



Military Compensation and Retirement
Modernization Commission

POWERED BY TRUE

What matters to you?



Next

Please share your preferences regarding the various components of military retirement pay and benefits.

Start Now



Who is MCRMC?

The Congress chartered the Military Compensation and Retirement Modernization Commission (MCRMC) to conduct an independent, comprehensive review of Service member pay and benefit programs and to make recommendations for their modernization, to:

- (1) ensure the long-term viability of the All-Volunteer Force;
- (2) enable the quality of life for Service members and their families; and
- (3) modernize and achieve fiscal sustainability for the compensation and retirement systems

Why this survey?

This survey is your opportunity to share your views on which Service member pays and benefits are important to you. It is part of the MCRMC's efforts to hear directly from a broad range of Service members and retirees, so your input (and that of many thousands of your counterparts) is greatly appreciated.

As you begin the survey, be aware that the MCRMC has no current position on the merits of any of changes to Service member pays and benefits. Instead, the survey questions are designed to help the Commission better understand the preferences of those who receive those pays and benefits.



Let's Get Started!

Before we start, here are some things to consider:

1. **Set aside 20-30 minutes.** The application will take approximately 20-30 minutes to complete. First, we'll ask you for your preferences for items within different categories (i.e., health care, retirement, compensation, quality of life benefits). Then, we'll ask you to indicate how important each category is to you, and to evaluate a few trade-offs.

The last part asks about your satisfaction with various compensation components, followed by some additional background information.

2. **Confidential and Anonymous.** This assessment is completely confidential and individual responses will remain anonymous. The results will be reported in aggregate form only.

3. **What's Best?** This assessment covers many topics that are in existence today, but some pose alternatives for you to consider. Please indicate your preference for each choice presented to you.

4. **Be Yourself!** When answering the questions, please think about what you, yourself, most prefer.

The survey must be completed in one session. If you cannot complete the survey in one session, you will have to start over. Please note that the survey will timeout after 30 minutes of inactivity.



CONSENT INFORMATION and PRIVACY ADVISORY STATEMENT

This statement describes the purpose of the survey, the identification and use of any Personally Identifiable Information, and asks for your informed consent to participate. Please read it carefully, and then click "Next" at the bottom of this page.

PRINCIPAL PURPOSE: This survey asks your preferences for current and alternative types and levels of military compensation (pays, retirement, health care and other benefits). This survey will capture input from a broad cross-section of current and former uniformed Service members. The Military Compensation and Retirement Modernization Commission sponsored this survey and intends to use the results to help it make recommendations on ways to improve and modernize military compensation.

VOLUNTARY PARTICIPATION: Your participation in this survey is voluntary. There is no penalty or loss of benefits to which you are entitled if you choose not to respond. However, maximum participation is encouraged so that the data will be complete and representative. Most people can complete the survey in 30 minutes or less.

DISCLOSURE PROTECTIONS: Your survey responses will be kept private to the extent permitted by law. Identifying information, such as your email address, will be kept separate from survey responses and used only for sending you survey invitations and reminders. In no case will the answers you provide reveal your individual identity, nor will we disclose your email address. Your responses on this survey will be combined with others to generate summary results only.

Please click "Next" to continue reviewing the CONSENT INFORMATION and PRIVACY ADVISORY STATEMENT



CONSENT INFORMATION and PRIVACY ADVISORY STATEMENT

SURVEY ELIGIBILITY AND POTENTIAL BENEFITS: The survey sample has been chosen using well-established, scientific procedures to randomly select a sample that represents the Defense community based on combinations of demographic characteristics (for example, enlisted or officer, and grade). This is your chance to be heard on issues that directly affect you. While there is no direct benefit for your individual participation, your responses on this survey make a difference.

