

# UNITED STATES MARINE CORPS



## A LEADERS GUIDE TO SUPPORTING WOUNDED, ILL, AND INJURED MARINES

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The Wounded Warrior Regiment (WWR) is a testament to the Marine Corps' commitment to "Keep Faith" with Marines. Upon earning the title of "Marine" each new Marine made the commitment to uphold the Corps motto of *Semper Fidelis – Always Faithful*. On that day, the Marine Corps also made a commitment to each Marine that the Marine Corps



will be *Always Faithful* to them and no matter what happens; the Corps and their fellow Marines will take care of them. The ultimate fulfillment of that commitment is embodied in the WWR and shows every Marine that we will keep faith with them always – from the yellow footprints to the grave.

The Marine Corps has made an enduring commitment to Keep Faith with those who have sacrificed greatly. Personalized recovery care requires more than just a program which is why the Marine Corps created the WWR, a unit whose sole mission is ensuring our wounded, ill, and injured (WII) Marines receive comprehensive and coordinated medical and non-medical support that is vital to their recovery.

After more than a decade of war, we understand that recovery care cannot occur in isolation and requires a coordinated recovery team approach. Warrior care has enhanced the partnerships between the Marine Corps, Navy Medicine, and the Department of Veterans Affairs in a way that had not existed before. These agencies are united by a common effort to ensure comprehensive recovery care for wounded, ill, and injured Marines through all phases of recovery and the eventual transition back to duty or civilian life.

***The Marine Corps' WWR continues to function as a central pillar of our pledge to "Keep Faith" with those who have served. Whether a Marine is wounded in combat, suffering from a chronic unresolved illness, or injured in a training accident, the WWR remains committed to providing comprehensive recovery care. - Lieutenant General Robert E. Milstead, Jr., Deputy Commandant for Manpower & Reserve Affairs***

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# Message to Leaders

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The Commandant's intent is that WII Marines remain with their units so long as the unit Commander can support their recovery. Therefore, Marine Corps leaders, you are the first line of defense for an extremely important population – our WII Marines and families who have served proudly and sacrificed greatly. Since 2007, the WWR has developed expertise to help your Marines return to full duty or successfully reintegrate into their civilian communities. As leaders, you must become familiar with these resources and utilize them to help WII Marines remain motivated to reach their goals.

The Marine Corps has a responsibility to maintain a healthy, capable fighting force. After more than a decade at war, Marines are experiencing medical and psychological health challenges that threaten unit readiness. These challenges need to be addressed to keep your Marines in the fight. Leaders have the responsibility to identify and seek solutions for their WII Marines.

Solutions do not necessarily mean separation. Many WII Marines, with the appropriate medical treatment and recovery time, will remain on active duty. We must support WII Marines to ensure that they can continue their commitment to the Corps. When WII Marines' medical conditions deny them this option, commanders should support their Marines to achieve successful transitions to hometowns across the nation.

The WWR provides steadfast guidance and expertise to leaders of WII Marines and their families. Stay in touch with the WWR and reach out to us early and often to ensure proactive and timely resolution of needs. You can access WWR resources 24/7 through the following means:

*Sergeant Merlin German Wounded Warrior Call Center: 1-877-487-6299*

*WWR Website: [www.woundedwarriorregiment.org](http://www.woundedwarriorregiment.org)*

*Download our WWR app free in the Apple Store or Google Play*

Let the WWR help you keep your WII Marines in the fight.

# Wounded Warrior Regiment Overview

*There are many private organizations that strive to help WII Marines and families, but there is only one official Marine Corps unit charged with providing non-medical recovery care to WII Marines: the Marine Corps WWR.*

***We are global, a national asset, an operational command!***

No matter where a wounded, ill, or injured Marine is located, the WWR can reach-out and support. The Regimental headquarters, located in Quantico, Virginia, commands the operation of two Wounded Warrior Battalions and multiple detachments in locations around the globe, including major military treatment facilities and Department of Veterans Affairs Polytrauma Rehabilitation Centers. As an official command, we have Marine leaders standing shoulder-to-shoulder with our warriors and families and fellow operational commanders. Regardless of location, our services are available to the total force – active duty, reserve, veteran Marines, and their families. Our Sergeant Merlin German Wounded Warrior Call Center, staffed with prior Marines and family members of Marines, is available 24/7, 365 days a year to answer questions and to connect Marines to resources. The following map depicts Regimental assets.



The Marine Corps model for caring for WII Marines is unique - the goal is to keep Marines with their units as long as that unit can meet their recovery care needs. The Commandant's belief is that keeping Marines in their unit, surrounded by their brothers and sisters in arms, best supports recovery and return to duty. Unit commanders are not left alone to care for their WII Marines; the WWR provides resource and recovery care support to commanders and their Marines regardless of assignment. Nearly 50% of the Marines supported by WWR remain assigned with their parent command. In the event that a Marine's needs are complex and

require a higher degree of care coordination support, the Marine may be referred to be joined via Temporary Additional Duty or transfer to a WWR element and have full access to WWR resources and services. These services include state-of-the-art ADA compliant barracks and our Warrior Hope and Care Centers at Camp Lejeune and Camp Pendleton, which contain comprehensive resources including uniformed command structure, medical assets, and transition support. These all-encompassing facilities promote healing while providing WII Marines with the rehabilitation activities, psychological support, and transition planning to best prepare them for transition back to full duty or reintegration into their civilian communities.

## Key Programs

<p><b>Wounded Warrior Battalion Detachments</b></p>	<p>Wounded Warrior Battalions East and West have detachments in place at Military Treatment Facilities (MTFs) and VA Polytrauma Rehabilitation Centers throughout the U.S. and at certain overseas locations. Marines at the detachments handle the day-to-day needs of WII Marines and families at their location. Through ongoing proactive and personal interaction they assist families with non-medical issues. This assistance allows families to focus on their Marine’s recovery and can alleviate some of the stressors families experience when traveling to bedside.</p>
<p><b>Recovery Care Coordinators (RCCs)</b></p>	<p>RCCs serve as the WII Marine’s primary point of contact to assist them in defining and meeting their individual goals for recovery and transition. The RCC is the expert on identifying services and resources needed to assist WII Marines achieve their identified goals. RCCs regularly meet with members of their Marines’ recovery teams to improve care delivery and assist unit leadership to ensure goals stay on track.</p>
<p><b>Medical Cell</b></p>	<p>The Medical Cell provides subject matter expertise, advocacy, education and liaison to the medical community. Medical Cell personnel are knowledgeable advocates who establish a relationship with the Marine and families and command and collaborate with both medical and non-medical team members to support Marines during their recovery. If gaps are identified, Medical Cell personnel advocate for appropriate courses of action to optimize the Marine’s medical and psychological health.</p>
<p><b>Warrior Athlete Reconditioning Program (WAR-P)</b></p>	<p>The WAR-P provides WII Marines the opportunity to engage in activities outside of the traditional therapy setting. Activities are individualized to the WII Marines’ needs and encompass many areas – from aquatic training to yoga. Supporting WII Marines in individual or team settings, the program greatly improves overall physical and mental fitness.</p>



<b>Religious Support and Spiritual Care</b>	The WWR has Religious Ministry Teams (RMTs) located at the WWR HQ, its Battalions, and at Landstuhl, Germany. The RMTs provide spiritual and emotional care to WII Marines, their families, and staff.
<b>Transition Support Cell</b>	To enhance community reintegration for WII Marines who will not return to duty, the WWR's Transition Support Cell proactively reaches out to identify employers, job training programs, education opportunities, and internships to help them obtain positions where they are most likely to succeed and enjoy promising careers.
<b>Sergeant Merlin German Wounded Warrior Call Center</b>	The Wounded Warrior Call Center is a 24/7 operation that receives calls for assistance and conducts outreach calls to Marines and Marine Veterans to determine if their needs are being met, offer assistance, and follow-on monitoring to ensure issue resolution.
<b>District Injured Support Coordinators (DISCs)</b>	DISCs are located throughout the country to conduct face-to-face visits and telephone outreach to WII Marines and their families within their assigned region. They maintain oversight of the welfare and quality of life of assigned WII Reserve Marines, active duty Marines convalescing at home, and OEF/OIF WII Marine veterans.
<b>Specialized Subject Matter Expert Support</b>	<p>The WWR has experts to advise and assist WII Marines and their commands with various administrative and disability evaluation processes; including:</p> <ul style="list-style-type: none"> <li>• The complex IDES process</li> <li>• Wounded Warrior pay and entitlements</li> <li>• Traumatic Servicemembers Group Life Insurance</li> <li>• And more...</li> </ul>



# Making an Informed Decision: Referral to the WWR

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No two cases are alike – each WII Marine will present a different set of circumstances and assignment to the WWR may be appropriate and necessary to ensure the WII Marine’s successful transition through the phases of recovery. The parent command plays a key role in deciding whether their Marine should be referred to the WWR and consultation with the Marine’s primary medical care manager should be a factor in the decision. Each WII Marine’s circumstances should be reviewed on a case-by-case basis. Provided below is a list of 10 basic questions to help Commanders make informed decisions.

