



# Still Serving in Korea



Newsletter 03-1

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

Jan-Mar 2003

## Medical Care Matters

### Court Decides Tinnitus Compensation Eligibility

The United States Court of Appeals for Veterans Claims has announced a decision in the case of Wanner v. Principi.

At issue was whether service connection or compensation for tinnitus should be allowed only for "head injury, concussion or acoustic trauma."

The Court held that persistent tinnitus, no matter how it was acquired during service, entitles a veteran to compensation under the rating schedule. Accordingly, in claims for service connection for tinnitus filed before June 10, 1999, including those now on appeal, claimants will now be entitled to service connection without regard to how the tinnitus was acquired.

The court did not decide whether veterans are entitled to separate ratings for service-connected bilateral tinnitus (tinnitus in each ear).

*News of the Force, Feb 28*

### Hearing Aids Not Covered Under TRICARE

TRICARE does not cover hearing aids for retirees or their family members under any of the TRICARE programs, according to TRICARE officials responding to an increasing number of questions by retirees.

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*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

### Concurrent Receipt Back on the Table

Sen. Harry Reid, D-Nev., has introduced a bill to provide full concurrent receipt of military retired pay and disability compensation from the Department of Veterans Affairs. His bill, S-392, has 38 cosponsors. The House counterpart, HR-303, sponsored by Rep. Michael Bilirakis, R-Fla., has 120 cosponsors. Similar bills died in the last Congress in the face of threats of a presidential veto, although a bill for concurrent receipt for the most severely disabled retirees was passed. The preponderance of retirees (who did not benefit by last year's bill) forfeit one dollar of retired pay for every dollar of disability compensation they draw. Military retirees are the only class of retirees who must forfeit their retired pay to accept disability compensation from the VA.

*Armed Forces News, Feb 28*

### Former Academy Life Insurance Company Seeking Policyholders

The Academy Life Insurance Co. seeks immediate contact with an estimated 110,000 current and former service members who may be eligible to receive payments from a fund established as part of a settlement it reached with the Justice Department Dec. 19, 2002.

Col. Steve Strong, director of legal policy in the Office of the Undersecretary of Defense for Personnel and Readiness, said the insurance company will mail notices and payment applications to the last address it has for thousands of former policyholders it believes are eligible. Notices will be mailed by Feb. 24, he added.

Eligible persons have until June 24 to file, he said. After that deadline, applications won't be considered, Strong emphasized.

The payments of up to \$200 per policy are part of a \$160 million settlement reached after the Justice Department filed a civil complaint against Academy Life for defrauding service members from 1991 to 1998. The complaint alleged the insurers sold more than 92,000 policies of a particular life insurance plan to service members and their families between 1993 and 1998 and reaped more than \$200 million in premiums. Academy Life has not admitted to any improper act.

As part of the settlement the company will pay more than

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Officials point out, however, if the beneficiary who needs the hearing aid is a retired military member (and therefore a veteran) he or she can check with the Veterans Administration (VA) to see if the VA can help.

Additionally, some military facilities support a Retiree At-Cost Hearing Aid Purchase Program (RACHAPP). Check with your nearest military treatment facility (MTF) to see if it supports this program. The MTF may be able to purchase the hearing aid, and you reimburse the MTF its costs, probably less than if you purchased it on the open market.

*Air Force Retiree News, Jan 24*

### VA Nursing Home Eligibility

The Veterans Health Administration (VHA) of the Department of Veterans Affairs (VA) has reissued the eligibility requirements for nursing home care, and clarified Nursing Home Care eligibility and the definition of 70 percent service-connected (SC) disability rating.

The VHA implemented the provisions of Public Law 106-117 as set out below:

(1) VHA will provide nursing home care either directly or through contracts when clinically indicated to:

- veterans who needs nursing home care for a Service Connected (SC) disability
- veterans who have a combined SC disability rating of 70 percent or more, is rated 60 percent SC and unemployable, or is rated 60 percent SC and Permanent and Total Disabled (P&T).

(2) VHA may provide nursing home care based on available resources, either direct or through contracts, when clinically indicated to all other eligible veterans who need nursing home care.