STATEMENT OF RISK: The only risk to you is accidental or unintentional disclosure of the data you provide. However, the government and its contractors have a number of policies and procedures to ensure that survey data are safe and protected. For example, no identifying information is ever stored in the same file as survey responses. Demographic data that may be collected by the survey is not collected in a way that can be used to identify an individual. Government and contractor staff members have been trained to protect client identity and are subject to civil penalties for violating your confidentiality.

If you wish to withdraw from the survey please make a request by writing to survey@mcrmc.gov. Please include your unique survey link when making this request.

Click "Next" to continue if you agree to do the survey.



Part 1: What do you prefer?

First, we'd like to ask you about your preferences. The first two questions are practices, then we ask about your preferences for changes to different elements of your compensation, like basic and retirement pay, allowances, health care, and an array of quality of life benefits.

For each item shown, move the sliders up or down depending on your preferences. Note that the number beneath each column changes (0-100) as you move the sliders up and down. The higher you move the slider, the more you prefer that item. If you have no interest and/or if the benefit's feature doesn't apply to you, you should move the slider for that feature down toward zero.

Click the "Next" button below to continue.



Practice Question 1

In this survey, some questions will ask about your preferences for various features of your benefits. In this type of question, each feature is distinct from the others, and some may be of interest to you while others may not be.

We want you to try out a practice question like this, so you get a feel for it. Be sure to roll over each option to learn more about it.

Move the sliders between 0 and 100 to indicate how strongly you prefer each feature or how important it is to you. If you move a slider all the way to 0, we'll take that to mean you either have no interest or the benefit's feature doesn't apply to you. If you move two sliders to the same level, then you value those two options equally. If you move all the sliders to 0 except one, then you would want only that one option.

Got it! >



What sides do you prefer with your sandwich?

Move the sliders up and down to indicate your preference. Be sure to hover over the question and each option to find out more.



French fries



50



Apples



50



Carrots



50



Onion rings



50

Most preferred

Least preferred

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Practice Question 2

We'll also be asking you questions about benefit options that are relative to each other. For example, "Do you prefer one egg, two eggs, or three eggs in your omelette?" Three eggs may seem like they're worth more than two eggs, but if you're not very hungry, maybe you think two eggs would be almost as good.

For each item shown, move the sliders up or down to indicate your preferences. We've made an assumption about the relative value of each option in this question, and will let you know when you make a choice that doesn't fit with that assumption. However, if you want to stick with your decision, feel free to ignore the warning.

Got it! >





How many eggs would you like in your omelette?¹

Move the sliders up and down to indicate your preference. For this question, we've assumed that you value three eggs above two, and two above one, so you'll see a warning if you indicate a preference that runs counter to that assumption.



1 egg¹



46



2 eggs¹



49



3 eggs¹



52

Most preferred

Least preferred

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"Share your thoughts about the retirement plan."

The next few questions ask for your preferences regarding various hypothetical changes to the current military retirement plan.

By law, the Commission cannot recommend any changes which would lower the amount of retirement pay or change the retirement eligibility date for those currently serving or who are retired (often referred to as "grandfathering"). However, we are asking for your input to understand how you believe these changes might be perceived by future entrants to military service.

Got it! >



How do you feel about the percentage of base pay¹ Service members receive as retirement pay?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



30%



46



40%



48



50%



50



60%



52

Most preferred

Least preferred

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Would you have preferred an alternative retirement pay optionⁱ that included some form of a lump sum payment?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



Lump sum for payment for full benefitⁱ



50



Lower lump sum; reduced annuity payments to age 65, then full annuity paymentsⁱ



50



3 years of annual payⁱ



50



5 years of annual payⁱ



50



7 years of annual payⁱ



50



Full annuity payments starting at retirementⁱ



50

Most eferred

Least eferred

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What is your preference for these automatic enrollment contributionsⁱ into the Thrift Savings Plan (TSP) upon entering the military?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



