

Getting the Most Out of Medicare:

Answers to MOAA Member Questions



Veterans Healthcare is a MOAA affinity partner. MOAA Members can call Veterans Healthcare directly at 385-558-4129 (TTY: 711) to speak with a licensed insurance agent. Hours are Mon-Sat, 0800-2000 MST.

How is my Medicare Part B premium determined? Is it based on my income? What is IRMAA?

Most people pay the standard Medicare Part B premium, which is \$202.90 per month in 2026. However, your income can cause you to pay more. Medicare generally looks at your Modified Adjusted Gross Income (MAGI) from your tax return from two years prior. For example, your 2026 premium is based on your 2024 income.

If your income is above certain limits, you may pay an additional amount called the Income-Related Monthly Adjustment Amount (IRMAA). IRMAA guidelines can change annually and are different depending on whether you file individually or jointly as a married couple. You can [view IRMAA's 2026 income thresholds and costs here](#). The higher your income, the higher your Part B premium may be.

If your income has significantly decreased since the tax year Medicare is using, especially because of certain life-changing events such as retirement, you have the right to request [Social Security to reconsider your IRMAA amount](#).

No matter how much you pay for Medicare Part B, a Medicare Advantage plan that includes a Part B premium reduction benefit will reduce the amount you pay toward your Part B premium. You can [contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn more about the plan options and benefits available to you.

What is a Medicare Part C: Medicare Advantage Plan (MAP)?

Medicare Part C, also known as Medicare Advantage, is an official part of Medicare created by federal law in 1997. That's why it's also identified by a letter, just like Medicare Parts A, B, and D. This is how the [U.S. Department of Health and Human Services \(HHS\) defines](#) a Medicare Advantage plan:

"A Medicare Advantage Plan (like an HMO or PPO) is another Medicare health plan choice you may have as part of Medicare. Medicare Advantage Plans, sometimes called 'Part C' or 'MA Plans,' are offered by private companies approved by Medicare. If you join a Medicare Advantage Plan, the plan will provide all of your Part A (Hospital Insurance) and Part B (Medical Insurance) coverage. Medicare Advantage Plans may offer extra coverage, such as vision, hearing, dental, and/or health and wellness programs. ... Medicare pays a fixed amount for your care every month to the companies offering Medicare Advantage Plans. These companies must follow rules set by Medicare."

Medicare Advantage plan options differ depending on location. MOAA members can [contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn more about the options available to you.

Do Medicare or TRICARE for Life cover dental and/or vision? Will a Medicare Advantage Plan (MAP) cover dental and vision?

Original Medicare and TRICARE For Life generally do not provide any routine dental or vision benefits. Neither covers most routine dental care, eye exams, eyeglasses, or contacts, although certain services may be covered when medically necessary in very limited circumstances.

This is an area where a Medicare Advantage plan can add significant value. According to a [2025 VA-funded research](#), Veteran-focused Medicare Advantage plans include additional benefits that Original Medicare and TRICARE For Life do not provide.

These additional benefits can include dental, vision, hearing, and Part B premium reduction benefits, which reduce what you pay for Medicare Part B. Included benefits vary by plan and location, so [contacting MOAA's Medicare Advantage partner, Veterans Healthcare](#), can be helpful to explore the options available to you. Your licensed Veterans Healthcare agent will help review options based on your specific situation.



Do I still have to pay the Part B premium if I sign up for a Medicare Advantage Plan (MAP)?

Medicare Advantage plans do not change or remove the Medicare Part A and B coverage to which you're entitled as a Federal benefit. Therefore, you must continue paying your Medicare Part B premium to the Federal government when enrolled in a Medicare Advantage plan.

However, the majority of Veteran-focused Medicare Advantage plans — 75% of them, according to [recent research](#) — include a Part B premium reduction benefit that pays a portion of your Part B premium, reducing what you have to pay. You'll see this reduction as a credit to your social security or other payment method used for your Part B premiums.

MOAA members can [contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn about the options available to you.

Does enrolling in a Medicare Advantage Plan (MAP) Plan change my Medicare and TFL benefits?

No. Enrolling in a Medicare Advantage plan does not remove your Medicare or TRICARE For Life benefits. You retain Medicare Parts A and B and your TRICARE For Life coverage.