(3) Patients will be placed in Home and Community-Based Care (HCBC) when clinically appropriate and patients receiving VA Nursing Home or Community Nursing Home (CNH) care will be transferred to appropriate assisted living or home and community-based care settings when nursing home care, at any level, is no longer clinically indicated.

(4) VA facilities will determine the need for nursing home care based on a comprehensive interdisciplinary clinical assessment.

(5) After admission to a VA Nursing Home Care Unit (VA NHCUs), veterans described in paragraph (1) may not be transferred or discharged from a VA Nursing Home unless:

- the patient no longer needs any nursing home care;

or

- the patient, or the patient's designee, has given informed consent to the discharge or transfer.

(6) VA NHCUs will admit, as a matter of firm priority, patients who meet the following clinical and/or programmatic criteria:

- post-acute patients
- patients who cannot be adequately cared for in CNH or HCBC, and
- those patients who can be cared for more efficiently in VA NHCUs.

(7) All VA facilities will maintain an active CNH Program.

NOTE: Nothing in this VHA Directive may be construed as authorizing or requiring that a veteran who was receiving nursing home care in a VA Nursing Home on November 30, 1999, be displaced, transferred, or discharged from the VA Nursing Home Care Unit. [Source: MOAA's Benefits Information Update for January 2003]

*RAO Baguio Bulletin Update, Jan 19*

### TRICARE in Korea and Your Money

After living in Korea as a retiree for 18 years, I was finally confronted with TRICARE for retirees in Korea. My wife was hospitalized in early January at Ajou University Hospital in Suwon and remained there for almost eight weeks. Because we don't have Korean health insurance, she was classified as a "cash" patient, which means that any money owed must be regularly paid, either when her category changed or on a weekly basis, whichever was sooner. She was referred from the Osan TRICARE Office and was admitted to the Ajou Emergency Room upon arrival.

Because she had a head injury, the first procedure ordered was an MRI, which cost a million won. The doctors determined that the wound was external to the skull with no internal damage. However, infection had caused the skin on her scalp to die, and full treatment required clearing the infection and cutting out the dead flesh. She would then have a skin graft to cover the wound.

Each week, I had to go to the billing office where I presented my MasterCard to pay for the week's expenses. The first expense, which covered the MRI and Emergency Room and charges for her inpatient room and care, came to over \$3,000. Expenses each week thereafter ranged between \$1,500 and \$2,000. I had to be careful to ensure that I was able to periodically make a payment on the credit card bill to keep from going over the credit limit. When she was discharged, I submitted an English

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\$2.7 million to persons who purchased their policies from 1991 to 1998.

Academy Life also agreed in the settlement to never again sell another insurance policy in the United States or ask DoD for permission to conduct business on U.S. military installations. The Defense Department in 1998 barred the company from doing business on military installations for three years.

Strong said former policyholders must meet **ALL** the following conditions to be eligible for payment from the settlement fund:

- The person was the last owner of a Genesis Series policy issued from Jan. 1, 1991, through Dec. 31, 1998.
- The policy terminated prior to Sept. 30, 2002.
- No death benefit was paid under the policy.
- The person was living on Sept. 30, 2002.
- The person accurately completes an application for payment and mails it to Academy Life by June 24.
- Academy Life verifies eligibility.

For more information on eligibility requirements or a notice and application, Strong said call Academy Life at toll free (800) 523-5625.

*NAUS Legislative Update, Feb 28*

### Savings Bond Holding Period Increases

Department of Treasury officials have announced that the minimum holding period for Series EE and I bonds increases from six to 12 months beginning Feb. 1 [2003].

This means people who purchase EE or I bonds on or after Feb. 1 must wait one year before they may redeem those bonds.

People who purchase bonds will receive a notification of this new policy with their bonds until the current preprinted bond stock reflects the change.

*Air Force Retiree News, Jan 19*

### Do I Need a (TRICARE) Supplement?

The National Defense Authorization Act of 2001 reduced the Fiscal Year Catastrophic Cap for retirees and their families from \$7,500 to \$3,000. The cap for active duty sponsors and their families remains at \$1,000. What this means is that once the accumulated deductibles and cost shares reach the catastrophic cap in a fiscal year, TRICARE will pay the full-allowed amount for covered services through the end of that fiscal year. The only thing the family will pay through the rest of the fiscal year will be the 15% surcharge associated with services by a non-participating provider and expenses associated with use of the Point of Service option by Prime enrollees. This

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change has caused many retirees to reconsider the need for a TRICARE supplement.

