



Department of Defense INSTRUCTION

NUMBER 6000.13

June 30, 1997

ASD(HA)

SUBJECT: Medical Manpower and Personnel

- References: (a) [DoD Directive 6000.12](#), "Health Services Operations and Readiness," April 9, 1996
- (b) DoD Instruction 1320.7, "Grades, Promotion Policies, Age, and Authorized Strengths in Grade for Medical and Dental Officers," September 29, 1993 (hereby canceled)
- (c) Title 10, United States Code
- (d) [DoD Directive 1300.4](#), "Inter-Service Transfer of Commissioned Officers," April 2, 1984
- (e) through (p), see enclosure 1

1. PURPOSE

This Instruction:

1.1. Implements policy, assigns responsibilities, and prescribes procedures under reference (a) to carry out medical manpower and personnel programs.

1.2. Replaces reference (b).

2. APPLICABILITY AND SCOPE

This Instruction:

2.1. Applies to the Office of the Secretary of Defense, the Military Departments, the Chairman of the Joint Chiefs of Staff, the Inspector General of the Department of Defense, the Uniformed Services University of the Health Sciences, the Defense Agencies, and the DoD Field Activities (hereafter referred to collectively as "the DoD

Components”). The term “Military Services,” as used herein, refers to the Army, the Navy, and the Air Force.

2.2. Does not apply to inter-Service transfers under Section 716 of 10 U.S.C. (reference (c)), except as provided in DoD Directive 1300.4 (reference (d)), or to the original appointment of Reserve commissioned officers as Regular officers in the Regular Army, Regular Navy, Regular Air Force or Regular Marine Corps under Section 533(f) of reference (c).

3. DEFINITIONS

Terms used in this instruction are defined in enclosure (2).

4. POLICY

It is DoD policy under DoD Directive 6000.12 (reference (a)) that medical manpower, personnel, and compensation programs be established to provide the DoD Components with sufficient military medical personnel to meet all mission requirements.

5. RESPONSIBILITIES

5.1. The Assistant Secretary of Defense for Health Affairs, under the Under Secretary of Defense for Personnel and Readiness, shall:

5.1.1. Monitor compliance with this Instruction.

5.1.2. Provide guidance to the Services, as necessary.

5.2. The Secretaries of the Military Departments shall administer the procedures in section 6., below.

6. PROCEDURES

6.1. Entry Grade Credit. A prospective health professions officer’s entry grade and rank within grade shall be determined by the number of years of entry grade credit awarded on original appointment, designation, or assignment as a health professions officer. The entry grade credit to be awarded shall equal the sum of constructive service credit and prior commissioned service credit (other than as a commissioned

warrant officer), except in cases where the total exceeds the maximum credit allowed, as stated in paragraph 6.1.3., below. A period of time shall be counted only once when computing entry grade credit, and qualifying periods of less than one full year shall be proportionately credited to the nearest day, except where noted otherwise. Credit shall be awarded in accordance with this Instruction and Sections 533 and 12207 of 10 U.S.C. (reference (c)).

6.1.1. Prior Commissioned Service Credit. Credit for prior service as a commissioned officer (other than as a commissioned warrant officer) shall be granted to recognize previous commissioned experience, while maintaining cognizance of the level of professional knowledge, skill, and experience required at specific rank levels of each health profession. For entry grade credit, the Medical Service Corps (MSC), the Biomedical Sciences Corps (BSC), and the Army Medical Specialist Corps (AMSC) are considered as the same Corps. The Secretaries shall establish procedures to ensure the awarding of prior commissioned service credit is applied in an equitable and consistent manner. Credit shall be awarded as follows:

6.1.1.1. Service on active duty or in an active status as a commissioned officer in any of the Uniformed Services, in the corps or professional specialty in which being appointed, shall be credited on a day-for-day basis with any commissioned service performed before such appointment.

6.1.1.2. Service on active duty or in an active status as a commissioned officer in any of the Uniformed Services, but not in the corps or professional specialty in which being appointed, shall be awarded one-half day of credit for each day served in the case of individuals seeking an original appointment as a health professions officer.