The difference is that your Medicare Advantage plan administers your Medicare-covered services instead of Original Medicare, while TRICARE For Life remains in place as secondary, wraparound coverage for all TRICARE-covered services.

It's important to choose a Medicare Advantage plan that works alongside TRICARE For Life. [Contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn more about these specific plans.

Is a Medicare Advantage Plan (MAP) a supplement to Medicare Parts A and B and TFL? Do I need Medicare Part A and B and a MAP Plan?

A Medicare Advantage plan is not a Medicare Supplement. For military retirees with TRICARE For Life, there is generally no reason to enroll in a Medicare Supplement plan, as it would be duplicative coverage that only adds an additional premium.

Medicare Advantage, on the other hand, is another approved way to receive your Medicare Part A and Part B benefits through a private insurance company offering a plan authorized by the Federal government.

Because these plans administer your federal Medicare benefits, you must remain enrolled in both Medicare Parts A and B to enroll in and remain eligible for a Medicare Advantage plan.

MOAA members can learn about the Medicare Advantage plan options available to them by connecting with [MOAA's Medicare Advantage partner, Veterans Healthcare](#).

Can you still use an MTF with a Medicare Advantage Plan (MAP)?

TRICARE has specific guidelines regarding use of MTFs with a MAP, which are important to be aware of. TRICARE has information available at these locations: [Understanding Medicare Part D and TRICARE Pharmacy Coverage](#) and [Q&A: How Does TRICARE For Life Work With Medicare?](#)

How does a Medicare Advantage Plan (MAP) work for provider networks (HMO vs. PPO)? Do I get to choose my doctors with a MAP?

Medicare Advantage plans can limit medical provider access, but they certainly don't have to.

A [Health Maintenance Organization \(HMO\) plan structure can limit you to a network](#) of providers. If that doesn't sound like the right fit for you, feel free to skip to the next paragraph for another beneficial option. But it's important to know that today's Medicare HMOs are vastly different from those of the 1970s and 1980s, which had limited doctor networks and restricted access to specialty care. The modern Medicare HMOs offered by the major carriers Veterans Healthcare works with include tens of thousands, hundreds of thousands, and ([in some cases](#)) nearly one million participating providers, all while offering unlimited nationwide access to emergency care.

A [Preferred Provider Organization \(PPO\) plan structure allows you](#) to "use any doctor or hospital that accepts Medicare for covered services", according to Medicare. Many retirees who aren't comfortable with HMOs prefer this option. According to [recent VA-funded research](#), Medicare Advantage plans designed with Veterans in mind are much more likely to be PPOs, which offer greater freedom and choice (for comparison, civilian-focused plans are more likely to be HMOs).

If keeping your current providers is your priority (as it is for most MOAA members), Veterans Healthcare will verify that each of your providers accepts any plan you're considering before guiding you through the application process. Veterans Healthcare only helps retirees with Medicare Advantage plans that offer expansive nationwide access to doctors and hospitals, choosing to work exclusively with the three largest Medicare carriers in the U.S. — UnitedHealthcare, Humana, and Aetna — rather than smaller, regional providers.

How does a Medicare Advantage Plan (MAP) work for pre-approvals and prior authorization?

A Medicare prior authorization or pre-approval means a healthcare provider gets approval from Medicare or an approved insurance carrier using Federal Medicare guidelines before delivering a service or treatment. Beneficiaries don't have to take any additional action, and these requirements apply only to scheduled services — not to emergency or urgently needed care, which are always exempt.

It's important to note that [Original Medicare already requires prior authorization for certain major services](#) (like durable medical equipment), and [additional requirements took effect in 2026](#). For Federally approved Medicare carriers, prior authorizations are permitted under Medicare law but only in specific circumstances authorized by Medicare itself. These approved carriers must follow the same rules as Original Medicare — approving all medically necessary services and adhering to Medicare's guidelines in the process.

Prior authorization serves two main purposes — to prevent fraud and to protect beneficiaries. Recent reports estimate that Medicare — and by extension, American taxpayers — [loses at least \\$60 billion each year to fraud](#). This fraud can place strain on the program, contributing to increased healthcare costs, potentially higher Part B premiums (which are [projected to nearly double by 2036](#)), and adding to the national debt. Prior authorization is one of the tools increasingly used to combat this problem. By verifying that a claim, patient, and provider are legitimate — and that the service is medically necessary under Medicare law — prior authorization helps prevent fraud while protecting beneficiaries.