If a retiree and spouse purchase a supplement with a premium of \$25 per person per month and a \$300 deductible, each beneficiary must pay at least \$450 before the supplement will start to pay. This does not include the annual \$300 premium.

|                       |              |
|-----------------------|--------------|
| TRICARE Deductible    | \$150        |
| Supplement Deductible | \$300        |
| Sub-total             | \$450        |
| Plus:                 |              |
| Premium (\$25 x 12)   | \$300        |
| <b>Total:</b>         | <b>\$750</b> |

If a reasonably healthy TRICARE Standard retiree and spouse each visits a participating physician four times a year at \$100 per visit, and each visit is associated with \$150 in lab fees and two brand name prescriptions from a network pharmacy, here is the cost per year.

Office Visits (4 x \$100) \$400  
(\$100 deductible, \$225 TRICARE cost share, and \$75 patient cost share)

Lab Work (4 x \$150) \$600  
(\$50 deductible, \$412.50 TRICARE cost share, and \$137.50 patient cost share)

Prescriptions (8 x \$9) \$ 72  
(co-pay paid by patient)

**Total Patient Payments \$434.50**  
(\$100 + \$75 + \$50 + \$137.50 + \$72)

Using the above example of four visits per patient, a reasonably healthy couple with a supplement would pay \$1,500 (\$750 X 2) each year. The same couple using TRICARE Standard with no supplement would pay \$869 (\$434.50 X 2) each year.

Even if the sponsor or spouse has major surgery due to accident or illness, the Catastrophic Cap will limit liability in any fiscal year to \$3,000. Remember: to enjoy the full protection afforded by the cap, the patient should use providers who accept TRICARE.

TRICARE Supplemental Insurance policies are underwritten and administered by private companies. The comments above are just an example of some of the issues to consider. Anyone considering the purchase of a supplement should evaluate the details of the particular product against any personal preferences or unique circumstances. If you wish to discuss specific aspects of your needs for health care coverage, you should contact the TRICARE office at the nearest military hospital. ■

*TRICARE Newsletter, Jan 20*

translation of the bill provided by the hospital for the entire period for reimbursement by TRICARE. We will receive back 75% of what we paid, minus the \$150 deductible. No matter how much the final bill is, our out-of-pocket expenses will total no more than \$3,000 of TRICARE allowable expenses. This is the maximum annual cap for patient co-pay.

There were some lessons I learned from this experience that made me smarter and I wanted to pass along the lessons to others. Some of these apply only to Ajou, but there are some general lessons that apply to all Korean hospitals. I also include examples, both positive and negative, of the experiences others have passed along to me.

*Lesson 1:* If you only have TRICARE (whether TRICARE Standard for retirees under 65 or TRICARE for Life for retirees 65 and over), you are considered a cash patient and must pay as you go. If you are unable to pay for the initial course of treatment, you may not receive follow-on care. And you will not be discharged until the hospital is paid in full. If you die, your body will not be released until your survivors pay. One new widow had to pay nearly \$60,000 to get her husband's body released for burial. Would your survivors be able to handle an expense like that?

*Lesson 2:* If you have only TRICARE, you need to have a significant cash reserve available to cover the costs of unexpected health care if you are placed in a Korean hospital. Even if you are subsequently air evacuated to a military facility outside Korea, you could incur significant costs for the initial care at a Korean hospital. I had a visit from the wife of a retiree who incurred a \$7,000 bill for several days of treatment in a Korean hospital prior to air evacuation. Since he was over 65, I checked with Social Security to determine if he had signed up for Medicare Part B. He had not, so he did not have TRICARE for Life coverage and the \$7,000 bill will be totally out of his pocket with no reimbursement.

