

Reserve Component Medical Readiness

Fiscal Year 2021 Fact Sheet



NGAUS



The Issue

National Guard and Reserve servicemembers continue to face challenges in obtaining health care access to meet medical readiness requirements and ensuring continuity of care, especially when deploying overseas. Significant numbers of servicemembers without health care directly impacts National Guard deployability levels.

◀ Capt. Stephen Horras, 341st Medical Operations Squadron physician, discusses the benefits of using TRICARE Online with a patient.

Background

We continue to hear from servicemembers that maintaining continuous health care coverage, in many cases to meet medical deployability requirements, remains a problem. While we support the current effort to streamline military duty statuses that may provide more Reserve Component servicemembers with opportunities to maintain health care coverage through TRICARE Reserve Select (TRS), the issue will remain.

While this is not an effort that will be concluded this year or next, now is the time to discuss if the Operational Reserve is better served through guaranteed medical coverage in lieu of the current, disjointed system of third party health contractors and Periodic Health Assessments (PHAs).

By providing medical coverage at zero cost for the National Guard and Reserve, we could ensure servicemembers meet the medical standards required of a deployable force at a lower cost to them and their families. Additionally, these changes could provide the Department of Defense (DoD) with a powerful recruiting and retention tool, as well as a significant employer incentive to retain talented individuals in gainful civilian employment.

While this effort is beginning, under current law, National Guard and Reserve servicemembers who are federal employees in their civilian capacity are ineligible to enroll in TRS. Even though they actively serve in the National Guard or Reserve, current law prohibits these servicemembers from accessing TRS simply due to also working for the federal government. This creates confusion in coordinating benefits for servicemembers and their families. It also prevents servicemembers from establishing continuity of care and treatment as they deploy or transition in or out of the federal government.

While the Fiscal Year (FY) 2020 National Defense Authorization Act (NDAA) authorized access to TRS for this population beginning in 2030, we believe federal employees providing military service in the National Guard or Reserve should currently not be prohibited from making the best health care choice for themselves and their families due to an arbitrary federal law. They should have equal access to competitive health coverage premiums available to all other Guardsmen and Reservists.

Recommendation

- Consider providing health care coverage at zero-cost to all Reserve Component servicemembers, including the possibility of eliminating servicemember premiums
- Authorize TRICARE Reserve Select (TRS) eligibility for National Guard and Reserve servicemembers who are federal employees in their civilian capacity

Learn more at www.ngaus.org

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