



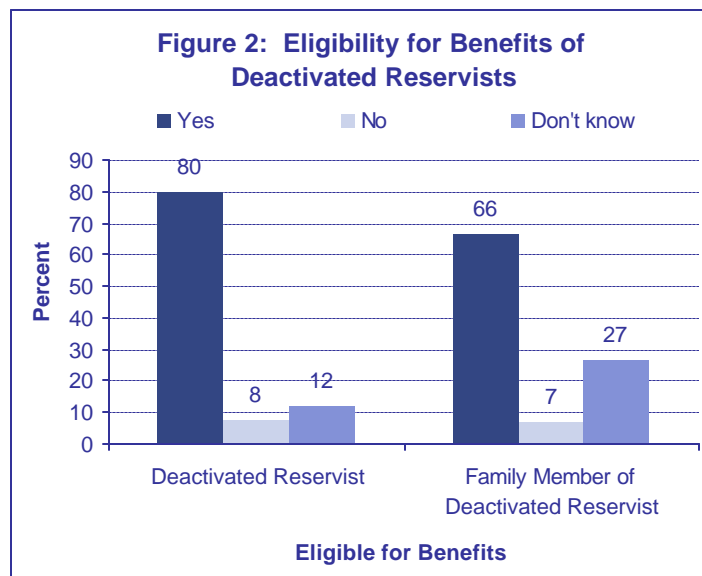
# Needs of Deactivated Reservists

## Issue Brief ♦ Health Care Survey of DoD Beneficiaries (HCSDB)

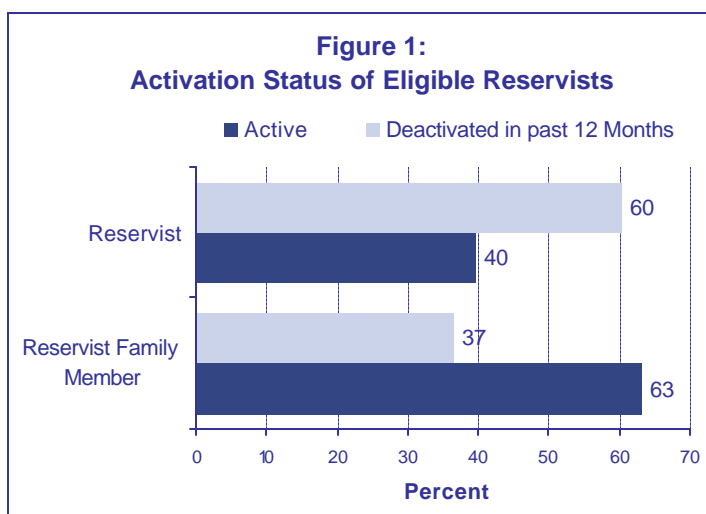
HEALTH PROGRAM ANALYSIS & EVALUATION DIRECTORATE

Because they have been activated to support contingency operations in Bosnia, Afghanistan and Iraq, many members of the National Guard and Reserves have become eligible for TRICARE health benefits in recent years. However, more recently, demands placed on the reserve component have lessened. Between January 19, 2005 and January 24, 2007, the number of active reservists has fallen from 192,507 to 91,344.<sup>1,2</sup> As the number of active reservists declines, benefits extended to the recently deactivated have taken on greater importance. When deactivated, reservists and their family members are eligible for Transitional Assistance Medical Program (TAMP) coverage, which provides transitional TRICARE coverage for 180 days. They may also enroll in TRICARE Reserve Select (TRS), which enables them to purchase continued TRICARE coverage while they remain in the reserves.

In October 2006, the TRS eligibility was expanded for qualified members of the National Guard and Reserve and their family members.<sup>3</sup> All reservists can now purchase TRICARE coverage paying a premium in one of three tiers. The lowest cost tier is for reservists who commit to serve in the Selected Reserves after deactivation, a higher tier is for reservists who have not made such a commitment but who are unable to get health insurance through work, and the highest tier is for reservists who simply



prefer to be covered by TRICARE. The expansion in TRS extends coverage to reservists and their family members who might otherwise lose their health insurance when the reservist is no longer active, but makes more complex an already complicated program. New legislation will eliminate premium tiers and enable all reservists to purchase TRS at the same price.<sup>4</sup>