*Lesson 3:* Having Korean medical insurance changes your status from cash patient to insured patient, and you will not be dunned to keep up with the medical care costs. One of the first things my wife did shortly after discharge was to find out how to get us enrolled in the Korean health insurance. This insurance was first offered to foreigners in 1999. It is available to those who have resident status, and you become eligible for coverage when you have established resident status (not SOFA and not Tourist). We signed up for coverage immediately. See the Director's Corner for details. The cost in 2003 for both of us is 40,840 won per month. One widow, whose husband was hospitalized for over a year before he died, had expenses of over \$100,000. Between the Korean health insurance and TRICARE Standard, nearly all her expenses were reimbursed.

*Lesson 4:* Patient care in a Korean hospital is not the same as that provided in an American hospital. Family members are expected to provide considerable attendance to the patient's needs and each hospital bed had a rollout bed under it to allow a family member to sleep in the room with the patient. Although the hospital provides food, the patient or patient's family must provide eating utensils. After eating, the patient or family member must return the food tray to a central collection point. Items such as tissue are not provided by the hospital. I saw a number of family members buying items such as tissue and adult diapers, which appeared to be a big seller, in the stores at the Ajou Hospital underground shopping area. In all the rooms but the single, televisions are equipped with a coin slot and it cost 100 won for 30 minutes. I was a regular visitor to the bank in the Ajou Hospital underground shopping area to buy 5,000 won rolls of 100 won coins.

*Lesson 5:* Korean health insurance only covers the full cost of a six-person room. If you stay in a one-, two-, three-, or four-person room, you must pay the additional room cost over that allowed for the six-person room. However, TRICARE would cover this expense.

*Lesson 6:* If you are driving to the hospital to visit a family member, find out how to get free parking. I paid nearly 20,000 won in parking fees before discovering what I needed to do so I could park free.

Now I know that there are probably a number of retirees who have had experience with Korean medical care, and they have a lot of knowledge to contribute to the Korea retiree community in this regard. If you have experience with Korean medical care that adds to or contradicts what I've said here, I would certainly including them in future articles so that we all learn together. I would also like information from anyone with experience using TRICARE supplemental insurance, Federal Employees Health Benefits Program (FEHBP) insurance, or any other types of government or private health insurance from U.S. or international providers. I would also like information from anyone who has had experience using the Korean health insurance.

You can provide this information to me via e-mail at **retact@osan.af.mil**, **Jack.Terwiel@osan.af.mil**, or **Jack@rao-osan.com**. Or you can send the information via regular mail to:

Retiree Activities Office  
51 MSS/CVR  
Unit 2097  
APO AP 96278-2097

As for my wife, she's doing very well. But she's not as thrilled as I am now that we have matching bald spots. ■

Jack Terwiel

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# Legislation Matters

*(The following article contains legislation of interest to military personnel, active and retired. The Retiree Activities Office has included additional information following each bill, to explain the contents and current status of the legislation.)*

## Legislation to Watch

The 108th Congress has started a flood of new bills affecting *Armed Forces News* readers. Many are new versions of bills that died when the 107th Congress failed to act on them. For example the new S-19 would authorize full concurrent receipt of military retired pay and disability payments awarded by the Department of Veterans Affairs; increase funding for veterans' health care programs; eliminate the requirement that patients see a VA doctor before obtaining a prescription; restore income tax deductions for National Guard and Reserve members for military-related travel expenses that are not reimbursed by the government; relax rules for members to qualify for capital-gains tax exclusions when they sell a home; and lengthen filing deadlines for members deployed on peacekeeping operations. Other examples:

HR-303 would authorize full concurrent receipt of military retired pay and VA compensation.

*(More information is contained on page 1 of this newsletter under the title, "Concurrent Receipt Back on the Table.")*

HR-65 would authorize credits for premiums paid by military retirees for Medicare Part B.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/7/2003--Introduced. Military Retiree Health Care Relief Act - Amends: (1) the Internal Revenue Code to allow a refundable credit for premiums paid by military retirees for Medicare (title XVIII of the Social Security Act) part B (Supplementary Medical Insurance) coverage; and (2) part B of title XVIII of the Social Security Act to eliminate, as specified, the ten percent part B premium penalty.*