6.1.1.3. Commissioned service on active duty or in an active status while participating in an educational program leading to appointment in a specialty in which constructive service credit is awarded, shall be awarded day-for-day credit for service performed. An officer on active duty or in an active status who completes a program that would qualify for credit under subparagraph 6.1.2.2., below, in less than the number of years normally required to complete such education, may be given constructive credit by the Secretary of the Military Department concerned in the amount of the difference between the actual number of years the officer took to complete and the amount of time normally required to complete the program. The maximum constructive service creditable for completing such a program shall be the number of years (to the nearest year) normally required to complete the advanced education or receive the advanced degree, in accordance with Sections 533 and 12207

of reference (c). Constructive service credit may be awarded only if such advanced education or advanced degree is required as a prerequisite for original appointment as a commissioned officer in a particular officer category.

6.1.2. Constructive Service Credit. This credit provides a person who begins commissioned service after obtaining the additional education, training, or experience required for appointment, designation, or assignment as an officer in a health profession, with a grade and date of rank comparable to that attained by officers who begin commissioned service after getting a baccalaureate degree and serve for the period of time it would take to obtain the additional education. Constructive service credit shall be determined according to the following guidelines:

6.1.2.1. Periods of time spent on active duty or in an active status as a commissioned officer may not be counted when computing constructive service credit, except as in subparagraph 6.1.1.3., above.

6.1.2.2. Constructive service credit shall be awarded as follows:

6.1.2.2.1. Four years of constructive service credit shall be granted for completion of first professional degrees that include medical (M.D.), osteopathy (D.O.), dental (D.D.S. or D.M.D.), optometry (O.D.), podiatry (Pod.D. or D.P.), veterinary (D.V.M.), and pharmacy (Ph.D.).

6.1.2.2.2. Credit for master's and doctorate degrees in a health profession other than medicine and dentistry, whether it is the primary degree or an additional advanced degree, shall be awarded based on actual full-time equivalent education of up to two years for a master's degree and up to four years for a doctorate. Credit may not include time spent in attainment of baccalaureate or other lower degrees. No additional credit may be given for more than one advanced degree in a single field, or closely related field. The total credit allowed for having both a master's and a doctorate degree may not exceed the maximum allowed for a doctorate.

6.1.2.2.3. The additional degree must add adjunctive skills to the primary specialty and must contribute directly to performance in the anticipated position in the Military Service concerned.

6.1.2.2.4. Year-for-year credit shall be granted for the successful completion of internship, residency, fellowship or equivalent graduate medical, dental, or other formal professional training (i.e., clinical psychology internship or dietetic internship, etc.) required by the Military Service concerned. Training must be

approved by the appropriate accrediting agency, and may not exceed that required for certification in the specialty. Day-for-day credit shall be awarded for approved programs of less than one year in duration.

6.1.2.2.5. Credit of one-half year for each year of experience, up to a maximum of three years of constructive credit, may be granted for experience in a health profession, if such experience is directly used by the Military Service concerned. Creditable experience cannot predate the receipt of licensure, registration, or certification. Accordingly, volunteer, or student status cannot be credited.

6.1.2.2.6. Additional credit in unusual cases, based on special education or experience, can be granted by the Secretary of a Military Department, or designee. As determined by Service needs, the additional credit applies to individuals with unique qualifications that are beyond normal requirements for appointment as commissioned officers. The amount of credit shall be one year for each year of special education or experience. Maximum credit under subparagraph 6.1.2.2.5., above, must be earned before earning any experience credit under this paragraph.

6.1.3. Maximum Entry Grade Credit. The total entry grade credit granted shall be no more than that required for an officer to be eligible for an original appointment in the grade of Major or Lieutenant Commander.

6.1.4. Service Academy Graduates. Graduates of the United States Military Academy, the United States Naval Academy, or the United States Air Force Academy may not receive credit under paragraphs 6.1.1. or 6.1.2., above, for service performed, or education, training, or experience obtained before graduation from that Academy.

6.1.5. Waivers

6.1.5.1. When an individual is eligible for entry grade credit in excess of that required to receive an entry grade of Major or Lieutenant Commander, the Secretary of the Military Department concerned may, in individual cases, grant a waiver to entry grade credit limits if substantial reasons exist that warrant the individual to be commissioned at a higher grade than normal credit policy would allow.