- 1) Is this a “non-routine”, complex medical or psychiatric issue requiring in-patient treatment or medical care not offered locally?
- 2) Is this a medical condition requiring extended out-patient treatment?
- 3) Will treatment and rehabilitation take more than 90 days?
- 4) Will the WII Marine have three or more complex medical appointments per week?
- 5) Does the wound, illness, or injury prevent the Marine from working in their current MOS?
- 6) Does the wound, illness, or injury prevent the Marine from supporting the unit outside their primary MOS?
- 7) Is it unlikely the WII Marine will return to full, unrestricted duty?
- 8) Is it likely the WII Marine will be referred into the Integrated Disability Evaluation System (IDES)?
- 9) Is the command unable to support transportation requirements for the WII Marine’s medical appointments?
- 10) Is supporting the WII Marine affecting the unit’s operational readiness in accomplishing its primary mission (essentially a “commander’s assessment”)?

If the answer to some or all of these questions is “yes”, a referral package should be considered. If “no”, assignment to the WWR is unlikely; however, your Marine would more than likely benefit from some of the external resources available through the WWR. The WWR is available to support commanders and Marines regardless of assignment status.



## Referral Determination

### Assignment to the WWR is typically not considered if:

A Line of Duty investigation is required by the incident and it is not completed.

There are any pending military or civilian legal issues (the pending legal issues may show cause for assignment if the diagnosis / condition compounds the issue).

The Marine is already at the Physical Evaluation Board step in the IDES process.

The Marine requires a level of monitoring or observation which cannot be provided by the WWR (24-hour watch, extreme psychological or behavioral conditions, etc.)

### Assignment to the WWR is typically considered if:

The Marine has injuries that will require more than 90 days of medical treatment or rehabilitation per MCO 6320.2, Administration and Processing of Injured/III/Hospitalized Marines.

The Marine has three or more appointments of complex nature per week.

The parent command cannot support transportation requirements to the medical treatment facility.

The Marine cannot serve a function in the parent command due to their injuries or illnesses.

Marines are evaluated for assignment on a case-by-case basis by an interdisciplinary board of subject matter experts according to their medical needs and treatment plans. Admission is largely based on the level of medical and non-medical acuity. The Commanding Officers of WWBn-E and WWBn-W are the approval authority on all requests. If your referral is denied, you may appeal directly to the WWR CO. The WWR CO will make the final determination on all denials. For more information on the referral process, visit:

<http://www.woundedwarriorregiment.org/index.cfm/refermarine/>.

## Routing Referral Requests

Requests for assignment to the WWR can be initiated by the parent command, medical officer, WWR Detachment Officer-in-Charge, or the WWR Operations Section.

### Request for assignment must include:

- 1) Unit Command Endorsement (must be detailed)
- 2) Complete Medical Questionnaire

To request assignment to the WWR, send completed packages to the appropriate Wounded Warrior Battalion S-3 office:

**Wounded Warrior Battalion East:**

[WWBN\\_East\\_S3@usmc.mil](mailto:WWBN_East_S3@usmc.mil)

**Wounded Warrior Battalion West:**

[WWBnWestOperations@usmc.mil](mailto:WWBnWestOperations@usmc.mil)

If unsure of the appropriate office, send referral to the WWR at

[SMBWWRopsCenter@usmc.mil](mailto:SMBWWRopsCenter@usmc.mil).

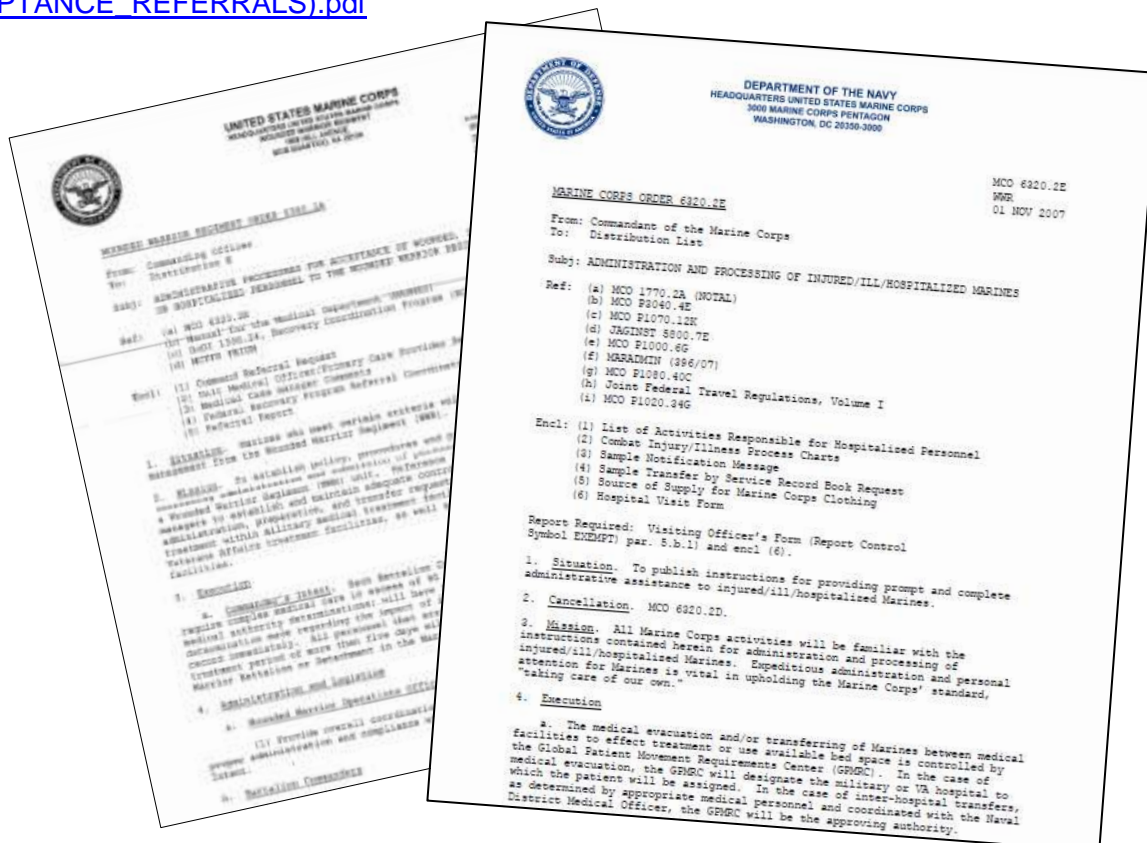
## Orders Governing Assignment

MCO 6320.2E, Administration and Processing of Injured/III/Hospitalized Marines,

[http://www.woundedwarriorregiment.org/wwr/assets/File/MCO\\_6320\\_2E.pdf](http://www.woundedwarriorregiment.org/wwr/assets/File/MCO_6320_2E.pdf)

WWR Order 6300.1A, Administrative Procedures for Acceptance of WII or Hospitalized Personnel to the WWR,

[http://www.woundedwarriorregiment.org/WWR/assets/File/ReferMarine/WWRO6300\\_1A\(ACCEPTANCE\\_REFERRALS\).pdf](http://www.woundedwarriorregiment.org/WWR/assets/File/ReferMarine/WWRO6300_1A(ACCEPTANCE_REFERRALS).pdf)



# Caring For Your WII Marine: When a Marine Does Not Meet WWR Assignment Criteria

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Although a WII Marine may not trigger WWR assignment criteria, that does not mean he or she will not require specialized support to ensure their successful recovery. The checklist below is provided to assist Commanders in caring for WII Marines that remain with their unit.