HR-58 and companion bill S-56 would restore health care coverage to retired members.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/7/2003--Introduced. Keep Our Promise to America's Military Retirees Act - Includes as an employee, for purposes of Federal provisions authorizing enrollment under the Federal Employees Health Benefits (FEHB) Program: (1) a member of the armed forces who began service before June 7, 1956, and retired after a minimum of 20 years of such service or by reason of a service-connected disability; and (2) the surviving widow or widower of such member.*

*Directs the Secretary of Defense to enter into an agreement with the Office of Personnel Management to*

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*provide FEHB coverage to the following eligible beneficiaries: (1) a member or former member entitled to military retired or retainer pay; (2) an unremarried former spouse who was married to a member for at least 20 years, during which such member performed at least 20 years of retirement-creditable military service; (3) a dependent of a deceased qualifying member or former member; (4) a dependent of a living member or former member; and (5) a family member.*

HR-331 would authorize retired pay for Reserve component retirees regardless of age.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/8/2003--Introduced. Armed Forces Retirement Equity Act - Removes the requirement that a person attain 60 years of age before being entitled to military retired pay for nonregular (reserve) service.*

HR-36 would prevent termination of DIC payments to a surviving spouse who remarries after age 55.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/7/2003--Introduced. Provides that the remarriage of the surviving spouse of a veteran after age 55 shall not bar the payment of veterans' dependency and indemnity compensation to which such spouse was previously entitled.*

H.J.Res. 4 would propose a constitutional amendment authorizing Congress to prohibit the physical desecration of the U.S. flag.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/7/2003--Introduced. Constitutional Amendment - Grants Congress power to prohibit the physical desecration of the U.S. flag.*

HR-163 and companion bill, S-89, would launch a draft of men and women for military or civilian service.

*(from [www.capwiz.com](http://www.capwiz.com)) 1/7/2003--Introduced. Universal National Service Act of 2003 - Declares that it is the obligation of every U.S. citizen, and every other person residing in the United States, between the ages of 18 and 26 to perform a two-year period of national service, unless exempted, either as a member of an active or reserve component of the armed forces or in a civilian capacity that promotes national defense. Requires induction into national service by the President. Sets forth provisions governing: (1) induction deferments, postponements, and exemptions, including exemption of a conscientious objector from military service that includes combatant training; and (2) discharge following national service. Amends the Military Selective Service Act to authorize the military registration of females. ■*

*Armed Forces News, Jan 17*

## Survivor Issues

Military organizations are pushing for legislation to assist survivors, such as: Eliminate age-62 Social Security offset of Survivor Benefit Plan (SBP) annuity; eliminate Dependency and Indemnity Compensation (DIC) offset of SBP; allow widows who remarry after age 55 to retain DIC and/or SBP annuities.

# Community Matters

## Retiree Activities Office Web Sites

In early January, there were some major changes posted to the commercial web site maintained by the Retiree Activities Office (RAO) at <http://www.rao-osan.com>. A new area called **Money Matters** was created as a result of experience with the types of information requests the RAO typically receives. Of special interest to retirees should be the DFAS information, and particularly the link to **myPay**, the replacement to the Employee/Member Self-Service (EMSS). Many of the actions requested of the RAO can be done quickly by the retiree using the secure connection to **myPay**.

The area formerly called **Survivor Assist** was renamed **Korea Casualty** and focuses on the retiree responsibilities in providing for survivors. It is addressed to the retiree, since he/she is the one primarily responsible for ensuring his/her survivors are provided for. Also added as part of this section was a casualty assistance checklist focused on assistance provided in retiree deaths. Retirees should review this entire area and verify that the necessary forms and supporting documents are available in a secure place so they're readily accessible when needed.

Two areas called **Med Evacuation** and **Your Health** have been consolidated into a single area called **Health Matters**. The new area also includes more information on health care in Korea.

**Hot Issues** information has been considerably reduced with the addition of the new areas described above. In some cases, information on pay and health were included in **Hot Issues** even though the information was not really hot. Now, non-hot news and old news that's no longer hot is placed into the appropriate area for either money or health news, or under new areas added to the U.S. Military Retirees Association Korea sub-page (see below).

Another new area is **Korea Links**, which includes different categories of links to sites in or about Korea. For example, the previous link on the home to the Songtan VFW Post 10216 is now on the **Korea Links** page. You can also link to information on Korea Commissaries, and to AFN schedule information.