6.1.5.2. The Secretary of the Military Department concerned shall establish formal procedures to review and approve requests for entry grade credit waivers and shall ensure that waivers are consistent and equitably applied in similar circumstances.

6.1.5.3. In considering a waiver request, the Secretary of the Military

Department concerned must determine that the individual receiving the waiver possesses the overall ability to perform effectively at the higher grade level, and that the waiver would not have a detrimental effect on the efficiency and effectiveness of the individual's military assignment.

6.2. Entry Grade

6.2.1. A person granted service credit under this Instruction and placed on the active duty list or the reserve active status list of a Military Service may have an entry grade determined by comparing entry grade credit with the currently established promotion phase points of the Military Service and officer category concerned. Entry grade credit in excess of the minimum years of entry grade credit required to establish a specific grade (but less than the amount necessary to justify the next higher grade) shall be used to adjust the date in the entry grade (paragraph 6.1.3., above, applies).

6.2.2. A former Regular or Reserve commissioned officer may, if otherwise qualified, be appointed or reappointed as a Reserve officer. If so appointed, he or she may be, as follows:

6.2.2.1. Placed on the reserve active status list of a reserve component of the Army, Navy, or Air Force in the grade equivalent to the permanent Regular or Reserve grade, and in the same competitive category, in which the person previously served satisfactorily on active duty or in an active status.

6.2.2.2. Credited, for determining date of rank under Section 741(d) of 10 U.S.C. (reference (c)), with service in grade equal to that held by that person when discharged or separated.

6.2.3. When a Reserve commissioned officer is transferred from an inactive status to an active status and placed on the active duty list or the reserve active status list, the Secretary of the Military Department may, effective on the date the officer is placed on either list, change the officer's date of rank to a later date, to reflect such officer's qualifications and experience, in accordance with Section 741 of reference (c). A Reserve commissioned officer who has served continuously in the Selected Reserve (SELRES) since the officer's last promotion and is placed on the active duty list while on a promotion list, as described in Section 14317(b) of reference (c), may not have his or her date of rank changed to a later date.

6.2.4. If the Assistant Secretary of Defense for Health Affairs (ASD(HA)) determines that the number of medical or dental officers serving in an active status in

the Reserve component of the Army, the Navy, or the Air Force in grades below Major or Lieutenant Commander is critically below the number needed by such Reserve component in such grades, the ASD(HA) may authorize the Secretary of the Military Department concerned to credit any person who is receiving an original appointment as a medical or dental officer with a period of constructive credit in such amount (besides any amount credited such person under paragraph 6.1.2., above) as shall result in the grade of such person being O-3. That provision is effective October 1, 1996.

6.3. Age

6.3.1. The Secretary of the Military Department concerned shall prescribe regulations concerning age qualifications for the initial appointment of Reserve health profession officers designated as critically needed in wartime. The regulations shall prescribe a maximum age qualification that is not less than 47 years of age.

6.3.2. In accordance with Section 14703 of 10 U.S.C. (reference (c)), and with his or her consent, an officer in the Medical Corps, the Dental Corps, the Veterinary Corps, the Nurse Corps, or the Army MSC (if designated as an allied health officer, an optometrist, or a biomedical sciences officer), the AMSC, the Air Force BSC (if qualified for Service as a veterinarian, an optometrist or a podiatrist), Air Force officers designated as nurses, or the Navy MSC (if designated to perform as an optometrist, a podiatrist, or an allied health officer in the Reserves) may be retained in an active status, by the Secretary concerned, to fill a mission based requirement until, but not later than, the date on which the officer becomes 67 years of age.

6.3.3. The Secretary concerned may defer the retirement of a Regular officer serving as a medical officer, a dental officer, an officer in the Army Nurse Corps, an officer in the Navy Nurse Corps, or an officer in the Air Force designated as a nurse, until the first day of the month following the month in which the officer becomes 68 years of age, if during the period of deferment, the officer is performing primarily patient care or other clinical duties. If the Secretary concerned determines that continued retention is necessary for the needs of the Service, he or she may retain the officer beyond age 68 on a case-by-case basis for such period as the Secretary considers appropriate, under Section 1251 of reference (c).