## **Commanders' Checklist: Caring for WII Marines**

- ✓ Per MCO P1900.16, Chapter 8, designate a unit representative to oversee the WII Marine's recovery and liaison with the medical treatment facility (MTF) and WWR as required (e.g. LIMDU Coordinator).
- ✓ Establish close liaison with the MTF / hospital to ensure prompt and correct information is provided for inclusion in a Personnel Casualty Report (PCR). PCR reporting is continuous, for Seriously Injured (SI) and Very Seriously Injured (VSI), until the Marine is upgraded to Not Seriously Injured (NSI) status or returns to full duty. PCRs are not just generated for combat wounded; commanders should produce a PCR for any extended injury or illness (e.g. cancer). The Parent Command is required to submit supplemental PCRs per MCO P3040.4E, Marine Corps Casualty Procedures Manual for the various scenarios:
  - Every 7 days – Progress Report
  - When the Marine's Casualty status changes, e.g. SI to VSI
  - When a Marine is transferred to another MTF
  - When the Marine arrives at the destination MTF
  - When the Marine is discharged from the MTF to include convalescent leave
  - When the Marine is discharged from the MTF, the PCR must state "THIS IS A FINAL PCR" in the remarks section
- ✓ Identify if the Marine's family is local to the hospital where he/she is being treated.
  - If the family is not local and the Marine is an inpatient in SI or VSI status, up to 3 designated individuals can be authorized to travel to bedside on an Invitational Travel Order (ITO) issued through the Casualty Branch (1-800-847-1597).

- If a doctor determines it is necessary to have someone assist with the Marine's activities of daily living in the out-patient setting, an individual, designated by the Marine may be issued Non-Medical Attendant (NMA) orders through the WWR (703-784-3694/3689).
- ✓ Request a Recovery Care Coordinator (RCC) be assigned to assist the Marine navigate the recovery mission and plan for the future, even if they plan to stay in the Marine Corps.
- ✓ Ensure the Marine is receiving all benefits / pay and allowances to which they are entitled. WWR has fact sheets available for each type of compensation listed:
  - Traumatic Servicemembers' Group Life Insurance (TSGLI) – Was the wound or injury caused by a traumatic event? Note: Qualifying injury is not limited to combat. For help completing the TSGLI application, a WII Marine can contact the Sgt Merlin German Wounded Warrior Call Center at 1-877-487-6299.
  - Pay and Allowance Continuation (PAC) – Was the Marine hospitalized for treatment from a wound, illness, or injury received in a combat zone, hostile fire area, or from being exposed to a hostile fire event? They may be eligible to continue receiving allowances, such as hardship duty pay, hostile fire / imminent danger pay, deployed per diem (incidental expense portion only), hazardous duty incentive pay as well as other special assignment and parachute, or “jump” pay. PAC program eligibility terminates on the last day of the month during which any of the following occur:
    - The Marine has received the maximum 12 months of PAC.
    - The Marine is returned to full-duty status in other than a medical or patient unit.
    - The Marine is discharged, separated, or retired.
 PAC extensions may be requested. Please submit requests for extension to the WWR Pay and Entitlements Section at 703-784-3694 / 3689.
  - Social Security Disability Insurance – may be available for WII Marines and certain members of their family even while on active duty.
  - Special Compensation for Assistance with Activities of Daily Living (SCAADL) – Provides special monthly compensation to offset the loss of income by a primary caregiver who provides non-medical care, support, and assistance to a catastrophically injured WII Marine.
- ✓ Ensure the Marine receives the recognition he/she deserves including promotions, Purple Heart, Combat Action Ribbons and all other unit/personal awards.
- ✓ Fitness Reports and pros and cons are often overlooked for WII personnel. Ensure there are no date gaps or missing marks.

- ✓ Ensure unit requirements don't conflict with medical appointments and duties are appropriate based on medical restrictions (duties should not exacerbate the illness or injury).
- ✓ Allow the Marine to participate in the WWR's Warrior Athlete Reconditioning Program (WAR-P) to help boost self-perception and alleviate stress associated with injury or illness. Camps are held throughout the year and the Marine Corps Trials are held each spring. Contact the Warrior Athlete Reconditioning Program at [WWSports@usmc.mil](mailto:WWSports@usmc.mil).
- ✓ If the Marine completes two or more periods of Limited Duty (LIMDU), he/she should be referred to the Integrated Disability Evaluation System (IDES) process (more detail provided on LIMDU and IDES later in this guide).
  - IDES referral is initiated at a MTF, NOT by civilian or VA providers.
  - Referral to IDES does not automatically mean the Marine will be leaving the service. Become familiar with Permanent Limited Duty and Expanded Permanent Limited Duty (PLD / EPLD) options.
  - Review the IDES Fact Sheet; ensure the Marine engages with a Disability Evaluation System Attorney and Transition Assistance from the WWR.
- ✓ If the Marine is demobilizing, has reached their EAS, or is medically retiring, ensure:
  - He/she receives their Severance Pay, if applicable, final settlement of pay and allowances, and their DD-214
  - Final PCR must include the date / time of discharge



# Recovery Care Coordinators

Regardless of assignment to the WWR, your Marine may benefit from support from a Recovery Care Coordinator (RCC). The level of non-medical and medical needs should be considered when referral is made and assessed.

RCCs are typically assigned to Marines who:

- ✓ Have many medical and non-medical needs
- ✓ Lack a stable support system
- ✓ Have multiple complex needs that require care coordination expertise
- ✓ Require extensive transition support planning

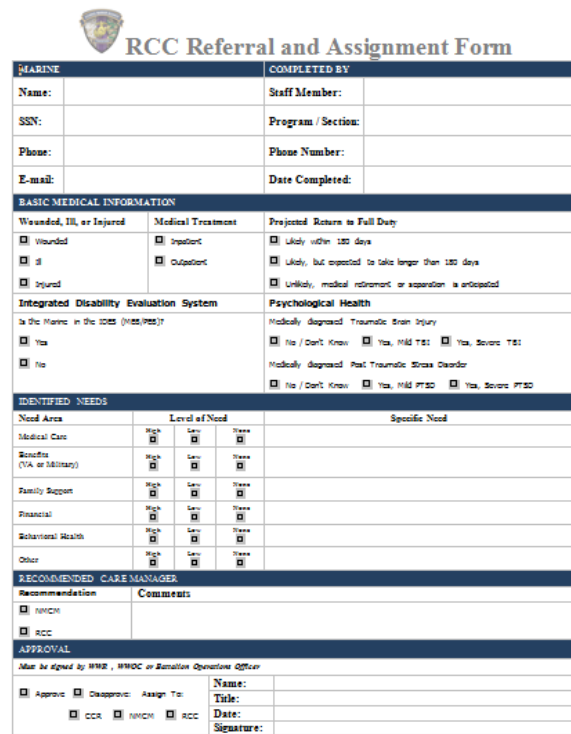
If the Marine's needs do not meet the threshold for RCC support, there are other care managers available to assist.

## Who are RCCs?

In the aftermath of a wound, illness, or injury, Marines may require assistance with identifying resources available to support them through their recovery. The RCC is one of the first non-medical points of contact the WII Marine and their family will have with the support network that will ensure a smooth transition either back to full duty, or to the civilian community. Designated RCCs are available to WII Marines and their families—whether they are assigned to the WWR or remain with their parent units. RCC's provide knee-to-knee support to Marines and families and often serve as the "truth-finders". Providing the ground truth on a situation benefits not only the Marine and family, but also the unit command team and medical providers. RCCs are a tremendous unit asset and a force multiplier for the recovery and command team.