0% of base payⁱ



2.5% of base payⁱ



5% of base payⁱ



7.5% of base payⁱ



10% of base payⁱ



50



50



50



50



50

Most
preferred

Least
preferred

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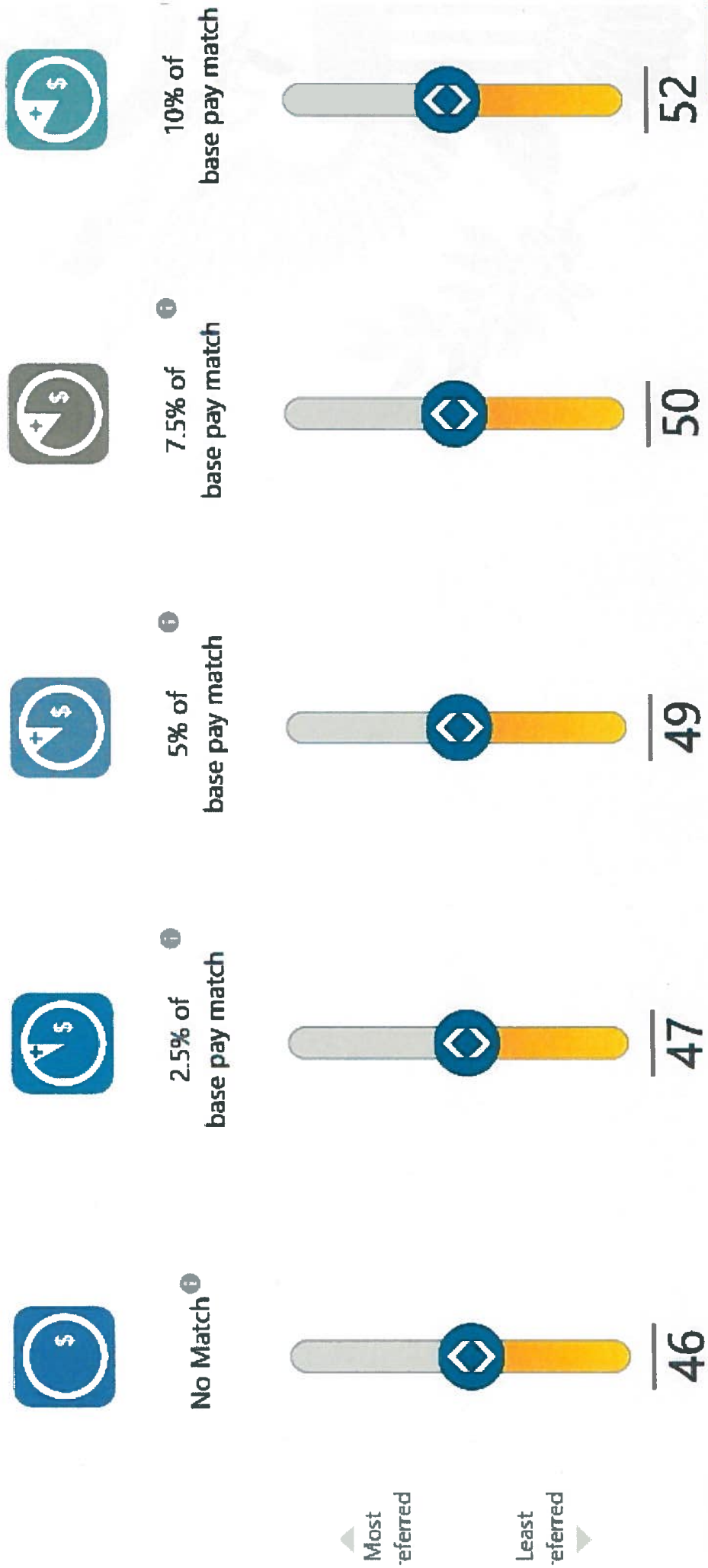
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If DoD contributed to TSP to match a Service member's voluntary contributions how do you feel about the following levels of matching contributions?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



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What is your preference for the following levels of Survivor Benefit Plan (SBP) payments?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



No change to
Survivor Benefit Plan
(SBP)



50



5% payment for
25% coverage



50



10% payment for
50% coverage



50



25% payment for
100% coverage



50

Most
eferred

Least
eferred

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"Let's talk about your preference for a one-time cost-of-living adjustment."