6.3.4. In accordance with Section 532 of reference (c), an individual seeking an original appointment as a commissioned officer in the Veterinary Corps, the Medical Service Corps, the Nurse Corps, or the Medical Specialist Corps of the Regular Army; the Medical Service Corps or the Nurse Corps of the Regular Navy; or the Biomedical Science Corps or as an officer designated as a nurse in the Regular Air

Force; shall not have reached his or her 35th birthday.

6.4. F. Edward Hébert Armed Forces Health Professions Scholarship Program (AFHPSP) and Financial Assistance Program (FAP)

6.4.1. The AFHPSP and FAP shall be administered in accordance with DoD Directive 6000.12 (reference (a)) and reference (c). Except where specifically indicated, the term “Program” refers to both the AFHPSP and FAP.

6.4.2. Program members shall be commissioned O-1 in the Reserve component of the sponsoring Military Department, unless eligible to hold a higher grade under statute.

6.4.3. AFHPSP participants shall perform a period of 45 days active duty for training (ADT) during each 12-month period of participation, with full pay and allowances as an O-1, regardless of rank held. FAP participants shall serve on active duty in a pay grade commensurate with their educational level, as determined by appointment under Section 12207 of 10 U.S.C. (reference (c)), and this Instruction, with full pay and allowances of that rank for a period of 14 days during each year of participation. Annual ADT should be performed at the nearest military installation. FAP participants shall be detailed as students at accredited civilian institutions, located in the United States or Puerto Rico, for acquiring knowledge or training in a designated health profession. Program participants are not authorized to drill for pay or receive pay for additional periods of active duty for training.

6.4.4. Members of the Program shall be required to participate in prescribed military and professional training.

6.4.5. Upon completion of their academic curriculum, Program participants shall be reappointed in their respective Services in accordance with current appointment regulations and instructions.

6.4.6. While a member of the Program, Military Service shall not be counted, as follows:

6.4.6.1. In determining eligibility for retirement other than by reason of a physical disability incurred while a member of the Program; or

6.4.6.2. In computing years of Service creditable under 37 U.S.C. 205 (reference (f)).

6.4.7. Section 2121 of reference (c) entitles Program members to receive a stipend, except when serving on active duty. Additionally, those in specialized training shall be paid an annual grant, in accordance with Section 2127 of reference (c). Governing Federal laws and policies will determine the taxation of program entitlements.

6.4.7.1. Payment of the grant and/or stipend is authorized as of the Program member's eligibility date, which is determined by the date of execution of the oath of office, the date of execution of the Program agreement, or the date of commencement of academic curriculum, whichever is latest.

6.4.7.2. Payment of the stipend shall continue until the date of graduation or the completion of specialized training, unless the Program member is suspended or disenrolled from the designated course of study or specialized training.

6.4.7.3. Payment of the stipend shall be terminated if the date of completion of the academic program or specialized training precedes the date of graduation by more than 45 days. Program members shall remain in an inactive duty status without pay, until they graduate and report to active duty.

6.4.8. Payment of educational and specialized training expenses incurred by a member of the Program is authorized, including tuition, fees, books, laboratory expenses, microscope rental, computer rental, laboratory and clinical coats, precious and semiprecious metals, and payments for educational services. Payment for health insurance is authorized when required by the educational institution. Such payments shall be limited to those educational expenses normally incurred by students at the institution, and in the health professions concerned, who are pursuing the same specialized training, but are not members of AFHPSP or FAP. The Secretaries of the Military Departments may provide for the issue of expensive items, such as microscopes, as Government equipment on a hand-receipt basis. Reimbursement is not authorized for room and board or nonacademic expenses, such as yearbooks, school newspapers, parking fees, and tickets for sports activities. The Services shall establish policies and procedures for the reimbursement of educational expenses that shall be consistently applied to all Program participants.

6.4.8.1. The sponsoring Military Department shall determine whether payment of authorized expenses shall be made directly to the civilian educational institution or to the member of the Program. Payments to educational institutions may be contracted and made without regard to Section 3324 of 31 U.S.C (reference (g)).