## How do RCCs support Marines and Families?

The goal of the RCC Program is to **prevent unnecessary delays, reduce anxiety, and ensure the best possible outcome.** One way the RCC accomplishes this goal is to work with the Marine and family to develop a Comprehensive Recovery Plan (CRP). Simply stated, the CRP



The form is titled "RCC Referral and Assignment Form" and features a Marine Corps emblem at the top left. It is divided into several sections:
 

- MARINE INFORMATION:** Fields for Name, SSN, Phone, and E-mail.
- COMPLETED BY:** Fields for Staff Member, Program / Section, Phone Number, and Date Completed.
- BASIC MEDICAL INFORMATION:**
  - Wounded, Ill, or Injured:** Radio buttons for Wounded, Ill, or Injured; or Not.
  - Medical Treatment:** Radio buttons for Inpatient, Outpatient, or None.
  - Projected Return to Full Duty:** Radio buttons for Likely within 180 days, Likely, but expected to take longer than 180 days, or Unlikely, medical retirement or separation is anticipated.
  - Integrated Disability Evaluation System:** Radio buttons for Is the Marine in the IDES (MOS/PMS)? Yes or No.
  - Psychological Health:** Radio buttons for Medically Degraded, Traumatic Brain Injury, Post-Traumatic Stress Disorder, or None/Don't Know, with sub-options for Mild, Severe, or PTSD.
- IDENTIFIED NEEDS:** A table with columns for Need Area, Level of Need (High, Low, None), and Specific Need. Rows include Medical Care, Benefits (VA or Military), Family Support, Financial, Behavioral Health, and Other.
- RECOMMENDED CARE MANAGER:** Radio buttons for NHCN or RCC, with a Comments field.
- APPROVAL:** Radio buttons for Approve, Disapprove, or Assign To, with fields for Name, Title, Date, and Signature.



is a Marine's roadmap. It's a forward looking document that captures a Marine's and family's needs, translates those into concrete goals and then provides specific, actionable steps to meet those goals. One of the hallmarks of the CRP is that a resource is provided for each of these steps so the Marine always knows who assists with each particular action.

## **How do RCCs work with Commanders?**

Once a Marine is assigned, the RCC will contact the parent command to discuss the Marine's needs and support being offered. The RCC will continue to work with the command throughout the Marine's care by:

- ✓ Providing fact sheets, education and information on benefits and entitlements, and information on the best resources to support the Marine and family.
- ✓ Keeping the command aware of scheduled Multi-Disciplinary Team meetings where the Marine's medical and non-medical recovery and transition plan is discussed.
- ✓ Coordinating with other WWR elements to support the Marine's recovery.
- ✓ Educating and guiding both the Marine and command through the IDES.

## **When Should I consider Referring to a RCC for Support?**

The RCC program accepts Marines whether they are joined to the WWR, located with their parent command, resident in a military or civilian hospital, or joined to an I&I. The following may be reasons to refer a Marine for RCC support:

- ✓ Is not expected to return to full duty within 180 days
- ✓ Has multiple and/or complex medical needs (i.e. TBI or severe PTSD)
- ✓ Lacks a stable family environment or has complex family needs (i.e. EFMP)
- ✓ Is financially strained
- ✓ Has been referred to the IDES and requires support through the process
- ✓ Is nearing end of active service and has no transition plan (i.e. employment, housing, etc.)

## **How do I Complete a Referral for RCC Support?**

- 1) Download the Guidance for Requesting a RCC fact sheet from <http://www.woundedwarriorregiment.org/index.cfm/programsresources/recoverycarecoordinators>
- 2) Complete the electronic RCC referral form
- 3) Include all known medical conditions, non-medical needs and justification for the referral
- 4) E-mail the completed form to the WWR at [SMBWWROpsCenter@usmc.mil](mailto:SMBWWROpsCenter@usmc.mil)

# Supporting Your WII Marine: Medical Considerations

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Although Commanders are not medical personnel, they must be able to recognize key behavioral health issues. The more knowledge leaders have the better advocates they can be for their Marines and families. Marines with behavioral health issues are often poor self-advocates and therefore it is imperative that the Command advocate on their behalf when it comes to behavioral health support and services. This must be part of each Commander’s weekly battle rhythm.

The WWR Medical Cell is available to support, educate, and offer guidance to the Commanders with WII Marines in their units. You can reach the Regimental Surgeon at 703-784-3476. The Medical Cell includes:

Regimental Surgeon	Psychological Health Advisor
Mental Health Advisor	TBI Coordinator
Nurse Care Manager	Clinical Care Advocates

The Medical Cell works closely with Marines, leaders, and medical staff to offer solutions to complex care requirements for WII Marines and their families. They are the primary resource when medical questions or concerns arise regarding a WII Marine, and often convene a multi-disciplinary team meeting to discuss appropriate courses of action. Additionally, the Medical Cell collaborates with VA medical providers, OEF/OIF/OND care managers, and Federal Recovery Coordinators on behalf of Marines receiving care at VA facilities.

While the Medical Cell assists in connecting the non-medical and medical advocates, the WWRs primary mission is non-medical in nature. With that in mind, the Marine Corps partners with the Navy to ensure medical resources are provided to Marines.

***“Taking care of Marines is fundamental to our ethos and serves as the foundation of our resolve to do whatever it takes to help those in need at every possible juncture, whether it be suicide prevention, documentation and tracking concussive events, and assisting those with PTSD and combat operational stress.” - General James F. Amos, 35<sup>th</sup> Commandant of the Marine Corps***

# Limited Duty (LIMDU) Processing

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When a Marine's performance of duty is impacted by a medical condition, Marines should be medically evaluated by a military medical provider and if appropriate, placed on LIMDU. If there is no expectation of a return to full duty status upon completion of LIMDU, then the Marine may be immediately referred to the IDES. Below is a checklist for Commanders to follow to ensure that their Marine is properly evaluated, assigned, and accounted for while on LIMDU. Refer to MCO P1900.16, Chapter 8 of the USMC Separations and Retirement Manual (Revised 26 Nov 2013). Commanders must formally assign a LIMDU Coordinator, per the order, to assist in ensuring these steps are completed.

- ✓ Form 6100/5 must be completed by a Navy medical provider (this may require travel to a MTF – civilian or VA providers cannot complete this form).
- ✓ The completed form 6100/5 should be provided to the Unit LIMDU Coordinator and a copy provided to the servicing IPAC who will report limited duty status in the Marine Corps Total Force System (MCTFS).
- ✓ Marines must be medically re-evaluated at the 4<sup>th</sup> month of each period of limited duty. Because of long appointment lead times the unit will need to ensure that this re-evaluation is scheduled as much as 60 days in advance.
  - If a Marine is unable to perform his/her military duties they should be seen by a military medical provider or case manager at least once a month.
  - A Marine should not be “sitting around” – Commanders should be prepared to ask medical providers hard questions when the Marine's care does not seem to be progressing. Commanders are authorized medical information typically protected by HIPAA (MARADMIN 308/11).
  - Designate a command POC, SNCO or above (e.g. Limited Duty Coordinator), to ensure that a Marine does not fall off LIMDU, that medical appointments are consistent, and paperwork is processed on time.
- ✓ If a second period of LIMDU is required, obtain a second form 6100/5 and repeat the above process.
  - Third and subsequent periods of LIMDU for enlisted Marines must be approved by CMC, MMSR-4.
  - All LIMDU for Marine Officers must be approved by the CMC, MMSR-4.

