



# Still Serving in Korea



Newsletter 02-4

The newsletter for U.S. military retirees in the Republic of Korea

Oct-Dec 2002

## Medical Care Matters

### TRICARE Plus Clarifications

Previous *Still Serving in Korea* articles on TRICARE Plus for Korea retirees incorrectly stated that signing up for TRICARE Plus could result in increased staffing of military hospitals. This is not correct. However, signing up for TRICARE Plus will give you a higher priority in appointments. (See *Yongsan Healthcare Forum Notes* starting on page 2 for more information.)

The form used for TRICARE Plus enrollment is DD Form 2853, TRICARE Plus Enrollment Application. Some retirees who read the fine print have declined TRICARE Plus enrollment because of the following statement in Section III, Block 6: "(5) by enrolling in TRICARE Plus I will be disenrolled from any other TRICARE enrollment program." These retirees are 65 and over and have TRICARE for Life coverage. They have interpreted the TRICARE Plus enrollment statement to mean that by signing up for TRICARE Plus they will lose TRICARE for Life coverage. This is not true. TRICARE for Life is not an enrollment program. You can only obtain TRICARE for Life by enrolling in Medicare Part B; the TRICARE for Life coverage is automatically granted as part of Medicare Part B. Similarly, TRICARE Plus does not jeopardize TRICARE Standard, which does not require enrollment, and coverage is automatic for all retiree, providing reimbursement of 75% of civilian health

*continued on page 2*

## IN THIS ISSUE

- 2 Yongsan Healthcare Forum
- 3 DFAS E/MSS Replaced by myPay
- 4 New Medicare Rates for 2003
- 5 Limited Concurrent Receipt Approved
- 6 Korean Defense Service Medal Okayed

*Still Serving in Korea* is published quarterly by the Osan Air Base Retiree Activities Office to inform retirees and family members on information of interest on rights, benefits and privileges, and on the status of legislative initiatives which affect military retirees and beneficiaries. Items in this newsletter do not necessarily reflect the views of the 51 FW, 7AF, PACAF, USAF, USFK, or DOD.

## Pay Matters

### Some 2002 Retirees Will Receive "Partial COLA"

For most retirees, the **2003 cost of living allowance (COLA) will be 1.4%** (effective December 1, 2002, and payable in the January 2, 2003 checks). But, members who retired during 2002 and who first entered service on or after Sept 8, 1980 will receive a COLA based on the calendar quarter in which they retired. This group has a slightly different COLA system in the first year after retiring, because their retired pay is calculated on their highest 36 months' basic pay rather than final basic pay.

Such members who retired during the first 6 months of 2002 will receive the same 1.4 percent COLA as other retirees. Those retiring in the third quarter of the year will receive a .5 percent COLA. Those retiring after September 30, 2002 won't receive a COLA on Dec. 1, because the COLA calculation measures inflation from October through September. Such partial COLAs apply only in the first year of retirement. All members retiring in 2002 will receive full-inflation COLAs in 2003 and subsequent years.

*The Retired Officers' Association Legislative Update, Nov 1*

### Special Compensation Rates to Rise for Some Disabled Retirees

Last week, we reported on the "special compensation" provision in the new FY2003 Defense Authorization Act that will redress the VA disability compensation offset to retired pay (concurrent receipt) for certain combat and combat-related disabled retirees. This report led many to ask whether that will affect the "special compensation for certain severely disabled retirees" that Congress approved two years ago. This "old" special compensation provides modest payments of \$50-300 a month to retirees who served at least 20 years of active duty and received 60-100% disability ratings within 4 years after retiring.

The "old" special compensation isn't going away, and rates for that program will increase in 2003 for some eligibles. Qualifying retirees with disability ratings of 80% or higher will receive payment increases of \$25 per month, effective January 1, 2003. Rates won't change for those with 60% or 70% ratings. Congress approved these selected payment increases almost a year ago, as part of the FY2002 Defense Authorization Act.