6.4.8.2. Members who enter the Program during an academic session or training year are eligible for personal reimbursement, on a prorated basis, of all normally required and authorized tuition, fees, books, educational expenses, and purchases, if they are for use during the current academic and/or training year. Those expenses incurred and items purchased prior to the current academic and/or training year, but still in use or required to be used in the future, may be approved for reimbursement.

6.4.8.3. When an accredited institution has increased its total enrollment solely for accepting members of the Program, the Secretaries of the Military Departments, under Section 2127(d) of 10 U.S.C. (reference (c)), may provide for additional payments to cover the portion of the increased costs of the additional enrollment not covered by the institution's normal tuition and fees. Such payments shall be made under a contract with the institution. The Secretaries of Military Departments shall obtain the approval of the ASD(HA) before entering into such a contract.

6.4.9. Each Program member shall incur an eight year service obligation, a portion of which shall be an active duty obligation (ADO). Time spent in military internship or residency training shall not be creditable in satisfying the ADO. The ADO portion for an AFHPSP participant shall consist of at least two years, or one-half year for each half year of AFHPSP sponsorship, whichever is greater. The ADO for a FAP participant shall be two years, or the actual number of years of FAP sponsorship plus one year, whichever is greater. The remaining service obligation beyond the ADO or SELRES portion shall be served in the Individual Ready Reserve (IRR), unless the Secretary of the Military Department concerned and the Program member mutually agree that said portion, or a part thereof, shall be served on active duty. That portion of the obligation shall be served at the completion of any additional ADO incurred for graduate professional education (GPE). Also subject to mutual agreement, the participant may fulfill the IRR Service period in the SELRES.

6.4.10. A Program member who is dropped for deficiency in conduct or studies, or for other reasons fails to fulfill his or her contractual agreement as a result of action not initiated by the Government, shall either:

6.4.10.1. Complete his or her incurred ADO in an appropriate military capacity, or

6.4.10.2. Reimburse the Government for all tuition and other

educational costs incurred, or a portion thereof, as determined by the Secretary of the Military Department. That requirement may be waived by the Secretary of the Military Department as being in the best interest of the Government.

6.4.11. The Secretary of the Military Department may relieve a member who is dropped from the Program of any military obligations when such action would be in the best interest of the Military Service. Such action shall not relieve the member of any military obligation imposed by any other law.

6.4.12. A member may not serve any part of a military obligation incurred by participation in this Program concurrently with any other military obligation.

6.4.13. A member of the Program who is relieved of his or her active duty obligation before the completion of that active duty obligation may be given, with or without the consent of the member, any of the following alternative obligations, as determined by the Secretary of the Military Department concerned:

6.4.13.1. A service obligation in another armed force for a period of time not less than the member's remaining active duty service obligation.

6.4.13.2. A service obligation in a component of the SELRES for a period not less than twice as long as the member's remaining active duty service obligation.

6.4.13.3. Repayment to the Secretary of Defense of a percentage of the total cost incurred by the Secretary, on behalf of the member, equal to the percentage of the member's total active duty service obligation being relieved, plus interest.

6.4.14. In addition to the alternative obligations specified in paragraph 6.4.11., above, if the member is relieved of an active duty obligation by reason of his or her separation because of a physical disability, the Secretary of the Military Department concerned may give the member a service obligation as a civilian employed as a health care professional in a facility of the uniformed services for a period of time equal to the member's remaining active duty service obligation.

6.4.15. To be eligible for the Program, a person must be a citizen of the United States and must be accepted for admission to, or enrolled in, an institution in a course of study or selected to receive specialized training, and meet the requirements for appointment as a commissioned officer.

6.4.16. Each Program participant must sign a contractual agreement with the

particular Service that shall stipulate the student shall do the following:

6.4.16.1. Complete the educational phase of the Program.

6.4.16.2. Accept an appropriate reappointment or designation in his or her Military Service, if tendered, based on the health profession, following satisfactory completion of the Program.

6.4.16.3. Participate in the intern program of his or her Military Service if selected for such participation.

6.4.16.4. Participate in the residency program of his or her Military Service, if selected, or deferred from active duty for the period required to complete civilian residency, if selected for such training.

6.4.16.5. Participate in prescribed military training.

6.4.16.6. Comply with all other requirements of the Program.

6.4.17. Pursuant to Section 2125 of 10 U.S.C. (reference (c)), members of the Program shall not be counted against any prescribed military strengths.