Both Original Medicare and Medicare Advantage operate under the same Federal standards of medically necessary care, and the evidence from both Government and civilian sources shows that beneficiaries in both programs consistently receive the care they need. Illustrating this, a comprehensive [62-study meta-analysis from the Kaiser Family Foundation](#) found no statistically significant differences in healthcare outcomes between beneficiaries in Medicare Advantage and those in Original Medicare. Additionally, a [2015 study highlighted by the VA](#) examining a group of older, chronically ill patients found no health drawbacks for Veterans who used both VA care and Medicare Advantage.

Prior authorizations help safeguard the Medicare system from fraud, protect vulnerable beneficiaries, and contribute to ensuring taxpayer dollars are used responsibly. MOAA members can [contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn more about Medicare Advantage.

How much does a Medicare Advantage Plan (MAP) typically cost?

Medicare Advantage plans can have [additional monthly premiums](#), and 40% of civilian-focused plans do. Veteran-focused Medicare Advantage plans, on the other hand, overwhelmingly have no premium at all (99%), and most also include a Part B premium reduction benefit (75%). These plans actually reduce what recipients pay for Medicare Part B, all without adding additional premiums.

Included benefits vary by plan and location, so [contacting MOAA's Medicare Advantage partner, Veterans Healthcare](#), can be helpful to explore the options available to you.

Do I need to file TFL claims myself if I get a Medicare Advantage Plan?

No. In most cases, you should not have to file TRICARE For Life claims yourself when enrolled in a Medicare Advantage plan. Your provider should handle everything — billing the Medicare Advantage plan first and TRICARE For Life as secondary for TRICARE-covered services.

As with any health insurance, though, billing errors can occasionally happen. If you ever receive a mistaken bill or claim error, that's where Veterans Healthcare can help. Your Veterans Healthcare agent has direct access to a partnered professional billing office that specializes in resolving billing and coordination issues and can help get the issue corrected.

You'll never pay anything for the support and resources you receive through Veterans Healthcare. Their team will make the process as easy as possible and be there to help if a billing issue ever comes your way. You can [connect with Veterans Healthcare here](#).

I plan to work past age 65 and will keep my company's healthcare. Do I still need to enroll in Medicare at age 65?

The answer depends on your employer's health plan, the size of your employer, and your personal situation. For specific guidance, [contact Medicare directly](#).

I have VA healthcare. Do I need to enroll in Medicare?

This is what the [VA says about VA healthcare and other insurance](#):

"You can save money if you drop your private health insurance, but there are risks. We encourage you to keep your insurance for these reasons: We don't normally provide care for Veterans's family members. So, if you drop your private insurance plan, your family may not have health coverage. We don't know if Congress will provide enough funding in future years for us to care for all Veterans who are signed up for VA health care. If you're in one of the lower priority groups, you could lose your VA health care benefits in the future. If you don't keep your private insurance, this would leave you without health coverage. If you have Medicare Part B (coverage for doctors and outpatient services) and you cancel it, you won't be able to get it back until January of the following year. You may also have to pay a penalty to get your coverage back (called reinstating your coverage)."

Before making any changes to your Medicare coverage, [consider contacting MOAA partner, Veterans Healthcare](#). Their team specializes in helping Veterans understand how Medicare works alongside their service-earned benefits and can help you review your options while protecting the coverage you've earned.

Does a Medicare Advantage Plan (MAP) impact care received from the VA? How does this impact me if I have access to VA care but not TRICARE or CHAMPVA?

No. Enrolling in a Medicare Advantage plan does not remove or reduce your VA healthcare benefits. The VA [specifically states](#) that having other health insurance — like a Medicare Advantage plan — does not affect the VA healthcare benefits you can receive.

If you have VA healthcare, Medicare Advantage can expand your options for care outside of the VA. This gives Veterans the flexibility to continue using the VA while also having access to civilian doctors and hospitals, along with additional benefits that may include dental, vision, hearing, and more. MOAA members can [connect with Veterans Healthcare](#) to review the Veteran-focused Medicare Advantage options available in your area and how they can work alongside your VA healthcare.

Can I sign up for a Medicare Advantage Plan (MAP) at any time, or do I have to wait for an open enrollment period?