Many retirees now receiving the "old" special

*continued on page 3*

care costs once the initial deductible is met. The only current TRICARE medical enrollment program is TRICARE Prime, which is not available to retirees in Korea. (See *Yongsan Healthcare Forum Notes* below for more information on TRICARE Standard reimbursement for civilian health care in Korea.)

The bottom line is that TRICARE Plus is still a PLUS for Korea retirees, because it gives you higher priority to military medical care. (The *Yongsan Healthcare Forum* also revealed that there are limits to the number of retirees who can enroll in TRICARE Plus. Once the hospital's TRICARE Plus allocation is filled, those not enrolled will continue to receive medical care on a space available basis. Keep in mind that space available healthcare is lower in priority than TRICARE Plus.)

*Osan AB Retiree Activities Office*

### **Yongsan Healthcare Forum Notes**

The Healthcare Forum is held every other month in the 121<sup>st</sup> General Hospital second floor classroom. The next forum is scheduled for Jan 17, 2003 at 1000 hours. It is open to anyone in the eligible patient population. Following are items of interest to retirees from the Nov 15 meeting:

*Hospital Construction:* Phase 1 is from Mar 2002 to April 2004, Phase 2 is from Dec 2003 to Jun 2005, Phase 3 is from 2005 through completion planned for May 2007. (Yes, there are over-lapping dates for the phases). 200 to 300 construction workers are on site at any one time, with work ongoing 7 days a week from 0700 to 2200 hours in order to complete the project as soon as possible. Construction information is available at the following web site: <https://www.seoul.amedd.army.mil/121GH/hfpo/index.html>.

*Yongsan Family Care Center:* This facility is located south of Collier Field House adjacent to the KATUSA Snack Bar. It is a mini-equivalent of a Ronald MacDonald or Fisher House, designed to provide comfortable and inexpensive transient quarters for family members of hospitalized patients in the 121<sup>st</sup> General Hospital. Rooms are \$10.00 per night, with a refundable \$20 key deposit. There are three rooms, and they can accommodate from 1 to 3 persons per room. Each room has cable TV and a small refrigerator, and there is a central kitchen, dining area, and laundry room. Occupants clean their own rooms, and at the conclusion of their stay, Sports Billeting provides complete cleaning of the room. Occupancy has been averaging 72%-plus. Referrals are via the WIC Unit at the 121<sup>st</sup> General Hospital. For information, telephone military 737-6514 or commercial 7917-6514. On weekends and holidays call military 723-8841 or commercial 7913-8841.

*Pharmacy Call-in System:* The Pharmacy Chief announced that the telephone call-in system for

prescription refills is being upgraded and should be available after the first of the year. In the meantime, the Internet prescription refill service is available. Go on-line to <https://www.seoul.amedd.army.mil/121GH/pharmacy/pharm.htm>. The process is quick and easy via this Internet refill method, and refills are ready for pick-up the next duty day. I use this service and I am impressed. At the 121<sup>st</sup> General Hospital you do not have to take a number and wait for that number to be called to pick up an internet refill; just go to window #3 or #4. You can also use this Internet refill service to have refills filled and available for pick-up at the out-lying 18<sup>th</sup> MEDCOM pharmacies. Pharmacy hours at the 121<sup>st</sup> General Hospital will be extended to 1800 hours on duty days after the first of the year.