# Integrated Disability Evaluation System Referral Process

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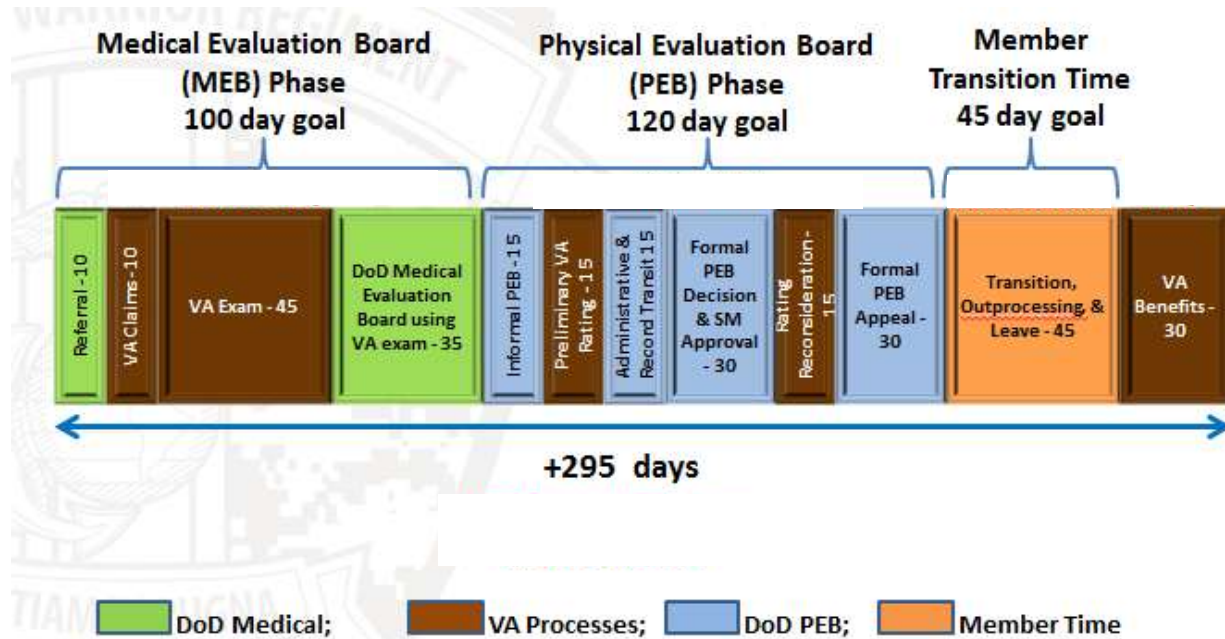
Service in the Marine Corps is a physically demanding and stressful occupation that often requires individuals to perform a variety of rigorous and potentially dangerous activities in many different and inhospitable operating environments. Whether serving in combat operations or in training evolutions, individual Marines can incur a wound, injury, or illness that may have a long-term impact on their lives and ability to continue their career as a Marine. With the aid of exceptional medical care and adequate time to heal, most Marines recover and return to full and unrestricted duty. Unfortunately some Marines do not. In this case, it is appropriate for them to be referred to the Integrated Disability Evaluation System (IDES).

It is important that Commanders are active participants in the IDES process. Below is a checklist for Commanders that provides guidance on referrals and accountability of Marines during the IDES process. Refer to the updated MCO P1900.16 – USMC Separations and Retirement.

- ✓ Appoint a Limited Duty Coordinator (SNCO or above) to liaison with local MTF Medical Boards Section (LIMDU Coordinator duties are found in Section 8110, MCO P1900.16).
- ✓ Ensure timely referral to the IDES by staying in regular contact with the Primary Care Manager (PCM).
  - A Marine should be referred to the IDES by a medical provider, when his/her medical impairments impact the ability to perform military duties appropriate to their office, grade, rank, or rating.
  - The mere presence of a medical condition or impairment is not enough to decide that a Marine should be referred to the IDES. Impact on military performance is the primary consideration.
  - If after the first period of limited duty the medical provider (often a specialist) determines that the medical impairment will not improve, then referral to the IDES should occur.
  - A second period of LIMDU may be required if treatment is progressing and there is an expectation that the impairment will improve. Typically, a Marine should be referred to the IDES during the second period of limited duty.

- KEEP IN MIND – Just because a Marine is referred to the IDES does not mean that care stops. The Marine will still have access to healthcare and will continue their treatment recommended by the medical authority.
- ✓ Provide the Physical Evaluation Board Liaison Officer (PEBLO) a non-medical assessment (NMA) of the Marine’s ability to perform their current job within five calendar days of the requested date. Failure to submit a timely NMA delays progress of the IDES application. Commanders may discuss the contents of the NMA with the Marine before submission. Sample NMAs can be found on the WWR website in the IDES Toolkit at: [www.woundedwarriorregiment.org](http://www.woundedwarriorregiment.org).
- ✓ If a line of duty determination is required, provide the PEBLO a complete line of duty investigation and determination within five days of the request date.

### IDES Time-Line



Marines and families do not have to navigate the IDES alone. The Physical Evaluation Board Liaison Officer (PEBLO) and the VA Military Service Coordinator (MSC) are non-medical case management specialists in place to provide assistance and information to the Marine and his/her family. Additionally, both specialists know the unique issues surrounding each case and will coordinate medical appointments and liaison with all government agencies (DoD, VA, and Social Security Administration) in order to ensure the Marine and his or her family aware of all processes and procedures.

## Accountability During the IDES Process

Commanders should TAKE ACTION if their Marine is not processing according to the IDES goal time-lines and engage with MTF staff. Many times it is simply an administrative error that slows down the process. Below is a check-list Commanders can execute to ensure that Marines are processing on time, maintaining meaningful work, and are preparing to transition back to active duty or return to their civilian community.

- ✓ Ensure Marine attends all IDES appointments and VA medical examination appointments, particularly during the MEB phase of the IDES process during which critical case management briefings, medical examinations, and Military Department MEBs are completed.
  - Commanders may grant exceptions to this requirement for the welfare or morale of a Marine as long as those exceptions do not prevent timely completion of IDES appointments.
  - Inform the PEBLO of any scheduling conflicts with IDES appointments.
- ✓ Ensure IDES referred Marines are assigned military duties appropriate to their condition and have a recovery care plan established. Request a Recovery Care Coordinator (RCC) to assist the Marine (see RCC referrals on pg. 15).
  - The medical providers should provide the commander with a specific list of activities the Marine cannot perform on the 6100/5.
  - Focusing on ability is an important aspect of recovery. Helping Marines feel a part of their unit, keeping them mentally engaged, and ensuring that they are continuing military education and skills development is important.
- ✓ Transition plans should begin early. Don't let your Marines wait until the end of the IDES process to start preparing for civilian life, if they will not return to duty. (More information on transition planning is provided later in this guide)

## Tool to Assist Commanders and Marines through the IDES

Go to <http://www.woundedwarriorregiment.org> and review the following tools:

**WWR IDES Toolkit**

**IDES Pocket Guide for Marines**

**IDES Fact Sheet**



## Religious Ministry Team

Marine Corps leaders and staff members should be aware that not all Marine's injuries or illnesses can be treated with traditional therapy or medication. Marines who have experienced combat, death, or their own or others injuries may be experiencing guilt or remorse for what they have seen, done, or did not do in the theater of war. This is often referred to as the moral wounds of war.

### Treatment Options for Moral Injuries

Talking with a compassionate "benevolent moral authority" is not only mentally therapeutic, but also spiritually healing.

Make amends with those you feel you have wronged or have wronged you.

Giving back to society or performing charitable acts.

Practicing spiritual disciplines like prayer, meditation, reading Holy scriptures, confession, attrition, and absolution.

Thoughtful and intentional exploration of literature and teachings regarding the problem of evil, morality, and injustice in the world helps bring into focus the blurred realities of the world.

***A moral injury can occur when "perpetrating, failing to prevent, bearing witness to or learning about acts that transgress deeply held moral beliefs and expectations." - Dr. Brett Litz, Clinical Psychologist for the Department of Veterans Affairs***

Chaplains, priests, rabbis, pastors, imams, or other counselors are all individuals who are available to provide this spiritual support. If you have questions regarding the moral wounds of



war or any other issues pertaining to guilt, grief, or remorse, seek out a local Chaplain or provide Marines with resources for available counselors, training, or alternative therapy opportunities.

