

REVERSE USERRA ELECTION OPTIONS

Please indicate your election and acknowledgment by placing your *INITIALS* in the spaces provided below. If not applicable, leave blank.

NAME: _____ WORK LOCATION: _____
(Print) (Last, First, MI)

POSITION TITLE/GRADE: _____

SUPERVISOR (CIV): _____ (PRINT) _____ (PHONE)

1. Military Separation Orders and DD 214:

I have/will provide a copy of Military Separation Orders and DD 214 from current deployment.

2. SF-52:

I have/will notify my supervisor that a Return to Duty (RTD) SF 52 Request for Personnel Action MUST BE SUBMITTED TO THE HRO.

3. Current Work Schedule:

4/10 Work only four days a week for 10 hours a day with either **Monday OR Friday** as a day off

9/8 Work eight 9 hour days & one 8 hour day in a two week period with **Monday OR Friday** off

5/8 Work Monday thru Friday 8 hours a day

4. Leave: (I wish to use one of the following)

Terminal Military Leave _____ FROM _____ TO _____
I must submit a copy of my **AF Form 988 (AIR)** or **DA 31 (ARMY)** to HRO.

Personal LWOP _____
I must inform my supervisor and turn in a COPY of my OPM 71 to HRO.

5. Return to Duty Effective:

I will return to Duty Effective: _____

I am currently on terminal leave and elect to:

Return to work before my orders end, Effective: _____

Return at the end of my Terminal Leave, Effective: _____

6. Presidential Leave: (Contingency Only)

In accordance with Executive Order 13223, I am entitled to 5 days excused absence upon my return from military service in connection with Operation _____. Your supervisor must grant you 5 days of CONSECUTIVE administrative leave (LV) upon Return to Duty (RTD) (if you were on contingency active duty orders. The 5 days of Presidential Leave is authorized in a 12 month period after 42 consecutive days of Title 10 contingency orders.

FROM TO PHYSICAL RETURN TO WORK DATE

7. Federal Employee Health Benefits (FEHB):

Non-Contingency:

I do not have FEHB.

I elected to continue my FEHB coverage for up to 24 months while on military duty. Upon my return to duty I understand that I have 60 days to change or select a different plan for FEHB.

I elected to terminate my FEHB while on military duty. I understand that upon my return to duty, my FEHB will be restored effective the beginning of the pay period of my return to duty date.

Contingency:

I elected to continue my FEHB for up to 24 months while on military duty. Upon my return to duty, I understand that I may elect to change or cancel FEHB within 60 days of restoration by completing the transaction through the EBIS web site.

I elected to terminate my FEHB while on military duty. I understand that if I wish to take advantage of Transitional TRICARE I must complete a WAIVER FORM prior to my RTD date on the SF 52. The FEHB WAIVER is to be submitted the pay period prior to your Return to Duty, otherwise your FEHB will be reinstated on your Return to Duty (RTD) date and premiums will resume. You can return to FEHB 31 days before or 60 days after loss of Transitional TRICARE using Event Code 1M in EBIS.

***MY TRICARE EXPIRATION DATE IS: _____

8. Federal Employee Dental and Vision Insurance Plan (FEDVIP):

I understand that upon my return to duty I have 60 days to enroll or re-enroll in the Federal Employee Dental and Vision Insurance Program (FEDVIP) the new vision and dental benefit program separate from FEHB. In order to enroll or re-enroll I must go to the website or call 1-877-888-3337. If I don't enroll within 60 days of my return to duty I will have to wait for the open season which is the same as the FEHB Open Season (Nov-Dec timeframe).
www.benefeds.com

9. Flexible Spending Account (FSA):

I understand that upon my return to duty, I may contact FSA to re-enroll in the program due to a Qualifying Life Event (QLE) at www.fsafeds.gov or by calling 1-877-372-3337.