*Retiree Dental Care:* Currently 18<sup>th</sup> MEDCOM (i.e., the 618<sup>th</sup> Medical Company) has a total of 42 dentists, 34 military and 8 civilian dentists. They also have 14 dental hygienists. Half of the dentists and hygienists are in Seoul. There are two available examination appointments that can be scheduled each day for military retirees, for actual appointments 4 to 6 weeks in the future. There are also two available operative appointments that can be scheduled each day for actual appointments exactly 6 weeks in the future. There is only one hygienist who services military retirees so although cleaning appointments are not rationed like examination or operative appointments, the use of only one hygienist does limit the availability of cleaning appointments for military retirees and their family members. Daily rationing of appointments for retirees is based on whoever telephones in first at 0730, or who is waiting in line at 0730. A wooden bench or settee was suggested for the front entrance so waiting retirees don't have to stand, or sit on the concrete. The OCONUS TRICARE DENTAL PLAN (also known as the TRICARE Family Member Dental Plan Overseas) is operated differently from the CONUS plan, in that personnel must have a referral from the military dental facility. I asked if or when this OCONUS TRICARE DENTAL PLAN will be available to military retirees and family members, since there is a retiree plan in effect in CONUS (contracted with a different provider) and since 18<sup>th</sup> MEDCOM and the 618<sup>th</sup> Dental Company have authorized and certified off-post dental care for active duty families. There is no longer an argument that the off-post dental care is not certified, or that DoD does not have a program of dental care for retirees. The honest answer was that the retirees needed to "make noise", e.g., go through retiree channels to ask for coverage, or write to their Senators and Representatives. Although this OCONUS TRICARE DENTAL PLAN is not available to retirees, more information about it can be found on-line at <http://www.ucci.com>.

*TRICARE Standard at Korean Hospitals:* 18<sup>th</sup> MEDCOM has Memorandums of Understanding (MOU) with 8 Korean hospitals, some of them truly world-class

continued ►

Continued on page 4

compensation may also qualify for the "new" combat-related special compensation (concurrent receipt) provisions just approved by Congress, but payments under the new program won't start before May at the earliest. People who are eligible for both programs will be required to choose one or the other. In most cases, we expect the new program will provide higher payments.

*The Retired Officers Association Legislative Update, Nov 22*

### **myPay Improves DFAS Electronic Pay Services**

Members of the retiree community can now enjoy improved services from "myPay" to manage their pay account information more easily and more securely than ever before.

That's according to an announcement by Tom Bloom, director of the Defense Finance and Accounting Service (DFAS).

Formerly known as E/MSS, myPay allows retirees and annuitants as well as active, Reserve, and Guard members and civilian employees to take charge of their pay accounts online. The new improved service launches today on the Internet Oct. 15 at <http://mypay.dfas.mil>.

With myPay, customers can perform the following activities by simply using their existing E/MSS Personal Identification Number (PIN):

- \* View, print and save leave and earnings statements
  - \* View and print tax statements (military members will have this available in Jan. 2003)
  - \* Change federal and state tax withholdings
  - \* Update bank account and electronic funds transfer information
  - \* Manage allotments
  - \* Edit address information
  - \* Purchase U.S. Savings Bonds
  - \* Control Thrift Savings Plan enrollment (military only)
  - \* View and print travel vouchers  
(Features vary by Armed Service and status.)
- Easy -- According to DFAS officials, myPay's new design helps customers find the information they want and complete any transaction in just three clicks. Available nearly 24 hours a day, myPay means no waiting in lines or on the phone. It also improves customer confidence by providing clear confirmation messages.
  - Secure -- myPay combines strong encryption and secure sockets layer technology with the user's social security number and PIN to safeguard information from unauthorized access, officials explained.
  - Money saver -- Using myPay can save millions of dollars in printing, postage and customer service costs. The service provides leave and earning statements online, so customers can turn off the print

*continued* ►

version of their statements and save Uncle Sam money. If all civilian employees received their leave and earning statements electronically, the Department of Defense could save more than \$6 million annually.

Customers who have been using E/MSS can continue to use their PIN at **[mypay.dfas.mil](http://mypay.dfas.mil)**.

Customers in the following categories - military retirees and annuitants, civilian employees, active Air Force and Marine Corps members - who need a new PIN should go to the web site, click on "need new PIN?"

Active Army and Navy members may request PINs by faxing name, social security number, phone number, signature, and copy of a government ID to DFAS at 216/522-5800. Then, log on following the instructions provided.