There are several opportunities throughout the year to enroll in or change a Medicare Advantage plan. The Annual Enrollment Period (AEP) runs from October 15 through December 7 each year. During this time, anyone with Medicare can enroll in or change a Medicare Advantage plan for the following year. The Medicare Advantage Open Enrollment Period (OEP) runs from January 1 through March 31 and gives people already enrolled in Medicare Advantage an opportunity to make a change.

There are also many Special Enrollment Periods (SEPs) available throughout the year. Things like moving, a natural disaster, or other qualifying circumstances can give you an opportunity to enroll in or change a plan during the year.

[Connecting with Veterans Healthcare](#) can help you understand what you're eligible for and when you may want to enroll.

If I move to a Medicare Advantage Plan (MAP) and decide I'd like to go back to regular Medicare, am I able to do that?

Yes. Enrolling in a Medicare Advantage plan does not permanently lock you into Medicare Advantage. If you decide you would rather return to Original Medicare, you can do so during an applicable enrollment period.

Because you remain enrolled in Medicare Parts A and B while you have Medicare Advantage, returning to Original Medicare does not restart your Medicare coverage or cause a Part B late-enrollment penalty.

The Annual Enrollment Period (October 15 - December 7) allows you to return to Original Medicare. The Medicare Advantage Open Enrollment Period (January 1–March 31) also allows you to return to Original Medicare. Certain circumstances may also qualify you for a Special Enrollment Period at other times during the year.

MOAA members can [contact MOAA's Medicare Advantage partner, Veterans Healthcare](#), to learn about the options available to you.

Can a member and spouse have different benefits? Do they have to enroll in the same programs?

Medicare coverage is individual, so spouses do not have to enroll in the same Medicare Advantage plan or make the same Medicare coverage choices. Each person can choose the option that works best for their individual needs.

It's completely normal for one spouse to enroll in a Medicare Advantage plan while the other remains with Original Medicare, or for both spouses to choose different Medicare Advantage plans.

Who is Veterans Healthcare and how are they compensated?

Veterans Healthcare is an independent Medicare brokerage. This means they do not work for any insurance companies or carriers. They work with multiple carriers and plan options and help individuals understand their choices to determine which options may work best for their specific situation.

As with any brokerage that offers Medicare Advantage Plans, Veterans Healthcare is compensated in the form of commissions from CMS. However, an enrollment only makes sense for Veterans Healthcare if it also makes sense for the member because of the safeguards and practical incentives built into the way Veterans Healthcare operates. The focus is always on recommending the right coverage — which can mean remaining on Original Medicare — rather than simply recommending enrollment in a Medicare Advantage plan. There are never any costs associated with the services provided by Veterans Healthcare. [Their team is available to help MOAA members](#) understand their options, enroll if appropriate, and provide ongoing support after enrollment and for years to come.

MOAA maintains an active role in the relationship with VHC to ensure members' needs are being met.

How do I set up a consultation to review whether a Medicare Advantage Plan MAP could be right for me?

Many members prefer to start by [browsing Veterans Healthcare's website to learn more and submit an information request](#). One of Veterans Healthcare's licensed agents will then reach out to answer questions, review your individual situation, help you determine whether a Medicare Advantage plan may be right for you, and present you with options if you'd like.

MOAA Members can also call Veterans Healthcare directly at 385-558-4129 (TTY: 711) to speak with a licensed agent. Hours are Mon-Sat, 0800-2000 MST.

How do I reach someone to talk specifically about GLP-1s?

Veterans Healthcare has a dedicated GLP-1 Expert Team made up of their most experienced licensed insurance agents who understand the Medicare coverage requirements surrounding GLP-1 medications and how they can interact with service-earned benefits.

Contact Veterans Healthcare and ask to speak with the GLP-1 Bridge Expert Team. They can help you understand the requirements, how your current coverage may be affected, and what Medicare plan options may be available to you. Eligibility for GLP-1 medications and associated costs ultimately depend on Medicare's requirements and your individual circumstances. Connect with [Veterans Healthcare via their website](#) or reach a licensed agent by calling 385-558-4129 (TTY: 711). Hours are Mon-Sat, 0800-2000 MST.

How do I participate in the GLP-1 Bridge Program?

To participate in Medicare's GLP-1 Bridge Program, you must first have qualifying Medicare Part D prescription drug coverage, either through a stand-alone Part D plan or an eligible Medicare Advantage plan that includes Part D. Original Medicare alone, TRICARE For Life, and VA prescription coverage do not satisfy this requirement.