# Key People in the Medical Team

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<b>Doctor/Specialist</b>	<b>Definition</b>
<b>Primary Care Manager (PCM)</b>	Provides and/or coordinates medical care, maintains health records, and refers WII Marines to specialists, if necessary (to be covered, specialty care must be arranged and approved by a Primary Care Manager). Care is usually provided in a military treatment facility, but civilian clinics may be used in some cases.
<b>Medical Case Manager (MCM) / Nurse Case Manager (NCM)</b>	The Medical Case Manager is a Nurse or Social Worker who brings together all the medical practitioners in support of the Marine's treatment. They help coordinate access to specialists and non-routine medical services. If the MCM is a registered nurse, they are called the Nurse Case Manager.
<b>Anesthesiologist</b>	Provides and monitors anesthetics during procedures, ensures a patient doesn't feel pain.
<b>Cardiologist</b>	Specializes in treatment of the heart; may do special procedures to correct some heart problems, but refers most surgery to cardiac surgeon.
<b>Dermatologist</b>	Specializes in treatment of the skin, including burns and skin infections.
<b>Endocrinologist</b>	Specializes in disease of the glands, often treats diabetes.
<b>Gastroenterologist</b>	Specializes in conditions involving the digestive tract, including stomach and bowels.
<b>Gynecologist</b>	Specializes in the female reproductive system.
<b>Neurologist</b>	Specializes in treatment of the neurological system, especially the brain and nerves.
<b>Oncologist</b>	Specializes in the treatment of cancer and tumors.
<b>Ophthalmologist</b>	Specializes in the treatment of the eyes.
<b>Orthopedist</b>	Specializes in problems with bones, joints, and muscles.
<b>Pathologist</b>	Identifies infectious agents and examines specimens in order to diagnose disease.
<b>Psychiatrist</b>	A medical doctor who specializes in treating mental and emotional problems and in counseling patients, and who may prescribe medications.
<b>Psychologist</b>	Specializes in assessing mental health.
<b>Pharmacist</b>	A person trained to prepare and distribute medicines and to give information about them.
<b>Physiatrist</b>	Specializes in rehabilitation medicine for life-changing injuries (also called physical medicine).
<b>Plastic surgeon</b>	Specializes in the repair and reconstruction of parts of the body.
<b>Podiatrist</b>	Specializes in conditions of the foot.
<b>Radiologist</b>	Specializes in administering, diagnosing, and treating with X-rays and other imaging technology, including CAT scans and MRIs.
<b>Urologist</b>	Specializes in the urinary system, including bladder and kidneys and the male reproductive system.

# Supporting Your WII Marine: Non-Medical Considerations

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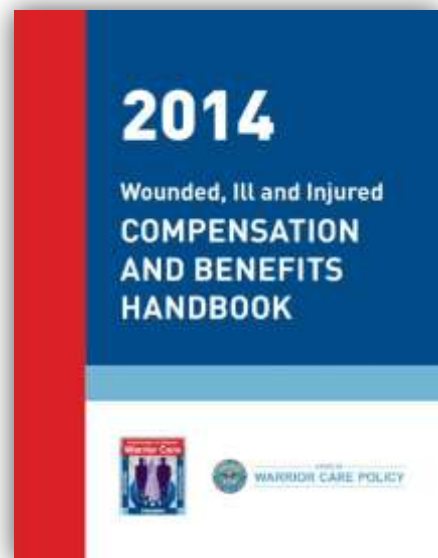
The Command can preclude many of the administrative challenges for WII Marines and their families by being aware of some of the key administrative considerations. Below are a few things to consider; however, if you need assistance or run into roadblocks in any of these areas then notify the WWR S-1 for immediate resolution.

## Awards

Marine leaders should ensure that WII Marines receive the recognition that they deserve, not only to improve their spirits but to assist them during considerations for promotion while on active duty. Every effort should be made to ensure proper endorsements are submitted for eligible Purple Heart medals, Combat Action Ribbons, and all other unit / personal awards.

## Benefits and Compensation

The **2014 Wounded, Ill, and Injured Compensation and Benefits Handbook**, available at, [http://warriorcare.dodlive.mil/files/2014/06/Comp\\_and-\\_ben\\_2014.jpg](http://warriorcare.dodlive.mil/files/2014/06/Comp_and-_ben_2014.jpg), is one tool that should be utilized by Marine leaders, WII Marines, and their families. The handbook is designed to help WII Marines and their family members or caregivers, navigate through the military and veteran disability, evaluation, compensation, and benefits programs that are designed to help them. This handbook should be provided to all Marines and families to help support them through the recovery process.



## Invitational Travel Orders

Invitational Travel Orders (ITOs) are government funded orders that can authorize up to three persons designated by a Marine to travel to the medical facility. There is no time deadline for ITO reimbursement.

Very Seriously Injured (VSI) / Seriously Injured (SI): Designated individuals may be provided one round-trip between the designated individual's home and medical facility in any 60 day period.

Not Seriously Injured (NSI): Designated individuals are authorized a 30 day maximum stay providing the following conditions are met: (1) the member must be in a hospitalized status; (2) the injury must have occurred in a combat zone or combat operation; and (3) the medical facility must be in the U.S.

## **IDES: Medical Evaluation Board (MEB) / Physical Evaluation Board (PEB) Processing**

Marine leaders should take an active role in ensuring that a WII Marine's paperwork is submitted in a timely manner and that they have an awareness of paperwork due dates and expirations.

## **Non-Medical Attendant (NMA) Pay and Tracking**

A NMA is an individual who is designated by a WII Marine to assist him/her with activities of daily living. The NMA must be authorized by the attending physician or surgeon and the military medical facility commander to be appropriate to serve as an NMA. The member is authorized a NMA, not more than a total of two round-trips in any 60 day period during any time.

## **Personal Effects**

Marine leaders should pay special attention to ensuring that WII Marines' personal effects are made available and are delivered to the WII Marine's home of record.

## **Social Security Disability Insurance (SSDI)**

SSDI pays benefits to seriously ill and injured Marines and certain members of their families if the WII Marine is "insured," meaning that he or she has worked a specific amount of time and paid Social Security taxes.

## **Traumatic Servicemembers' Group Life Insurance (TSGLI)**

TSGLI provides traumatically injured service members with funds to meet immediate, post-injury financial needs. TSGLI payments are designed to help traumatically injured service members and their families with financial burdens associated with recovering from a severe injury. TSGLI provides tax free lump-sum payments in increments of \$25,000, up to \$100,000, depending on the extent of the service member's loss.

## VA Benefits Status

The Department of Veterans Affairs offers eBenefits, a web portal for access to tools and VA benefits information. Marine leaders should ensure all Marines are signed up for eBenefits at [www.ebenefits.va.gov](http://www.ebenefits.va.gov). eBenefits can help you:

- ✓ Check on the status of compensation and pension claims
- ✓ Obtain or submit an application for the home loan certificate of eligibility
- ✓ Access and retrieve copies of official military personnel records
- ✓ View payment history of received VA benefits

## Staying Marine

***HQMC proudly salutes our combat injured Marines' sacrifices and acknowledges the value of retaining their leadership skills sharpened through combat experience which can be capitalized upon in mentoring our junior warriors when practical, despite their medical restrictions. Because of our magnificent medical care, many Marines can now pursue retention and remain on active duty given the guidance established in this MARADMIN. - General James T. Conway, 34<sup>th</sup> Commandant of the Marine Corps***

A Marine may file a request to remain on active duty in a Permanent Limited Duty / Expanded Permanent Limited Duty (PLD/EPLD) status upon completion of the IDES and the Marines acceptance of their unfit finding. A Marine must coordinate with the Limited Duty Coordinator to complete the request through their chain of command. Final approval for PLD / EPLD is granted by HQMC. Marines determined fit cannot request PLD / EPLD.

MARADMIN 228/06 authorizes an expanded form of PLD, EPLD, for those Marines who have received an injury directly or indirectly as a result of hostile action, and not as a result of their own personal misconduct. EPLD requires that:

- ✓ Combat injured Marines must be capable of performing in a military occupational specialty and able to effectively contribute to the Marine Corps mission.
- ✓ Passing all or part of the Physical Fitness Test (PFT) and / or being worldwide deployable are NOT prerequisites for retention in this status.
- ✓ EPLD Marines are eligible for selection or promotion.
- ✓ Upon separation or request for reenlistment, a new MEB will be completed and sent to the PEB for a new determination of disability percentage, (percentage is subject to a lesser

subsequent disability rating and may adversely affect Veterans Administration (VA) benefits).