All customers with questions about myPay can call customer support at 1 (800) 390-2348, Monday through Friday between 7 a.m. and 7:30 p.m. Eastern Time.

*Air Force Retiree News, Oct 16*

### **Tax Forms to be Available Online**

Defense Finance and Accounting Service is putting pay information at the fingertips of the military community.

Beginning in January, the 2002 W2 tax forms will be available online through DFAS' myPay system.

A personal identification number is needed to access personal accounts. Service members, retirees and civilian employees who do not remember receiving their PIN or do not remember the number can go to <http://www.dfas.mil/>, and click on myPay, which is under the "Money Matters" heading.

Due to security reasons PINs are mailed to the recipients, and it could take from three to seven days to get the number after the request has been made, said Catherine Ferguson, a DFAS spokeswoman.

"We decided to put the W2 form online because we get a lot of phone calls from soldiers who are deployed, have lost their originals or for some reason need another copy," Ferguson said.

Troops can concentrate on their mission when they are not worried about pay and benefits, said Dennis Eicher, Electronic Commerce, Military and Civilian Pay Services director. That is why DFAS is providing innovative and reliable tools, he said. Troops can take charge of their pay accounts online, Eicher added.

Some of the other finance actions that can be performed online to date are: purchasing savings bonds, managing allotments, viewing and printing travel vouchers. ■

*News of the Force, Oct 22*

facilities, located throughout the peninsula. Retirees and their family members do not necessarily need 18<sup>th</sup> MEDCOM referrals to these Korean hospitals, but should check their insurance coverage before having treatment at Korean facilities. It is important for all personnel to ensure current data is on file with DEERS, including phone numbers. That should include cellular phone numbers if they have previously been put into DEERS. 18<sup>th</sup> MEDCOM/121<sup>st</sup> General Hospital go to the on-line DEERS database to check office, home, and cell phone numbers of personnel eligible for medical treatment.

*TRICARE Plus:* We had previously heard that retiree enrollment in TRICARE PLUS could mean that military medical staffs in Korea would be increased due to a higher patient population. I asked this question, and was told this is not true. However, retirees are still encouraged to enroll themselves and their family members in TRICARE PLUS. The advantage is a higher priority for appointments. It was announced that there is a “cap” on the numbers of eligibles who can enroll in TRICARE PLUS with 18<sup>th</sup> MEDCOM/121<sup>st</sup> General Hospital. I asked what that number is, and was told it is 233. I do not know how close the current enrollment is to that “cap” or whether enrollments will cease once that “cap” is reached, but clearly all retirees should enroll as soon as possible in TRICARE PLUS.

*Health Insurance Billing:* If you have health insurance, you need to fill out a DD Form 2569, “Third Party Collection Program – Record of Other Health Insurance”. These forms are available on the counter near the medical records window and can be turned in there or at the adjacent cashier window. This program allows the 18<sup>th</sup> MEDCOM/121<sup>st</sup> General Hospital to collect from insurance carriers and directly add the receipts to their local budget. This translates to better medical services for all of us, and brings military medicine in line with current USA civilian medical practices. There is no impact to you, other than filling out the form and turning it in. You get the same medical care at no additional cost to you. Very importantly, this can also help you meet the annual deductible for your private medical insurance. I.E., if I understand this correctly, if you have an insurance policy with a \$300 deductible, and you are referred by the 121<sup>st</sup> General Hospital to a Korean hospital, your insurance carrier will be billed for the cost, and the insurance company and you will receive a statement attesting that you “paid” the deductible. You will not have really paid anything but it goes against your deductible, and if you later do have to shell out money from your own pocket for other medical services, your deductible may be wholly or partially paid. This can save you money. So it is to your advantage to fill out and turn in the form; help yourself, and help the 18<sup>th</sup> MEDCOM.