The final addition to the navigation buttons on the home page is called **Applying for ...** and contains information on how to apply for different benefits. It also includes the forms needed to apply along with the supporting documentation requirements. In the case of Social Security benefits, the forms provided are samples only. They should be used to gather the necessary information and then brought to the RAO for completion of official forms. This will ensure that your application is properly

completed and can be processed without delay.

Another major change to the home page of the RAO commercial web site was to greatly expand the information under the U.S. Military Retirees Association Korea. This area now contains information on the association's purpose and membership, the officers of the association, photos of the December meeting, briefings of interest to retirees, and general news of interest to Korea retirees.

Additions on the Osan Info page include a **Guestbook**, where you're invited to add comments; a hit counter; and digital clocks showing the current time where the viewer is located and the current time at Osan (i.e., Korea time). The clocks operate based on the user's computer time setting, so they are only as accurate as the time and time zone setting on the user's computer.

**Addendum:** Just to show how easy updates are, in early March the **Photo Tours of Osan** under Osan Air Base were modified to add a slide show capability so you can just sit back, relax, and watch the scenery go by. Similar slides shows may be added to Osan AB and under the Songtan City area at a later date. And not long after you read this, I should have also added a new feature, **Then and Now**, to show the changes that have taken place at Osan, Songtan, and in other areas of Korea.

The military web site of the RAO at <http://www.osan.af.mil/Public/RetireeActivities/index.html> has not been updated to the degree of the commercial web site. There are several reasons for this. One is that the Osan public server has undergone and is still undergoing significant changes. Webmasters for the different pages had to make some cosmetic changes to adopt a standard appearance. Upon direction from higher headquarters, we were temporarily prohibited from posted changes from our office computers, though that was eventually changed back to the old way. Also, any major changes to the military web site, such as was done at the commercial RAO web site, must go through an extensive review process including legal and public affairs before the changes can be posted to the military web server. So you will see at least some of the changes eventually migrate to the military server, but it will take some time. Because I "own" the commercial web site, updates and changes will always appear there first. ■

*Osan AB Retiree Activities Office*

## Stateside Space-A Travel for Family Members

Defense transportation officials recently announced a one-year test to expand space-available travel privileges to family members of active duty and retired military people.

The test will begin April 1, 2003 and continue through March 31, 2004. Family members must be accompanied by their sponsors and travel in the same category.

*Air Force Retiree News, Feb 5*

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## Retirement Matters

### AFRH Residency Requirements

There are vacancies at both Armed Forces Retirement Homes (AFRH), in Washington, DC, and Gulfport, MS. Residency is open to those veterans from the armed forces whose active-duty service was at least 50 percent enlisted, warrant officer or limited-duty officer who fit at least one of the following categories:

- Retirees with 20 or more years of active-duty service who are at least 60 years old;
- Veterans who are unable to earn a livelihood due to a service-connected disability;
- Veterans who are unable to earn a livelihood due to a non-service connected disability and who served in a war theater or received hostile Fire pay;
- Female veterans who served prior to 1948.

More information is available on the web at [www.afrh.com](http://www.afrh.com). For the Washington location, call (800) 422-9988, or write: 3700 N. Capitol St NW, Washington DC 20317, or via email: [publicaffairs@dc.afrh.gov](mailto:publicaffairs@dc.afrh.gov). The Gulfport location can be reached at (800) 332-3527, or write: 1800 Beach Dr, Gulfport, MS 39507, or via email at [publicaffairs@gulfport.afrh.gov](mailto:publicaffairs@gulfport.afrh.gov). ■

*Air Force Retiree News, Feb 19*

## Laughing Matters

### Real-World Management, Dilbert Style

"What I need is a list of specific unknown problems we will encounter."

"E-mail is not to be used to pass on information or data. It should be used only for company business."

"This project is so important, we can't let things that are more important interfere with it."

"Doing it right is no excuse for not meeting the schedule."

Quote from the Boss: "Teamwork is a lot of people doing what I say."

"We know that communication is a problem, but the company is not going to discuss it with the employees."

We recently received a memo from senior management saying: "This is to inform you that a memo will be issued today regarding the memo mentioned above."