10. TRICARE Reserve Select (TRS):

I understand that because I am eligible for or enrolled in FEHB program, I am NOT eligible for TRS. Failure to report your FEHB eligibility to TriWest, you will have to pay TriWest back ALL monies paid on claims back to the date you became eligible for FEHB, plus you may face up to a \$5,000 fine, insurance fraud and imprisonment.

11. Federal Employees Group Life Insurance (FGLI):

I do not have FGLI.

I was not on AUS for more than 12 months.

I was on AUS for more than 12 months and elected to terminate. Your FGLI will be reinstated automatically upon my return to a pay and duty status in a FGLI-eligible position.

I was on AUS for more than 12 months and elected to continue my FGLI coverage for an additional 12 months. Upon my return to duty the premiums will be reinstated and the deduction will resume from my pay.

12. National Guard Association of the United States (NGAUS):

I do not have NGAUS.

I understand that upon entering in an AUS status that my NGAUS coverage was either continued at my own expense (direct billed) or terminated. Upon my return I would like to reinstate insurance and resume payroll deduction of the following coverage.

Basic and Supplemental Disability _____Reinstate (Please see NGAUS election form)

Term Life _____Reinstate (Please see NGAUS election form)

13. National Guard Association of the United States (NGAUS): (CONTINGENCY ONLY)

I served in support of a contingency; I have 31 days of resuming my technician duties to enroll. (Guarantee Disability Insurance with no health questions or exams required.) ALSO Guaranteed Life Insurance up to \$50,000 for technician. I MUST COMPLETE ENROLLMENT APPLICATION.

14. Thrift Savings Plan (TSP):

I understand that if I exercise restoration rights, I may make retroactive contributions and elections to my TSP account. To do this, I must send a written request or fill out a form to makeup TSP contributions at the ABC-C website within 60 days of my return to civilian service. <https://www.abc.army.mil/TSP/WhatisTSPMake-Up.htm>

I have a TSP Loan(s). Attached is my form TSP-41 to be submitted to TSP for notification that I am no longer in a non-pay status. I understand that I must make sure that DFAS has restarted my loan payments to TSP upon my return to technician status.

1% agency contributions are automatic, if eligible, upon my return to technician status. 1% retroactive agency contributions will be completed upon return to duty date by the HRO office.

15. Military Buy-Back:

I understand that in order to complete a military deposit for this military tour, I must go to the following website and complete the forms and steps, <https://www.abc.army.mil/retirements/FERSPost56.htm>

16. Rideshare / Vanpool Program:

Yes, I am participating in the Vanpool program and will contact phone number on debit card to restart enrollment.

17. Allotments / Garnishments:

I understand that upon returning from my non-pay status I will be responsible for re-establishing any allotments/garnishments that were deducted from my pay prior to entering a Absent Uniformed Service (AUS) status. It is also my responsibility to notify payees of the change in my status.

Statement of Understanding:

I understand the elections I have made above by signing, dating, and returning a copy of the Reverse USERRA Election Options Form to: *OTAG-AZ, HRO*
5636 E. McDowell Rd, Bldg. M5710
Phoenix, AZ 85008-3495.

I also understand I am responsible for making sure the HRO has all forms: 1) USERRA Election Options Form, 2) Military Orders, and 3) SF-52 necessary to process my AUS or separation action. All three of the forms listed above are to be sent to the HRO as soon as possible.

(Signature) (Date)

PHONE NUMBER: (Personal) _____
(Work) _____

If you have any questions, please see contacts below.

REVERSE USERRA BRIEFER: _____ DATE: _____

HRO CONTACTS:

Stacey Mitchell, Lead HR Specialist Phone: 602-629-4806 Email: Stacey.A.Mitchell6.mil@mail.mil	Cristian Acosta, Human Resources Specialist Phone: 602-267-2057 Email: cristian.g.acosta2.mil@mail.mil
Samantha Tellez, HR Specialist Phone: 602-629-4818 Email: samantha.l.tellez.mil@mail.mil	HRO Main Line Phone: 602-629-4800
Desiree Sheeran, HR Specialist Phone: 602-629-4817 Email: desiree.j.sheeran.civ@mail.mil	