*Many thanks to LTC Al Chellis, President of the U.S.*

continued ►

*Military Retirees Association Korea, whose excellent notes were the basis for the comprehensive report on the Healthcare Forum.*

*Osan AB Retiree Activities Office*

### **Court Ruling Won't Affect TFL**

The Retired Officers Association (TROA)'s special legislative alert on Tuesday reported the U.S. Court of Appeals ruling against the health care lawsuit filed by Colonel "Bud" Day's Class Act Group.

Unfortunately, badly worded news media reports left some retirees with the misimpression that the ruling might somehow hurt their TRICARE For Life (TFL) health coverage. That is definitely NOT true.

The court ruling denied redress for health care denial to older retirees in the past, which is certainly disappointing to TROA and other advocates for service beneficiaries. But it will not affect the new TRICARE For Life or TRICARE Senior Pharmacy benefits in any way.

If you should encounter any such unfounded rumors or worries in conversations or on the Internet, please nip them in the bud so they don't cause any unfounded worries.

*TROA Legislative Update, Nov 22*

### **Medicare Rates for 2003**

On the heels of a slight 1.4 percent Social Security increase, the Department of Health and Human Services (HHS) announced a more substantial increase in the Medicare premium, deductible and coinsurance amounts to be paid by Medicare beneficiaries in 2003.

For Medicare Part A, which pays for inpatient hospital, skilled nursing facility, and some home health care, the deductible paid by the beneficiary will be \$840 in 2003, up 3.5 percent from this year's \$812 deductible. **The monthly premium paid by beneficiaries enrolled in Medicare Part B**, which covers physician services, outpatient hospital services, certain home health services, durable medical equipment and other items, **will be \$58.70**, an increase of 8.7 percent over the \$54.00 cost for 2002. ■

*Air Force Retiree News, Oct 23*

### **Your DEERS Contact Information**

When your hospital needs to contact you, they check the DEERS database. There are four data fields in DEERS for contact information. These are:

- Home phone
- Work phone
- Fax
- Personal e-mail address

If you have a cell phone, you can enter it in the home phone field. I put mine in the fax field on the assumption that hospital personnel will recognize it there.

*Osan AB Retiree Activities Office*

# Legislation Matters

## Concurrent Receipt Update

House and Senate passed the National Defense Authorization Act (NDAA) (H.R. 4546) with a very limited Concurrent Receipt Provision. House and Senate Armed Services Committee leaders, fearful of a veto that could kill the whole FY2003 Defense Authorization Act, convinced the Administration to accept a reduced package focused on retirees with disabilities due to combat, combat-oriented training or certain other hazard-related circumstances. Committee leaders believe they had little choice in taking what they saw as the only possible route to any progress on concurrent receipt this year.

In essence, the deal establishes a new form of "special compensation" for Certain disabled retirees who have at least 20 years of active duty or a combination of active duty time and Reserve points comprising the equivalent of 20 years of full-time active duty (unfortunately, very few Reserve retirees qualify under this strict criterion).

The amount of the special compensation will be the full amount of retired pay forfeited due to receipt of VA compensation for a qualifying disability. Unlike the special compensation already in law (which provides \$50 to \$300 per month for certain severely disabled retirees), the new version won't be capped at a specific dollar amount, and will rise each year as the offset rises. Unlike the current \$50 to \$300 special compensation, which requires that a qualifying disability must have occurred within 4 years after retirement, eligibility for the new version will not be restricted by any time limit. Qualifying members will be eligible to receive either the "new" or the "old" special compensation amount, whichever is higher.

The effective date for the new program will be six months from the date the President signs the Defense Authorization Act into law, so the effective date should be sometime in May 2003. The six-month delay will allow the Pentagon time to determine which retirees and which disabilities qualify for the new payments (see below) and establish application procedures (the language passed by the House indicates qualifying retirees will have to apply for the new special compensation). There will be no phase-in or ramp-up period. Qualifying payments will be paid as of the effective date.

There are two sets of qualifying disabilities, one more complicated than the other. On the simple side, any qualifying retiree with a disability rating of 10% or higher that is associated with award of a Purple Heart will be eligible for the new special compensation. Under this rule, the special compensation amount will be based on the disability rating awarded for the combat wound, rather

*continued* ►

than any higher rating the retiree may have been awarded for a different reason.

