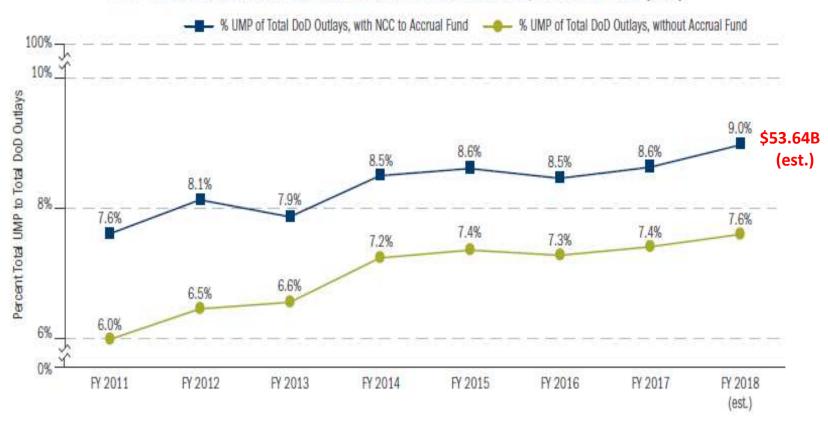




## **Recent History**

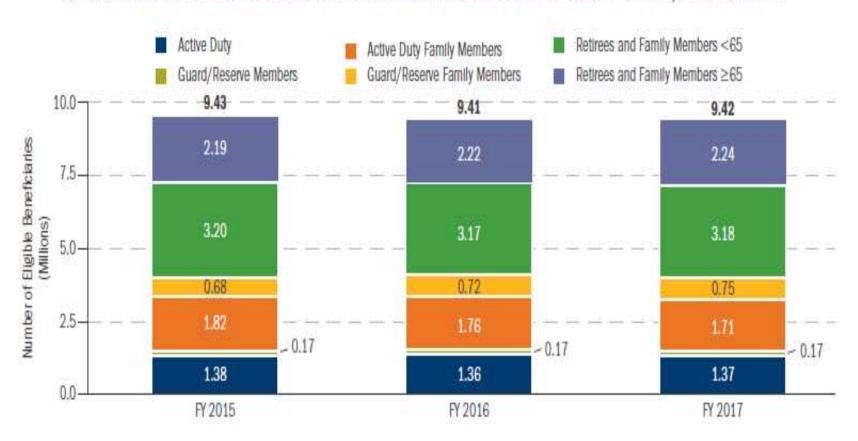


## UMP EXPENDITURES AS A PERCENTAGE OF TOTAL DOD OUTLAYS, FYS 2011-2018 (EST.)





## TRENDS IN THE END-YEAR NUMBER OF ELIGIBLE BENEFICIARIES BY BENEFICIARY GROUP, FYs 2015-2017





## **How Has the Landscape Changed?**

- Since 2004:
  - National HC costs have gone from 16% to nearly 18% of GDP
  - DoD HC has gone from 7% to almost 9%
- 23.7% beneficiaries are over 65
- Large drop in those with other health insurance
- Addition of numerous health plans covering more lives
- Historically little to no change in fee structure since program inception (1995).
- Major program changes the past few years.



## **TRICARE Health Plans**

- TRICARE:
  - Young Adult children up to age 26; Select or Prime; \$228 or \$376/month (CY 20 Rates)
  - Reserve Select: RC member/family \$44.17 or \$228.27/month (CY 20)
  - Retired Reserve: Retired RC member/family \$444.37 or \$1066.26/month (CY 20)
  - For Life MEDICARE wraparound coverage; member must pay part MEDICARE part B premium: If drawing Social Security \$135.50/month
  - Plus MTF Commanders Program; Allows TFL beneficiary to have "prime" access to MTF for primary care.
- US Family Health Plan Prime option is six areas of country via community based not-forprofit health system; enrollee not eligible for MTF care
- TRICARE Prime Retiree \$297 or \$594 (annual enrollment fee).



Figure 5

Cumulative Increases in Family Premiums, Worker Contributions to Family Premiums, Inflation, and Workers' Earnings, 1999-2018



SOURCE: KFF Employer Health Benefits Survey, 2018; Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2017. Bureau of Labor Statistics, Consumer Price Index, U.S. City Average of Annual Inflation (April to April), 1999-2018; Bureau of Labor Statistics, Seasonally Adjusted Data from the Current Employment Statistics Survey, 1999-2018 (April to April).





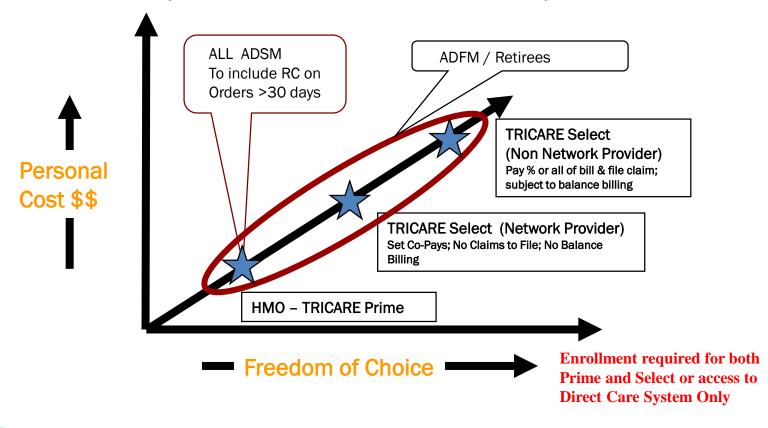
## **Recent Major Changes**

- New TRICARE Regions/Contractors
- TRICARE Select Implemented
- Changes in Benefit Structure
- Approaching 2<sup>nd</sup> Open Enrollment Season
- Change in Fee Structure
- •Change to Retiree Dental + New Vision Plan Options for ADFM/Retirees (Federal Employees Dental and Vision Insurance Program (FEDVIP), offered by the Office of Personnel Management <a href="https://www.benefeds.com/">https://www.benefeds.com/</a>).



# TRICARE Option's Effective <u>1 JAN 2018</u> Across the spectrum...

(Freedom of Choice relational to Cost)





## Where to Find Answers/Get Help

- Sign up for email updates at <u>www.tricare.mil</u>
- Become familiar with and understand your health benefits
- Keep your contact information up to date in Defense Enrollment Eligibility Reporting System (DEERS)
  - In person: Visit a local ID card office. Find an office near you at <u>www.dmdc.osd.mil/rsl</u>.
  - Phone: Call 1-800-538-9552 (TTY/TDD: 1-866-363-2883) or fax updates to 1-800-336-4416 (Primary) or 1-502-335-9980 (Alternate)
  - Online: Log into milConnect at https://milconnect.dmdc.osd.mil
  - Mail: Mail updates to: Defense Manpower Data Center Support Office; Attention: COA, 400 Gigling Road, Seaside, CA 93955-6771
- Contact a Beneficiary Counseling and Assistance Coordinator (BCAC) or Debt Collection Assistance Officer (DCAO) for help <a href="https://tricare.mil/bcacdcao">https://tricare.mil/bcacdcao</a>













# Army Emergency Relief Update

Ms. Shannon Wilson
Financial Readiness Program Manager
Army Community Service/Morale Welfare & Recreation