You must also meet Medicare's medical eligibility requirements. You can learn more about Medicare's medical requirements [here](#) and [here](#).

For military retirees and veterans, adding Medicare Part D does change how existing prescription coverage works, so it's important to understand those tradeoffs before enrolling. For more information, read the next FAQ or [consider connecting with Veterans Healthcare](#).

What is Medicare Part D and how does it impact my TFL benefits?

Medicare Part D is Medicare's prescription drug coverage. If you choose to enroll in Medicare Part D, the Part D plan generally becomes your primary prescription drug coverage and TRICARE pharmacy coverage pays second for TRICARE-covered medications. This can change your drug formulary and which medications you have access to, the pharmacies you use, how prescriptions are processed, and what coverage rules apply. You'll also lose access to Express Scripts.

Importantly, enrolling in Part D does not remove your TRICARE For Life medical benefits. However, because it changes how your prescription coverage works, military retirees should understand all of the tradeoffs before adding Part D.

Veterans Healthcare does not recommend adding Medicare Part D for retirees who already have TRICARE pharmacy coverage. However, there may be very limited circumstances where exploring Part D makes sense for certain retirees interested in accessing Medicare's GLP-1 Bridge Program. [Veterans Healthcare's team of licensed agents can help](#) you review how Part D would interact with your existing military coverage before making any decisions.

Does TRICARE for Life cover GLP-1s for conditions other than weight loss?

Find more information on [TRICARE For Life's coverage of GLP-1s here](#), and feel free to [contact TRICARE for more information](#).

What is MOAA doing to advocate for TRICARE and TFL to cover GLP-1s?

MOAA is continuing efforts with [Pentagon leadership](#) and elected officials on Capitol Hill to get GLP-1 coverage reinstated for TFL beneficiaries. The GLP-1 issue was just featured in our [Summer Advocacy in Action](#) campaign, and we believe we have identified a member of Congress that may champion the issue. We are currently in discussions with that office, so please watch The MOAA Newsletter and Military Officer Magazine for updates. Hearing from constituents really does make a difference – please visit [MOAA's Legislative Action Center](#) to send a message to your lawmakers.

Have you heard from MOAA members who have worked with Veterans Healthcare and/or enrolled in a Medicare Advantage plan (MAP)? Are they happy with the plan?

Yes! Members have shared their feedback. A sampling is provided below.

“ This was phenomenal. I want to give you that feedback because I was just in the commissary, and I've been talking to other folks that didn't understand Veterans Healthcare. It was the best contact that I made! I did use the service, and it was great.
Sharron M, MOAA Member

“ I just want to say that I've had the opportunity to talk to one of the agents at great length, and he was really interested in talking to surviving spouses because he said he has learned that they have a lot of questions. There's a lot of misunderstanding about what they're eligible for, etc. And so, we will be setting up a meeting with him to speak to our surviving spouse virtual chapter group. He's mainly just there for informational purposes — he's not going to be trying to sell a product or anything, but to answer questions and provide information to our surviving spouses. He's been a wonderful contact; full of information and absolutely no pressure to do anything at all. So, I highly recommend.
Gail J., MOAA Member and MOAA Board Member

“ Veterans Healthcare, in particular my agent, was so wonderful during one of the most difficult and overwhelming times. When my husband was very sick in the ICU, we needed to figure out the best care facility for him to be moved to. We had no idea where to start and were getting very overwhelmed by all of the information. My agent walked us through every step and even made herself available at 8:30PM. The service and compassion we were given was above and beyond, very outstanding, and invaluable. I will definitely be spreading the word about Veterans Healthcare. With both of us being Veterans, this gives us such peace of mind. This is the kind of service ALL Veterans should know about!
Roni & Tally S., MOAA Members

“ The plan I worked out with you is going great! At my dentist's office, they said it was the best plan they have ever seen.
Thomas C., MOAA Member

“ My wife and I are both using Veterans Healthcare for our Medicare Advantage. The agent with whom I spoke was thorough, professional, and found plans suitable for our ages, locations, and past experiences. He even called my dentist's office to be sure that both the office and the dentist were in-network. He then followed up with weekly texts for about five weeks into the new year to provide more information on various benefits. I have his personal cell phone number!

