



Highlights of GAO-09-289, a report to the Ranking Member, Committee on Oversight and Government Reform, House of Representatives

Why GAO Did This Study

Service members found unfit for duty due to a service-related illness or injury may be eligible for military disability retirement. When their disability is not stable, however, they may be placed on the military's Temporary Disability Retired List (TDRL) and granted temporary benefits for as long as 5 years. GAO was asked to respond to concerns about TDRL caseloads, management, and impact on servicemembers. To address these concerns, we analyzed TDRL data; interviewed military officials; reviewed laws, regulations, and other relevant documents; and conducted 12 focus groups with temporary retirees. This report examines (1) recent trends in the TDRL caseload size, (2) recent trends in the characteristics of those placed on the TDRL, (3) disability retirement outcomes for TDRL placements, (4) the adequacy of TDRL management, and (5) the adequacy of information provided to TDRL retirees.

What GAO Recommends

To improve TDRL management, DOD should evaluate the quality and consistency of TDRL decisions and take steps to ensure timely reexaminations and final disability determinations. The services should also provide adequate information about the TDRL to temporary retirees. Finally, the Congress may wish to reconsider the 5-year maximum for the TDRL. DOD concurred with each of our recommendations and provided technical comments that we incorporated in our report as appropriate.

To view the full product, including the scope and methodology, click on [GAO-09-289](#). For more information, contact Daniel Bertoni at (202) 512-7215 or bertonid@gao.gov.

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MILITARY DISABILITY RETIREMENT

Closer Monitoring Would Improve the Temporary Retirement Process

What GAO Found

TDRL caseloads within the Department of Defense (DOD) grew by 43 percent, from 9,983 in fiscal year 2003 to 14,285 in fiscal year 2007. Growth in caseloads could be attributable to a combination of increases in the number of cases going through the military's disability evaluation system, higher TDRL placement rates, and low numbers of cases removed from the TDRL relative to new cases added to the list.

DOD-wide, servicemembers placed on the TDRL in each calendar year from 2000 through 2007 varied little with respect to their military status, years of service, and disabilities. In each of these years, most TDRL placements had been active duty personnel, although the small proportion who had been reservists grew considerably. Most TDRL placements in each year also had fewer than 20 years of service and, over time, their average years of service declined. The disabilities most prevalent among TDRL placements were musculoskeletal, mental, or neurological in nature. Among those with mental and neurological disabilities, the incidence of post traumatic stress disorder and conditions related to traumatic brain injury increased substantially across the services.

Although the experiences of temporary disability retirees varied, some outcomes were more common than others. DOD-wide, very few who were placed on the list between calendar years 2000 and 2003 returned to military service. Further, about half received a final determination within 3 years and, of those who ultimately received permanent disability benefits, 73 percent had final disability ratings that were no different than their initial ratings. Finally, only 7 percent of TDRL placements, DOD-wide, received a final disability rating that qualified them for permanent disability payment amounts higher than their TDRL payments.

DOD and the services do not effectively manage key aspects of the TDRL process. The military does not systematically examine physical evaluation board (PEB) stability decisions for accuracy and consistency or routinely compile information on TDRL outcomes to better inform its assessments of stability. According to TDRL administrative staff, ensuring that medical reexaminations are done in TDRL cases at least once every 18 months is often a challenge. However, the military does not monitor the extent to which this requirement is met. Moreover, there is limited use of nonmilitary physicians to perform reexaminations, which could reduce burdens on medical treatment facilities. Finally, military procedures do not ensure consistent enforcement of TDRL rules.

Information about the TDRL that the services provide is not always clear or complete and can be difficult to access. PEB findings forms provided to temporary retirees do not fully explain why service members are placed on the list or what is required of them. Temporary retirees reported that counseling related to PEB decisions was inconsistent and lacking in follow-through. Information from military pamphlets, brochures, fact sheets, and Web sites is often incomplete or difficult to find. Temporary retirees participating in our focus groups expressed considerable confusion about and dissatisfaction with their limited access to information and points of contact.