The other, more complicated, eligibility rule covers retirees awarded Disability ratings of 60% or higher for other illnesses/injuries attributable to combat situations, combat-oriented training, hazardous duty, or instrumentality's of war. The legislators based these categories on the Defense Department's current definition of "combat-related" disabilities, as described in DoD Instruction 1332.38. The following is a summary of the descriptions in that Instruction, which presumably will be used to guide DOD eligibility, decisions for the new program.

- Direct result of armed conflict: including a war, expedition, occupation of an area or territory, battle, skirmish, raid, invasion, rebellion, insurrection, guerrilla action, riot, or any other action in which Service members are engaged with a hostile or belligerent nation, faction, force, or terrorists.
- While engaged in hazardous service: including, but not limited to, aerial flight duty, parachute duty, demolition duty, experimental stress duty, and diving duty.
- Under conditions simulating war: resulting from military training, such as war games, practice alerts, tactical exercises, airborne operations, leadership reaction courses, grenade and live fire weapons practice, bayonet Training, hand-to-hand combat training, rappelling, and negotiation of combat confidence and obstacle courses (does not include physical training activities, such as calisthenics and jogging or formation running and supervised sports).
- Caused by instrumentality of war (incurrence during a period of war is not required): includes such causes as wounds caused by a military weapon, accidents involving a combat vehicle, injury or sickness caused by fumes, gases, or explosion of military ordinance, vehicles or material. (DOD example: an injury resulting from a fall on the deck of a ship while participating in sports would not normally be covered, since the sport activity, not the ship, caused the fall. But it would be covered if the operation of the ship caused the fall.)

Clearly, these guidelines allow for some judgment, so it's uncertain how many people may qualify. Different Hill sources have offered estimates ranging from 10,000 to 30,000 eligible retirees, with cost estimates ranging from \$4 billion to \$9 billion over 10 years. The new Defense Authorization Act specifies that the Pentagon will be responsible for applying the above criteria to determine which VA disability awards qualify for the special compensation.

*continued on page 6*

In discussing the issue on the House floor, Reps. John Larson (D-CT) and Gene Taylor (D-MS) expressed their concerns about ensuring that conditions related to Agent Orange and the Gulf War Syndrome would be covered. Rep. Duncan Hunter (R-CA), who helped negotiate the provision, expressed his belief that they should be, and expressed his willingness to write a letter to that effect to the Secretary of Defense.

Uniformed Services Disabled Retirees (USDR) and other military organizations agree with the Armed Services Committees that the authority outlines above are preferable, by far, to the alternative of getting nothing. But it falls far short of what USDR believes is fair, and still leaves many, many thousands of disabled retirees having to pay for their own disability compensation. We intend to track implementation of the new plan closely to ensure the rules are interpreted reasonably, and will continue the fight to expand eligibility.

USDR members as well as other military coalition members are deeply disappointed that it falls far short of the much broader provisions we have been battling for - and we fully intend to continue that fight. Sen. Bill Nelson (D-FL) gave a speech on the floor of the Senate, which condemned the limited provision. He has stated that he would re-introduce "Concurrent Receipt" at the beginning of the 108th Congress. His entire message to the Senate can be read under USDR Media.

We would be remiss if we didn't thank those who have led the way in this year's battle: Concurrent receipt champions Rep. Mike Bilirakis (R-FL) and Sen. Harry Reid (D-NV), Senate Armed Services Committee leaders Carl Levin (D-MI) and John Warner (R-VA), House Armed Services Committee leaders Bob Stump (R-AZ), Duncan Hunter (R-CA) and Ike Skelton (D-MO), and Reps. Jim Nussle (R-IA) and Charles Bass (R-NH) of the House Budget Committee.

This is a victory in the first battle of the war. We are disappointed with the Bush administration and will start immediately working for full restoration of retired pay next year.