- ✓ A Page 11 entry annotating that the Marine was fully counseled on the implications of his/her decision must be entered in their service record.
- ✓ Retention and suitability of EPLD Marines will be determined by selection board recommendations to CMC and based on the Marine's ability to fulfill duties in a suitable MOS within their original component (a change in disability percentage may require reconsideration by a new EPLD board).

### Preparing Marines to stay on active duty:



✓ <b>Participate, according to ability, in Unit physical training.</b>
✓ <b>Determine Marine's ability to stay in their assigned MOS and provide USMC internship opportunities for a possible MOS lateral move.</b>
✓ <b>Stay current on MOS schools, EPME courses and other rank/promotion training courses.</b>
✓ <b>Ensure fitness reports or pros and cons are up-to-date and completely reflect awards earned and work performed.</b>



# Supporting Your WII Marine: Support Available Through WWR

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WII Marines who remain with their parent unit can still take advantage of many of the services offered by the WWR. These include:

- Recovery Care Coordinator (RCC): Help WII Marines and families define and meet individual goals for recovery via a Comprehensive Recovery Plan.
- Administrative Support: Support commands with travel, TSGLI, SCAADL and other pay issues.
- Medical Section: Provide medical subject matter expertise, advocacy, education and liaison to the medical community.
- Wounded Warrior Battalion Contact Centers: Conduct regular outreach to WII Marines who remain with their parent commands. Contact Center staff offer immediate and typically short-term support on benefits information and access to care.
- Sergeant Merlin German Wounded Warrior Call Center: Conduct outreach to post 9-11 WII Marine veterans. Provides 24/7 assistance to WII Marines and families including support and information on issues ranging from employments, education assistance, financial management and planning, housing adaptation, transportation, and benefits.
- Family Support: Provide assistance training and information about family activities offered locally and nationally.
- Transition Specialists: Enhance community reintegration by identifying employers and education to help ensure WII Marines are competitive in the job market.
- Disability Evaluation System Attorneys: Provide legal assistance and counsel for WII Marines going through the IDES process.
- Religious Ministry Services: Give spiritual, moral, and emotional care to WII Marines, their families, and staff.



- Warrior Athlete Reconditioning Program (WAR-P): Challenge WII Marines to engage in physical and cognitive activities such as sports and recreation.
- VA Liaison / Veterans Service Organization (VSO) Coordinator: Provide information, education and assistance on services available through the VA and veterans service organizations.
- Charitable Giving: Administer acceptance and distribution of gifts and donations.
- Warrior Hope and Care Centers: Deliver a one-stop shop (at each WWBn) for physical therapy, education, training, and counseling for WII Marines and families.
- District Injured Support Coordinators (DISCs): Assist WII Marines transitioning from active duty to reserve or veteran status through a geographically dispersed network of Marines.
- Marine Forces Reserve (MFR) Liaison Officer: Provide liaison between WWR MFR staff in matters related to the care and support of WII Marines and their families assigned to MFR units.

## Helping Marines Stay Fit

The WWR provides various activities and opportunities for Marines to train as athletes, while increasing their strength, so they can continue with military service or develop healthful activities to ensure a healthy and productive life post active duty service. Marines are natural competitors and take their own personal fitness seriously. These added activities greatly improve their self-esteem by combating the potential side effects of injury, which include:

- Weight control concerns
- Declining self-perception
- Stress associated with injury

Improving physical capability requires concentrating the Marine on:

- Expanding their focus – post traumatic growth
- Accepting their new mental and physical situation
- Maintaining pride in their physical fitness and personal appearance
- Developing life-long healthy habits

## The Warrior Athlete Reconditioning Program (WAR-P)

WAR-P provides opportunities for Marines to engage in activities outside the traditional therapy setting. Activities are individualized to the WII Marines' needs, and may encompass over 18

sports - from aquatic training to yoga - and may vary according to location. Each Marine receives a plan that is established according to individual need, expressed desire, physical and mental ability as determined by his/her physician, and in accordance with the Marine's existing recovery plan. For those Marines who desire to participate in a more competitive environment, the Marine Corps Trials is a great first step. The Marine Corps Trials are more than just a competition; it is a venue to further the rehabilitation of their mind, bodies, and spirits through competition and camaraderie. For some, the Trials are a milestone in their personal athletic goals. For others, it is an opportunity to experience new activities and connect with fellow WII Marines. For all of the participants, the Trials are a chance to come together and focus on their abilities, not their disabilities.



# Supporting Your WII Marine: Transition Planning

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For wounded, ill, and injured Marines, ensuring a successful transition and reintegration enables them to lead a full and rewarding life that meets their personal recovery and transition goals. Proactive transition planning is important to ensure that gaps are identified prior to discharge. The check-list below will help prepare your WII Marine for their transition; however, it is important that Commanders are aware of the check-list items and follow-up to ensure the Marines successful completion. At a minimum, commanders should ensure that their Marines:

- ✓ Receive a benefits brief, via the Transition Assistant Program (TAP), that includes a break-out of any disability compensation to be received from DoD and / or the VA.
- ✓ Completes all required paperwork including the Survivor Benefit Plan (SBP).
- ✓ Has a copy of their completed DD-214 and that it is uploaded into their OMPF prior to discharge. If not, VA benefits may be delayed.
- ✓ Is provided information on VA resources and services.
  - Apply for enrollment in the VA healthcare system and for health care benefits, fill out the 1010 EZ form and submit it online at <http://va.gov> or call VA Health Benefits Service Center (877-222-8387).
  - Register with e-benefits online for quick access to online tools that enable filing for benefits and checking benefits status – [www.ebenefits.va.gov](http://www.ebenefits.va.gov).
  - Schedule initial medical appointment at local VA medical center. Copies of medical record and DD-214 should be brought to first meeting.
  - Vocational Rehabilitation services may be available to assist with resumes, job training, and locating employment – [www.vba.va.gov](http://www.vba.va.gov).
  - Marines receiving behavioral health care services may qualify for the inTransition Program's mental health coaching and support to assist their transition between healthcare systems (1-800-424-7877).
- ✓ Has received workforce development support, including resume development and job placement.

Below is a guide that will assist your Marine through the transition process. This checklist can be provided to the Marine 30 days before his/her scheduled end of active service.

Timeframe	Actions	Resources
<b>Before Check-Out</b>	Make a copy of your <b>medical and dental records</b> to keep on file. You will need your records when you visit the VA.	Medical Clinic
<b>Before Check-Out</b>	Pick-up a 90 day supply of your <b>medication</b> before checking out. Contact your Primary Care Manager if you need a prescription refilled.	Primary Care Manager Clinic Pharmacy
<b>Before Check-Out</b>	Are you planning on using the <b>GI Bill</b> to go to college? If yes, fill out the VONAPP online to start the process. If not, you may be eligible to transfer this benefit to your dependents. Speak to your career planner about the minimum required service obligation. Keep in mind that this election must be made while you are still on active duty. [Marines who are found unfit for continued naval service and designated for medical discharge / retirement may elect to transfer their unused post 9-11 GI Bill with no additional service obligation. Marines must still make the election while on active duty and must be awarded an honorable discharge.]	Unit Career Planner  <a href="http://www.va.gov">http://www.va.gov</a>  VA's Educational Call Center (toll-free): 1-888-442-4552
<b>Before Check-Out</b>	You may be entitled to <b>Social Security Disability</b> . Visit the Social Security Administration website to apply or you may apply in-person at the nearest SSA office. Your benefits start as soon as you submit the application. If qualified, you may receive your active duty retirement pay in conjunction with SSDI. Speak to a SSA representative for all the details.	<a href="http://www.ssa.gov">http://www.ssa.gov</a>  SSA: 1-800-772-1213  For more information: <a href="http://medicare.gov">http://medicare.gov</a> 1-800-633-4227
<b>Before Check-Out</b>	Are you severely wounded or injured and require caregiver assistance? Are you receiving <b>SCAADL</b> ? If so, you may be eligible for the VA Caregiver Stipend. Talk with your Recovery Care Coordinator, Federal Recovery Coordinator, or a WWR representative on the transfer of the benefit.	RCC or FRC  <a href="http://www.va.gov">http://www.va.gov</a>  Wounded Warrior Call Center (toll-free): 1-877-487-6299
<b>Before Check-Out</b>	To enroll in the VA healthcare system and for health care benefits fill out the <b>1010EZ form</b> and submit it online.  Register with <b>e-benefits</b> online – a personalized workspace giving quick access to online tools that enable you to apply for benefits, download your DD214, and see your benefits status.	Access the form online at: <a href="http://www.va.gov">http://www.va.gov</a>  VA Health Benefits Service Center (toll-free): 1-877-222-8387  <a href="http://www.ebenefits.va.gov">www.ebenefits.va.gov</a>