Don T., MOAA Member, USAF Physician and Flight Surgeon

“ I'm writing to express my sincere appreciation for the excellent support provided by our Veterans Healthcare agent. She not only guided us into a program that works seamlessly with our TRICARE For Life coverage, but she has consistently explained everything clearly and responded promptly whenever we've had questions or concerns. Just today, she intervened with my optometrist regarding an \$85 charge for a service they initially claimed wasn't covered — when in fact it was. Thanks to her efforts, the issue was resolved quickly. I value her professionalism so much that this morning I recommended her to my best friend, a former Navy SEAL, who is seeking the same type of coverage. My agent is a true asset, and I hope she will continue to be our representative for many years! Thank you.

Alan R., MOAA Member

“ MOAA's partner, Veterans Healthcare, is a great deal for Medicare/TFL beneficiaries. Through Veterans Healthcare, my wife and I signed up for a Humana USAA Honor PPO plan. We received CMS confirmation that our monthly Part B premiums are reduced by \$135/month each. That's a \$3,240 reduction in our Part B cost a year. My Medicare Advantage plan does not cost anything, has no impact on TFL in any way, and there are other benefits, including a dental allowance to defray any dental costs such as co-pays. Not everyone may see the reductions we are seeing or plan features, but members can connect through the phone number on their page to get a consultation (www.veteran.healthcare/MOAA). Please pass our thanks!

Don B., MOAA Member and Legislative Leader

If you are a Veteran in crisis or concerned about one, you can reach the free, confidential Veterans Crisis Line 24/7. Dial 988 then press 1. You can also text 838255, or visit VeteranCrisisLine.net. The Veterans Crisis Line is funded by the U.S. Department of Veterans Affairs and is not affiliated with Veterans Healthcare. Your association shares a financial interest in this program, which benefits the entire membership. Veterans Healthcare -- We do not offer every plan available in your area. Currently we represent three organizations which offer 2,746 products in all areas. Please contact Medicare.gov, 1-800-MEDICARE to get information on all of your options. Veterans Healthcare represents plans that are insured or covered by a Medicare Advantage (HMO, PPO and PFFS) organization with a Medicare contract and/or a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare. Not all plans offer all of these benefits. Benefits may vary by carrier and location. Limitations and exclusions may apply. Part B Premium Reduction is not available with all plans. Availability varies by carrier and location. Actual Part B premium reduction could be lower.

MOAA CAN HELP

Resources and Expert Guidance

Navigating your military benefits can be complicated — get the most out of what you've earned with support from MOAA on topics like:

- TRICARE, Medicare, and TRICARE For Life
- Financial Education
- VA Benefits
- Guard/Reserve Benefits
- Survivorship
- And More!

PREMIUM and LIFE members can access all MOAA publications by downloading a digital copy at moaa.org/publications or by ordering a hard copy. One-on-one expert consultations are an exclusive benefit of PREMIUM and LIFE membership. [Upgrade your membership](#) for access today.

PREMIUM MEMBERSHIP

- 1 year: \$66
- 2 years: \$112 (15% off[†])
- 3 years: \$149 (25% off[†])

[†] Savings off full annual rate

LIFE MEMBERSHIP

Rates are customized based on your date of birth. For details, visit moaa.org/join.

WHO WE ARE.

More than 350,000 strong, the Military Officers Association of America (MOAA) is one of the country's leading organizations protecting the earned benefits of uniformed servicemembers and their families and survivors. Those who belong to MOAA not only lend their voices to a greater cause, but they also gain access to extensive benefits tailored to the needs and lifestyles of officers and their families. MOAA members hail from every branch of the uniformed services. To them, we make the same promise they made to their country: **Never Stop Serving.**

JOIN OUR MISSION. BECAUSE PEOPLE MATTER.

People are our mission. Add your voice to help us advocate on behalf of our community and our families everywhere. MOAA works to improve the lives of all those who serve (officers and enlisted) as well as their families and survivors, largely through tireless advocacy in our nation's capital. The larger our numbers, the greater your voice.

Membership is open to active duty, National Guard and Reserve, retired, and former commissioned officers and warrant officers of the following uniformed services: Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, Public Health Service, and National Oceanic and Atmospheric Administration, as well as their surviving spouses.



Military Officers Association of America
201 N. Washington St.
Alexandria, VA 22314

(800) 234-MOAA (6622)
Email: msc@moaa.org
Website: www.moaa.org