USDR is dropping the term Concurrent Receipt and will continue to use Restoration of Retired Pay for All Military Disabled Retirees beginning in the 108th Congress.

*USDR Legislative Update, Nov 14*

### **Veterans' Benefits Bill Headed to President**

S. 2237, the Veterans' Benefits Improvements Act of 2002, originally sponsored by Senate Veterans Affairs Committee Chairman John D. Rockefeller IV (D-WV), began its journey as a bill to award disability compensation to veterans who suffer hearing loss associated with service in specific military specialties. Along the way a number of other veterans benefit bills were incorporated into S.2237,

*continued* ►

which Congress finally approved and sent to the President this week. S.2237 will:

- \* Continue VA health insurance coverage for eligible surviving spouses who remarry after attaining age 55 (TROA and TMC sought to continue eligibility for the VA survivor annuity as well, but the House and Senate could not reach a consensus on that benefit).
- \* Establish a presumption of service-connection for hearing loss associated with certain military skills (to be determined by the VA in consultation with the National Academy of Sciences) and authorize compensation for servicemembers who have a rated hearing loss in both ears.
- \* Clarify the entitlement to special monthly compensation for female veterans who have service-connected mastectomies.
- \* Increase the Medal of Honor stipend from \$600 to \$1000 per month, authorize an annual adjustment to the stipend, and authorize a lump-sum payment of the stipend retroactive to the date of the act of valor.
- \* Authorize economic protections for National Guard servicemembers under the Soldiers and Sailors Civil Relief Act when called by a governor to state active duty (Title 32) in support of a federal national emergency.
- \* Permit the construction of a privately funded memorial to the veterans of the Battle of the Bulge at Arlington National Cemetery.
- \* Allow the VA to offer adjustable rate home loans to veterans.

We are grateful to Senator Rockefeller, House Veterans Affairs Committee Chairman Rep. Chris Smith (R-NJ), and the other House and Senate sponsors of related bills incorporated into S.2237 for their leadership and commitment to the nation's servicemembers and veterans.

*The Retired Officers Association Legislative Update, Nov 22*

### **Korea Defense Service Medal**

The National Defense Authorization Act (NDAA) of 2003 authorizes a Korea Defense Service Medal. According to a House Armed Services Committee (HASC) press release on the NDAA:

“The Korean Peninsula continues to be a dangerous region, even since the end of the Korean War in 1954. Therefore, the conferees authorized a Korean service medal to be issued to military personnel who served in this area between July 28, 1954 and an undetermined date in the future.”

No other information is available at this time. ■

*Osan AB Retiree Activities Office*

## Community Matters

### 2003 RAO Holiday Schedule

The Retiree Activities Office will be closed for Winter Vacation from noon on December 24 and will reopen on January 6, 2003. If you need assistance during this time, you can leave a message on the office answering machine at DSN 784-1441, Commercial 031-661-1441, or call my cell phone at 017-477-1441.

During 2003, the RAO will be closed for the following holidays and vacation periods:

January 20 (Wednesday)	Martin Luther King's Birthday
January 30-31 (Thu-Fri)	Lunar New Year (Seol-Nal)
February 17 (Monday)	President's Day
May 26 (Monday)	Memorial Day
July 4 (Friday)	Independence Day
<b>July 21-August 1</b>	<b>Summer Vacation</b>
September 1 (Monday)	Labor Day
September 10-12 (Wed-Fri)	Korean Thanksgiving (Chuseok)
October 13 (Monday)	Columbus Day
November 10 (Monday)	Veterans Day
November 27-28 (Thu-Fri)	Thanksgiving Day
<b>December 24-January 4</b>	<b>Winter Vacation</b>

*Osan AB Retiree Activities Office*

## Laughing Matters

### All I Needed to Know About Life I Learned from Santa

Encourage people to believe in you.

Always remember who's naughty and who's nice.

Don't pout.

It's as much fun to give as it is to receive.