<b>Before Check-Out</b>	Keep in mind that military service earned retired pay stops when you die. To protect the income of a surviving spouse, eligible children, or someone else, you can participate in the <b>Survivor Benefit Plan (SBP)</b> . You are required to make your SBP election prior to leaving the Marine Corps. Elections are made on the DD Form 2656, —Data for Payment of Retired Personnel. If you are married and want to decline SBP, designate child(ren) only beneficiary or participate at a reduced level, you must do so in writing before your date of retirement with your spouse’s written and notarized concurrence. [If you do not elect or decline the coverage then YOU WILL be automatically enrolled and will pay a premium]	<a href="http://www.dfas.mil/retiredmilitary/provide/sbp.html">http://www.dfas.mil/retiredmilitary/provide/sbp.html</a>  Speak to your unit S-1 to elect or decline the benefit.
<b>Before Check-Out</b>	You may be entitled to other benefits through your home state. Benefits may include tax exemptions, free education, and more. Research your state’s individual benefits packages.	<a href="http://www.military.com/benefits/veteran-state-benefits/state-veterans-benefits-directory.html">http://www.military.com/benefits/veteran-state-benefits/state-veterans-benefits-directory.html</a>
<b>At EAS</b>	Once you have your retired ID card, call the toll free number to enroll in <b>TRICARE</b> as a retiree.	TRICARE: <a href="http://tricare.mil">http://tricare.mil</a> North: 1-877-874-2273 West: 1-877-988-9378 South: 1-800-444-5445 Overseas: Check online for country specific numbers
<b>At EAS</b>	You are entitled to <b>unemployment</b> compensation while you search for a job after your military service. If you would like to take advantage of this benefit visit the Employment Security Commission nearest where you live.	ESC Office Locator <a href="http://www.ncesc1.com/locator/locatormain.asp">http://www.ncesc1.com/locator/locatormain.asp</a>
<b>At EAS</b>	<b>Combat Related Special Compensation (CRSC)</b> is a monthly entitlement that allows medical retirees with fewer than 20 years of service and a DoD rating of 30% or greater to recover some or all of their retired pay that was waived or offset by their Department of Veterans Affairs (VA) disability compensation. Eligible retirees must have a combat-related injury and may receive this entitlement in addition to any retired pay they receive from the Defense Finance and Accounting Service (DFAS). [In order to qualify for CRSC, you must have a VA-rated disability of at least 10 percent directly related to a combat/operations-related disability as approved by your branch of service.]	For more information: <a href="http://www.dfas.mil/retiredmilitary/disability/crsc.html">http://www.dfas.mil/retiredmilitary/disability/crsc.html</a>  If you have questions about your CRSC eligibility, please call DFAS at 1-800-321-1080
<b>At EAS</b>	Provide a copy of your DD214 to your <b>Military</b>	VA MSC



	<b>Service Coordinator (VA MSC).</b> The MSC needs a copy of the DD214 to finalize your VA compensation payments. Failing to provide the copy could result in a delay in your VA payment.	
<b>Within 2 Weeks Post EAS</b>	If you need care manager support from the VA then contact your local VA Medical Center and speak to an <b>OEF/OIF/OND Care Manager.</b> They will assist you in obtaining an appointment with your Primary Care Manager and track the status of your VA benefits.	VA Medical Center nearest your hometown:  OEF/OIF/OND Care Manager nearest your hometown:
<b>Within 2 Weeks Post EAS</b>	Schedule your initial <b>medical appointment</b> with your local VA Medical Center / Clinic. [Wounded Warriors have priority for appointments]	VA Medical Center nearest your hometown:
<b>Within 2 Weeks Post EAS</b>	Update your contact information with <b>DFAS.</b> Important notifications will be mailed to you based on your contact information in DFAS – <b>KEEP IT CURRENT!</b>	DFAS: 1-800-321-1080
<b>Within 30 Days Post EAS</b>	Take a copy of your medical records and DD214 to your first VA medical appointment.	
<b>Within 240 Days Post EAS</b>	You have 1 year and 120 days from the date of your separation to apply for <b>VGLI.</b> You can apply on-line. Rates are affordable. If you are rated 100% by the VA your premiums are waived. [If applied for within 240 days of EAS, there is no proof of good health. If the 240 days lapse, you still have one year to convert; however, you will be subject to a physical exam.]	<a href="http://www.va.gov">http://www.va.gov</a> 1-800-419-1473
<b>As Needed</b>	If you plan on purchasing a home, you may want to apply for your <b>VA Certificate of Eligibility.</b> If you qualify you may be approved for a VA loan that will allow you to purchase a house with no down payment.	Form and instructions are available at: <a href="http://www.va.gov">http://www.va.gov</a>
<b>As Needed</b>	<b>Vocational Rehabilitation (VocRehab)</b> may be available to you. You can access VocRehab through the VA Medical Center nearest you. They will assist you with updating your resume, job training, and locating employment opportunities.	For more information: <a href="http://www.vba.va.gov">http://www.vba.va.gov</a>
<b>As Needed</b>	Your experience and training received in the Marine Corps are marketable skills. Many companies are hiring Veterans for these specific skills. Remember that your best days are ahead and obtaining a <b>career</b> is your first step to a financially secure future!	Visit these job sites: <a href="http://www.usajobs.gov">www.usajobs.gov</a> <a href="http://www.donhr.gov">www.donhr.gov</a> <a href="http://www.hirevetsfirst.gov">www.hirevetsfirst.gov</a> <a href="http://www.jobcentral.com">www.jobcentral.com</a> <a href="http://www.m4l.usmc.mil">www.m4l.usmc.mil</a> <a href="http://www.dol.gov">www.dol.gov</a> <a href="http://www.vetsuccess.gov">www.vetsuccess.gov</a>

		<a href="http://www.hireheroesusa.org">www.hireheroesusa.org</a> <a href="http://www.dol.gov">www.dol.gov</a> <a href="http://www.mynextmove.org">www.mynextmove.org</a>
<b>As Needed</b>	<p>Qualifying athletes training in <b>Paralympic sports</b> are eligible for a monthly allowance if they meet the minimum standards in his or her respective sport at a recognized competition and be nationally or internationally classified by his or her respective sport federation as eligible for Paralympic competition within six or 12 months of a qualifying performance.</p>	<p>For more information email: <a href="mailto:vacoadaptiveSP@va.gov">vacoadaptiveSP@va.gov</a></p> <p>Website: <a href="http://www.va.gov/adaptivesports">www.va.gov/adaptivesports</a></p>
<b>As Needed</b>	<p><b>Stay in contact with the WWR. The Sergeant Merlin German Wounded Warrior Call Center is available to support you with any needs you may have. They can also link you to the resources identified on this checklist.</b></p>	<p><a href="http://www.woundedwarriorregiment.org">www.woundedwarriorregiment.org</a></p> <p>Call Center (24/7): 1-877-487-6299</p> <p>Facebook.com/wwr.usmc</p>





## Stay Connected:

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[www.woundedwarriorregiment.org](http://www.woundedwarriorregiment.org)

**Sergeant Merlin German Wounded Warrior Call Center 1-877-487-6299**

[Facebook.com/wwr.usmc](https://www.facebook.com/wwr.usmc)

[Twitter.com/usmcwwr](https://twitter.com/usmcwwr)

[Flickr.com/photos/usmcwwr](https://www.flickr.com/photos/usmcwwr)

[Youtube.com/usmcwwr/cc](https://www.youtube.com/usmcwwr/cc)

**WWR Application (free!):**

**Available in the Apple Store and Google Play**

This application provides information and resources for Marines, Veterans, family members and caregivers.