This would not replace your annual adjustment, but will give us an idea of how well your current retirement pay meets your needs.

We expect that you will assign your highest preference to the highest increase and your lowest preference to the lowest increase. However, we are particularly interested in how you view the alternatives in between.

Got it! >



What are your preferences with respect to the following¹ range of one-time cost-of-living adjustments?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



0% increase¹

5% increase¹

10% increase¹

15% increase¹

20% increase¹



46



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49



50



52

Most
eferred

Least
eferred

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How much of a monthly health care premium do you prefer?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



\$400 per month



\$300 per month



\$200 per month



\$100 per month



\$0 per month



46



47



49



50



52

Most preferred

Least preferred

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What is your preference for choosing a civilian doctor at the following incremental co-payment levels (relative to the cost at a Military Treatment Facility)?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



\$40 more per visit
to a civilian doctor



\$30 more per visit
to a civilian doctor



\$20 more per visit
to a civilian doctor



\$10 more per visit
to a civilian doctor



\$0 more per visit
to a civilian doctor



46



47



49



50



52

Most
eferred

Least
eferred

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What is your preference for using a local retail pharmacy for filling prescriptions at the following incremental co-payment levels (relative to the cost at a Military Treatment Facility)?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



\$20 more at a local
retail pharmacy



\$15 more at a local
retail pharmacy



\$10 more at a local
retail pharmacy



\$5 more at a local
retail pharmacy



\$0 more at a local
retail pharmacy



46



47



49



50



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If all the costs are the same, what are your preferencesⁱ
for the following choices of health care providers?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less.
How far you move the slider up or down should reflect how strongly you feel about the option.



ⁱ
Only Military
Treatment Facilities
(MTFs) and attached
outpatient clinics



50



ⁱ
A select network of
civilian health care
providers with MTFs



50



ⁱ
A broad range of
civilian health care
providers with some
MTFs



50



ⁱ
Only civilian health
care providers for the
full range of care



50

Most
preferred

Least
preferred

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If all the costs were the same, which of the following aspects of your health care experience matter the most?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



The ability to choose your health care provider



50



The ability to remain with the same health care provider



50



Short travel time



50



Flexible appointment scheduling



50



Short wait time at your provider's office



50



A large network of providers



50

Matters More

Matters Less

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How important are the following aspects of your commissary benefit?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.

					
Discount groceries and household goods	Convenience	Product assortment	Name brand selection	Sense of military community	Introduction of store brands
					
50	50	50	50	50	50

More
important

Less
important

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At what levels of discount do you prefer your commissary ⁱ over commercial alternatives?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less.
How far you move the slider up or down should reflect how strongly you feel about the option.



10% discount ⁱ



15% discount ⁱ



20% discount ⁱ



25% discount ⁱ



30% discount ⁱ



35% discount ⁱ



46



47



48



49



50



52

Most
eferred

Least
eferred

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Which exchange and commissary benefit offering do you prefer?¹

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



Exchange and
commissary situated
next to one another



50



Commissary alone
without a nearby
exchange



50



Exchange alone
without a nearby
commissary



50



Combined exchange
and commissary as a
"superstore"



50

Most preferred

Least preferred

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Which of the following transition programs were important to you during your transition?

Please indicate how much you prefer each option by moving its slider UP (toward 100) if you prefer it more, and DOWN (toward 0) if you prefer it less. How far you move the slider up or down should reflect how strongly you feel about the option.



Transition Assistance Program



50



One-Stop Career Centers



50



Federal Government internet portals addressing veteran employment



50



Troops to Teachers (TTT)



50

Most referred

Least referred

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