



August Recess Visits – Elevator Speech

ISSUE #1: Troops Deserve Full Pay Raise and Force Increases

- Senate defense bill cuts all service forces and caps 2017 raise at 1.6 percent
- House bill adds needed forces and provides 2.1 percent pay raise
 - 2.1 percent raise matches average American's
 - +20K for Army; +25K Army Guard/Reserve; +1.8K – 3K other Services
- Sen. McCain now supports House raise and force increases
- Please keep House provisions in final FY17 Defense Authorization Bill

ISSUE #2: Reject Military Housing Allowance Cuts

- Senate defense bill would cut housing allowances up to \$30,000 a year or more for thousands
 - 50% reduction for dual-military couples and even more for multiple military roommates
- House keeps current allowances; Pentagon strongly opposes Senate plan
- Please reject Senate housing allowance reform plan in final FY17 Defense Authorization Bill

ISSUE #3: Oppose Disproportional TRICARE Fee Hikes

- The Senate defense bill nearly doubles out-of-pocket TRICARE costs within a few years
- House grandfathers currently serving, but imposes steep fee increases on future entrants
- Proposed fees in both the Senate plan and the House plan for post-2018 entrants are too high
- Please reject any fee increases in the final FY17 Defense Authorization Bill until after well-document problems with access, quality, and continuity of care have been fixed

ISSUE #4: Reduce Military “Widows Tax,” Don’t Just Maintain It

- The Special Survivor Indemnity Allowance (SSIA) of \$310/month (expiring Oct 2017) was enacted as partial rebate to survivors suffering the military “widows tax” (SBP-DIC offset)
- The House defense bill extends SSIA at \$310/month for one additional year
- The Senate bill extends the \$310 SSIA indefinitely, and funds it via beneficiary drug copay hikes
- Neither reduces the widows tax; they only extend the \$310 rebate for different periods



- Please help identify additional mandatory funding for the final FY17 Defense Authorization Bill to make at least modest increases in the SSIA without making beneficiaries pay higher drug copays