

The Army Reserve Forces Policy Committee (ARFPC) announces the selection of MG Richard Stone, Deputy Surgeon General (Army Reserve) as their new Chairman, and the continuation of MG Errol R. Schwartz, Commanding General of Washington, D.C. National Guard as the Deputy Chairman.

The ARFPC is one of the preeminent reserve component advisory boards within the Pentagon. The committee is known for earnestly addressing numerous policy issues critical to the effective and equitable utilization of the Army's Reserve Components (RC). Their ability to directly dialogue with the Chief of Staff of the Army (CSA), Vice Chief of Staff of the Army (VCSA), key Army Staff principals as well as senior civilian leadership such as the Assistant Secretary of Defense for Reserve Matters and the Undersecretary of the Army (USA) has made them a powerful advocate for important issues related not only the commonly expected topics of unit readiness and troop welfare, but also issues important to civilian employers and geographically dispersed families. Each of the quarterly conferences end with a brief to the Secretary of the Army (SA) and recommended actions beneficial to the Total Force. Recent examples of ARFPC success include: improvements in access to healthcare for RC Soldiers and their families; a contiguous mobilization policy; increased manning positions for full time support; equity in entitlements and benefits, standards for unit stabilization and dwell time, increased availability of training facilities and training seats, and improved mobilization training centers and processes.

Created by the National Defense Authorization Act of 1916, (10 USC Section 10302 and Section 3014) the committee is broken down by component (Army Reserve and National Guard) subcommittees to better address the issues based on their individual characteristics. Since it directly reports to the SA, it is considered one of the six elements of the Office of the Secretary of the Army. The statutory composition of the ARFPC includes 5 Army National Guard, 5 Army Reserve, and 5 Active Component General Officers (GOs) as principal members. To maximize Reserve Component (RC) input, the ARFPC currently also includes 10 alternate RC members representing US Training and Doctrine Command, First U.S. Army, the Joint Staff, and U.S. Forces Command. To better meet the strategic challenges of an Army at war, the ARFPC created two standing ad hoc subcommittees; one for Personnel issues and the other focused on Readiness.

The 37th Chief of Staff of the Army, General Dempsey, opened their most recent meeting in April by outlining his nine "Focus Areas": the Nation, the Joint Force, the Army Family, Leader Development, Mission Command, the Squad, the Human Dimension, and 21st Century Training. The VCSA, GEN Chiarelli wrapped up the meeting with a frank discussion regarding the publicized Active Component force reductions and that the RC may not be immune to reductions and may be forced to address possible force structure changes. LTG Bolger, the Army G3 briefed the Army Rotational Model that highlights the U.S. Army as America's decisive land force – any mission, anytime, anywhere, bar nothing. He stressed that the Army is an adaptive instrument of National power at home and abroad, a versatile mix of capabilities, and remains a clear symbol of National resolve and commitment, along with being the Nation's preeminent leadership experience. Mrs. Tammy Duckworth the Assistant Secretary, Office of Public and Intergovernmental Affairs, Department of Veterans Affairs (VA) honored the committee with a visit and presentation on the VA's current priorities including finally ending veteran

homelessness, elimination of disability claims backlog, implementation of the Virtual Lifetime Electronic Records (VLER) database, and to improve care and services to women veterans.

In the year ahead, the ARFPC will focus on several major issues including Continuum of Service (COS), institutionalization of the Operational Reserve Components, and improved Medical Readiness. The model of COS was introduced by congressionally chartered Commission on National Guard and Reserve (CNGR) and embraces the concept of a Profession of Arms. The proposed Force Structure changes, end-strength reductions, and increasing number of retirement eligible civil servants necessitate the ability to efficiently transition service members between components and even into civil service so that their experience can be retained in public service. Currently however, no institutional process exists to facilitate such movement resulting in the military's hemorrhaging of talent to the private sector. Also within the COS spectrum are the establishment of proportionally equitable pay, entitlements, and a retirement structure based on amount of service members perform. The ARFPC recommended that a forum be convened by the Army to develop a comprehensive way-ahead that defines Continuum of Service and its various components. The COS way ahead should be informed by other CNGR recommendations as well as the Quadrennial Review of Military Compensation. As proven over the last decade, the RC is an integral part of the Total Force. To fully realize the efficiencies and deterrent value of the Operational Reserve, the Army Campaign Plan must embrace the Army's Total Force Policy. To begin executing activities utilizing the spectrum of options offered by the Total Force Policy appropriate funding must be included in the base budget, resourcing programmers must have assured predictable access, and the senior leadership must have a common set of employment principles. The ARFPC has recommended the Secretary of the Army implement the Army Total Force Policy (Army Directive 2011-XX), support amendment of 12304C and the Unified Legislative Budget Proposal FY13 to ensure access to the Reserve Component, provide adequate funding for the Operational Reserve in the Base Budget for POM 13-17 and ensure AC/RC proportionality of mission sets within the Contingency Expeditionary Force (CEF) and Deployment Expeditionary Force (DEF) to sustain readiness. Approximately 15% of the Reserve Component does not possess health insurance and several Defense Health Program studies revealed that the primary reason for non-enrollment of RC Soldiers in TRICARE Reserve Select is cost. Currently a comprehensive medical management system does not exist for the Reserve Component to monitor and manage Soldiers discharged from demobilization platforms needing medical or behavioral health follow-up. The ARFPC has recommended that TRICARE Reserve Select be provided for all E1-E4 without premium, the development of a policy that mandates comprehensive case management of Reserve Component Soldiers post demobilization, and reform of the Physical Disability Evaluation System.

Just as the RC have been described as an "Indispensible Force" for the 21st Century, the ARFPC is expected to remain "Indispensible Force" advocating for legislation and policies that ensure citizen soldiers are properly resourced, trained, and compensated for their service.