

Articles of Immediate Interest

DFAS News SBP Open Season Information

Congress provided for a Survivor Benefit Plan Open Season in the 2023 National Defense Authorization Act (NDAA). The SBP Open Season began on December 23, 2022 and **ends on January 1, 2024**.

The SBP Open Season allows for **retirees receiving retired pay, eligible members, or former members awaiting retired pay** who are **currently NOT enrolled** in SBP or RCSBP (Reserve Component Survivor Benefit Plan) **to enroll**. For a member who enrolls during the SBP Open Season, the law generally requires that the member will be responsible to pay retroactive SBP premium costs that would have been paid if the member had enrolled at retirement (or enrolled at another earlier date, depending on the member's family circumstances).

The SBP Open Season also allows eligible members and former members who are **currently enrolled** in either SBP or RCSBP to **permanently discontinue** their SBP coverage. The law generally requires the covered beneficiaries **to concur in writing** with the election to discontinue. Previously paid premiums will not be refunded.

Of note, for those eligible members or former members awaiting retired pay ("**Gray Area**" retirees) who wish to either enroll in or discontinue coverage, they will need to do so through their Branch of Service. **PLEASE NOTE:** To be valid, if the retiree is married, the retiree's spouse must concur with the member's request. Also, any currently covered former spouse or child aged 18-22 must concur under the 2023 NDAA Open Season. The covered party's signature must either be **notarized or witnessed by an SBP counselor**.

****The SBP Open Season 2023 Discontinuance Form - Provisional** will be available for download from the DFAS SBP Open Season special focus website**

DFAS is continuing to work on prepare the additional forms, policies, and processes required to facilitate enrollment this SBP Open Season. We will not be able to answer specific questions until we obtain official DOD guidance on the new law, policy, and processes. It will take some time for all of the details to be determined. We appreciate your patience as we work through the preparation. Continue to monitor our special focus webpage at: <https://www.dfas.mil/sbpopenseason23>.

Julie Burandt-Partin
Director, Retired and Annuitant Pay (R&A)

FRA Newsbytes

URGENT! **CBO Recommends TFL Beneficiaries Pay More for TRICARE**

The Congressional Budget Office (CBO) has recently issued a report recommending two separate proposals to reduce the cost of TRICARE-For-Life (TFL) to help reduce the budget deficit. The CBO recommends that TFL beneficiaries pay the first \$850 in healthcare cost and that TFL would only pay 50 percent of the next \$7,650 in cost annually.

Currently TFL beneficiaries do not pay an annual enrollment fee. The report recommends TFL beneficiaries pay an annual enrollment fee of \$575 for individual coverage or \$1,150 for family coverage. The enrollment fees would be indexed to grow at the same rate as average Medicare costs in later years.

Although this has not yet been introduced as legislation, the FRA will oppose any proposal that increases costs to retirees who rely on TFL to supplement their Medicare benefits. Most of these beneficiaries are on fixed incomes and cannot absorb substantially higher health care costs. The FRA opposes these proposed fee increases because the association believes that a military retiree's healthcare premium is at least in large part, paid for with 20 or more years of arduous military service. Further, the association believes that the Department of Defense must sufficiently investigate and implement other options to make TRICARE more cost-efficient as alternatives to shifting costs to TRICARE beneficiaries.

FRA members are urged to use the FRA Action Center to tell their legislators to **oppose these CBO proposals** now!

Vets in Suicidal Crisis can now go to any VA or non-VA Health Care Facility for Free

The Department of Veterans Affairs (VA) has begun allowing any veteran experiencing a suicidal crisis to receive emergency care at no cost from any VA or non-VA health care facility. Enrollment in the VA system is not required. "Veterans in suicidal crisis can now receive the free, world class emergency health care they deserve — no matter where they need it, when they need it, or whether they're enrolled in VA care," said VA Secretary Denis McDonough. "This expansion of care will save Veterans' lives, and there's nothing more important than that." This benefit includes inpatient or crisis care for up to 30 days, and outpatient care for up to 90 days.

Veterans also have the option to Dial 988 then Press 1 to connect with the 24/7 crisis assistance hotline. The original number for the Veterans Crisis 1-800-273-8255 and press 1, remains available, and individuals can make contact via chat at [VeteransCrisisLine.net](https://www.veteranscrisisline.net), or by texting 838255.

Poll Shows Approval of Military is Down

A recent poll from the Ronald Reagan Presidential Foundation indicates that approval for the U.S. military has declined in recent years. Only four years ago, 70 percent indicated they had a great deal of trust and confidence in the military. This year only 48 percent now express a "great deal" of trust and confidence in the military. That is a drop of more than 20 points. No other public institution including Congress, the Supreme Court, the presidency or the media has seen as sharp a decline in public trust.

The majority of Americans believe that senior leaders at the Department of Defense are overly focused on politics rather than war fighting. Half of poll respondents said so-called "woke" practices undermine military effectiveness, while 46 percent said their lower opinion of military reflected fears that too many far right or extremist individuals are in uniform. The military's perception changes may be impacting recruitment. Only 13 percent of 18 to 29-year-olds said they were "highly willing" to enlist, with 25 percent saying "somewhat willing" to enlist.