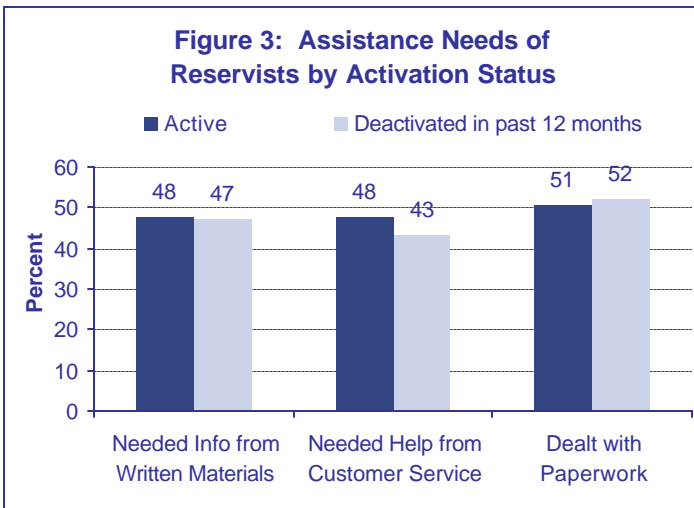


Results from the HCSDB, shown in Figure 1, indicate that deactivated reservists and their family members now make up a majority of TRICARE-eligible reservists. Sixty percent of reservists who responded to the survey report they were deactivated in the past 12 months compared to 40 percent who are currently active. Thirty-seven percent with a reservist family member report that the reservist is active compared to 63 percent who report that reservist recently deactivated.

As shown in Figure 2, 12 percent of reservists deactivated in the past 12 months and 27 percent of family members of recently deactivated reservists do not know whether they are eligible for coverage after they or the reservist in their family, is deactivated.

# Issue Brief: Needs of Deactivated Reservists

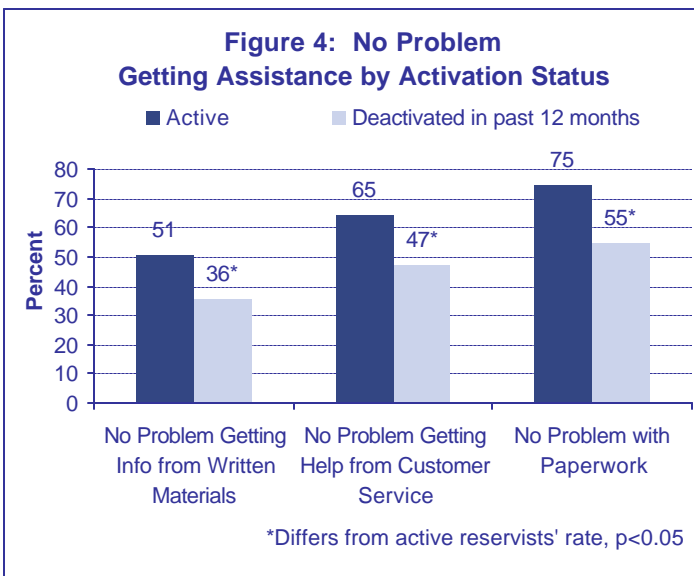
**Figure 3: Assistance Needs of Reservists by Activation Status**



Because of the complexity of their benefit offerings, newly deactivated beneficiaries are equally or more likely to have needs for customer service or to complete paperwork related to their TRICARE benefits. As shown in Figure 3, approximately half of both currently active and recently deactivated beneficiaries have searched for information about their benefits, consulted with customer service or completed paperwork related to their coverage in the past 12 months.

Though their needs are similar, deactivated reservists and their family members experience more problems getting the help and information they need and more problems completing their paperwork than do active reservists. As shown in Figure 4, little more than a third of deactivated reservists or family members of deactivated reservists report that they can find the information they need in TRICARE’s written materials or websites, compared to half of active reservists or their family members. Similarly, deactivated reservists and their families are

**Figure 4: No Problem Getting Assistance by Activation Status**



substantially less likely (47 percent) than their active counterparts (65 percent) to report getting needed help from customer service without problems, and only 55 percent of the deactivated component can complete their paperwork with no problem, compared to three-fourths of active reservists.

## Conclusion

During 2006 TRICARE eligibility was expanded for reservists and their family members after deactivation. The program is structured so that the reservist received the information during the training prior to deployment and at debriefings when they are demobilized, while family members received information from other sources such as family support programs<sup>4</sup>. These methods apparently do not successfully convey all of the needed information and some reservists and family members report they are unsure of their TRICARE eligibility status after deactivation. Similarly, findings from the HCSDB suggest that needs for information and other customer service help among recently deactivated reservists and their family members, are not met as well as the needs of active reservists. As the proportion of deactivated reservists eligible for TRICARE benefits rises, so does the importance of a strategy to provide information about transitional TRICARE benefits and coverage options under TRS.

## Sources

<sup>1</sup><http://www.defenselink.mil/Releases/Release.aspx?ReleaseID=8140>.

<sup>2</sup><http://www.defenselink.mil/Releases/Release.aspx?ReleaseID=10433>.

<sup>3</sup>Department of Defense. “Evaluation of the TRICARE Program, FY 2006 Report to Congress.” Washington, DC, March 2006.

<sup>4</sup>United States Government Accountability Office. “Military Health: Increased TRICARE Eligibility for Reservists Presents Educational Challenges.” Washington, DC, February 2007 <http://www.gao.gov/new.items/d07195.pdf>.

From the Health Care Survey of DoD Beneficiaries, fielded October, 2006, N=12,684; Reservists or family members activated in support of contingency operations =880.