"As of tomorrow, employees will only be able to access the building using individual security cards. Pictures will be taken next Wednesday and employees will receive their cards in two weeks."

*From the Internet*

*Thanks to Gene Z ☺*

## The Director's Corner

### "In the Next Issue"

On page 8 of each issue of *Still Serving in Korea* is a box at the lower right corner titled "In the Next Issue." In the previous newsletter, two subjects were featured: "Helping Your Survivors" and "On-Line Assistance." Little did I realize when forecasting those stories that the answers to both would be provided at a single location, our own retiree web site at <http://www.rao-osan.com>. See the story on page 6 about the changes made to the site to provide retirees with detailed instructions and forms to help prepare for The Inevitable, under the web site button labeled **Korea Casualty**. Then find all the information you need on retired pay under **Money Matters**, medical under **Health Matters**, and forms needed to apply for benefits, etc., under **Applying for ...**

### Korean Health Insurance

As I noted in the story "TRICARE and Your Money," starting on page 3, we looked into the Korean health insurance and found it to be cheaper than expected. (For

comparison with your situation, I have had a non-working resident visa since Jul 2000 and my wife is a U.S. citizen.)

As soon as she was well enough, she contacted the local office that handles the health insurance. I mentioned in other stories on this insurance that they opened it up to foreigners in 1999. However, you must be a resident for a year before you're eligible. So we ended up being billed as follows: (all figures shown in Korean Won)

|              |                                |
|--------------|--------------------------------|
| 2000         | 183,360 (30,560/mo) for 6 mos  |
| 2001         | 419,640 (34,970/mo) for 12 mos |
| 2002         | 450,840 (37,570/mo) for 12 mos |
| 2003         | 204,200 (40,840/mo) for 5 mos  |
| <b>Total</b> | <b>1,258,040</b>               |

That's better than the 50,000/mo I expected and so we signed up. There are a number of retirees in Korea who, if they are planning to stay here, should seriously consider signing up for that insurance. No matter what the initial enrollment cost may be for you, it will likely be less than what you'd have to pay out of pocket if you are admitted to a Korean hospital and have only TRICARE. ■

*Jack Terwiel*

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

ADDRESS CORRECTION REQUESTED

**United States Military Retirees Association Korea**

The USMRAK held its annual membership meeting and election of officers on Dec 7, 2003 in the Community Room of the Army Community Services building, Yongsan Army Garrison, South Post.

A large number of retirees attended, including both old and new faces. Association President Al Chellis presented a briefing on the purpose of the association, the meeting agenda, and the relationship of the association with the USFK Retiree Council. Jack Terwiel presented a briefing on Social Security, discussing when to start benefits and the effect of taking early benefits on dependent and survivor benefits. Jack also presented a briefing to clarify some rumors on the "retiree street" in Korea. All three of these briefings are available in the USMRAK Section of the Korea retiree web site at <http://www.rao-osan.com>.

USMRAK Certificates of Appreciation were presented to Mr. Albert McFarland, Mortuary Officer for the U.S. Army Mortuary at Yongsan; and to Jack Terwiel for volunteer service as Director, Retiree Activities Office at Osan AB. Certificates were also mailed to two employees of the Defense Finance and Accounting Service, one at Cleveland Center for support in the retired military pay

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area for military retirees, and the other in Denver Center in the annuitant pay area for widows.

Election of officers was held. LTC Al Chellis, USA Retired, was re-elected President. SFC Richard Boyce, USA Retired, was elected Vice-President replacing 1SG Owen (Robbie) Robinson, USA Retired. SFC Wnd (Wanda) Thomas, USA Retired, was elected Secretary, replacing MAJ Bill Horvath, USA Retired. Photos of the association officers are on the web site, and we're hoping to persuade them to provide a bit of biographical information to go into the blank space reserved for that purpose next to each of the photos.

Also on the web site, you can see meeting photos taken by John Nowell of the Yongsan Public Affairs Office. ◼  
*Osan AB Retiree Activities Office*

**In the Next Issue**  
**Applying for Social Security –**  
When, why, supporting documents  
**Korea Retiree Network – Helping**  
each other at the local level