Some days it's ok to feel a little chubby.

Make your presents known.

Always ask for a little bit more than what you really want.

Bright red can make anyone look good.

Wear a wide belt and no one will notice how many pounds you've gained.

If you only show up once a year, everyone will think you're very important.

Whenever you're at a loss for words, say: "HO, HO, HO!"

*from the Internet ☺*

## The Director's Corner

### Odds and Ends

Anyone who knows me knows that I readily admit errors and I apologize if I operate on erroneous information. The first item on page 1 is an example. I was giving out wrong information about TRICARE Plus, and I wanted to be sure it was corrected. In each newsletter, if you read page 8, I try to forecast what will be included in the next issue. I try to stick with the "menu" whenever possible. However, this time I missed with both items. I had forecast state tax information and personal information for your survivors. But, when all was said and done with the 107<sup>th</sup> Congress and other things, I just ran out of room because there are just too many new developments to report. So, I'll try posting the state income tax information on the two web sites (<http://www.rao-osan.com> and <http://www.osan.af.mil/Public/RetireeActivities/index.html>) under "Hot Issues" and I'll try to get the important personal information into the next issue.

The retiree I reported on in the last Director's Corner didn't stay long at the Armed Forces Retirement Home. He checked out on Oct 2 saying that it wasn't the right place for him. All I can say at this point is that he should not show up at my office expecting more assistance. He "shot his wad" the first time around.

This year marks the completion of five years as Director of the Retiree Activities Office. I kept track of my volunteer hours for the first two years and logged in excess of 2,000 hours each year. Then I ran out of time to keep up the log, so I know that I've logged at least 2,000 hours in each of the remaining three years, for a total of at least 10,000 hours. Quite a milestone, but I've got a long way to go to equal the contributions (and knowledge) of my predecessor, David Downing.

At this Christmas season, both Punee and I want to send our wishes to you and your family for peace, health and happiness. And I want to thank each and every retiree (and widow) for giving me the opportunity to serve.

Merry Christmas and Happy New Year!

*Jack Terwiel*

**RETIREE ACTIVITIES OFFICE  
51 MSS/CVR  
UNIT 2097  
APO AP 96278-2097**

ADDRESS CORRECTION REQUESTED

**Entitlement to Army Service Ribbon is Retroactive**

Army veterans are advised that the Army Service Ribbon is retroactive for personnel who served on active duty after 1981.

The Army Service Ribbon is awarded to members of the Regular Army, National Guard, or Army Reserve for successful completion of initial entry training. In the case of personnel who receive a Military Occupational Specialty identifier based on civilian or other-service acquired skills, the ribbon is awarded upon honorable completion of four months active service. Only one award of this ribbon is authorized, even if an individual completes both officer and enlisted initial entry training.

The award is retroactive to all veterans who received training prior to 1981 but served for an active period any time after 1 August 1981.

Should a former service member wish to obtain a DD-215 (DD-214's cannot be changed) acknowledging this award, the veteran must file form SF-180. For more information on form SF-180 see:  
<http://members.aol.com/forvets/htom.htm>.

*continued* ►

For more information on the Army Service Ribbon, see:  
<http://www.amervets.com/replacement/asr.htm#isr>.  
*News of the Force, Nov 24*

**Korea Retiree Organizations**

In addition to the Retiree Activities Office, you have two retiree organizations you can turn to for assistance. The official one is the United States Forces Korea Retiree Council. The Chairman is COL Chuck Jackson, USA Retired, 723-6713; Vice Chairman is LTC Al Chellis, USA Retired, 723-6193.

The U.S. Military Retirees Association Korea is a dues-free, private organization and all Korea retirees are members. The President is LTC Al Chellis, and Secretary is MAJ Bill Horvath, USA Retired, 723-5377.  
*Osan AB Retiree Activities Office*

**In the Next Issue**  
Helping Your Survivors – Checking your personal files annually  
On-Line Assistance – Information, forms available at many sites