6.5. Health Professions Special Pays. Health professions special pays authorized by 37 U.S.C. (reference (f)) are additional to any other pay or allowance to which an officer is entitled. The amount of special pay to which an officer is entitled or authorized under any of such sections may not be included in computing the amount of any increase in pay authorized by reference (f) or in computing retired pay, separation pay, severance pay, or readjustment pay. Policy and procedures for the various special pays are prescribed in both statute and Departmental policy memorandum, as indicated below.

6.5.1. Medical Officers. Variable, additional, and board certified pay for medical officers shall be in accordance with Section 302(a) of reference (f). Multiyear special pay and incentive special pay for medical officers shall be in accordance with Sections 301(d) and 302(b) of reference (f), and the MSP/ISP Physician Pay Plan promulgated annually by ASD(HA).

6.5.2. Dental Officers. Variable, additional, and board certified pay for dental officers shall be in accordance with Section 302b of reference (f), as amended by the Fiscal Year 1997 National Defense Authorization Act (NDAA), and reference (i). The dental officer accession bonus shall be in accordance with Section 302g of

reference (f), and reference (j).

6.5.3. Nurse Officers. The nurse accession bonus and incentive special pay for certified registered nurse anesthetists shall be in accordance with Sections 302(d) and 302(e) of 37 U.S.C. (reference (f)), and reference (k). Nurse officers who are health care providers are eligible for nonphysician board certified pay, as prescribed by Section 302c of reference (f), as amended by the Fiscal Year 1996 NDAA, and reference (l).

6.5.4. Other Health Professionals. Special pay for optometrists and veterinarians shall be in accordance with Sections 302a and 303 of reference (f). Nonphysician health care provider board certified pay shall be in accordance with Section 302c of reference (f), and references (m), (n), (o), and (p).

6.6. Minimum Terms of Service and ADOs for Health Professions Officers

6.6.1. The minimum term of service for first-term personnel shall be two years following internship for physicians and three years for other health professions officers. The minimum term is not additive to ADOs incurred for education or training. Prior active duty and internship or any other initial qualifying training program may not count toward fulfilling the minimum term of service.

6.6.2. No portion of an ADO may be satisfied, as follows:

6.6.2.1. By prior military service.

6.6.2.2. During any period of long-term health or health-related education or training.

6.6.2.3. Concurrently with any other ADO or with an obligation incurred for DoD-subsidized pre-professional (undergraduate) education or training, or prior long-term health or health-related education or training, unless otherwise specified in this Instruction.

6.6.3. ADOs for GPE for physicians, dentists, and veterinarians (includes only residencies and fellowships) shall be, as follows:

6.6.3.1. In a Military Facility. A member shall incur an ADO of one-half year for each half year, or portion thereof, but the minimum ADO shall be not less than two years. That ADO may be served concurrently with other ADOs or with obligations incurred for DoD-sponsored pre-professional (undergraduate) education or

training or prior long-term health or health-related education or training.

6.6.3.2. In a Civilian Facility. A member subsidized by the Department of Defense during training in a civilian facility shall incur an ADO of one-half year for each half year, or portion thereof, but the minimum ADO shall not be less than two years. The Secretary of the Military Department may permit the last half of the incurred obligation to be satisfied by service in the SELRES for a time period equal to the remaining ADO.

6.6.4. ADOs for all other long-term health or health-related education and training programs shall be, as follows:

6.6.4.1. Participants of partly funded long-term undergraduate (leading to a baccalaureate degree), or partly funded nondegree education and training in a civilian institution (participants receive only pay and allowances from their Military Department) shall incur an ADO of two years for the first two years, or portion thereof. Participation for periods in excess of two years shall result in an additional ADO of one-half year for each additional half year, or portion thereof.

6.6.4.2. Participants of fully funded long-term undergraduate (leading to a baccalaureate degree), or fully funded nondegree education or training in a military or civilian institution (participants receive pay and allowances plus tuition and other expenses from their Military Department), shall incur an ADO of two years for the first year or portion thereof. Participation for periods in excess of one year shall result in an additional ADO of one-half year for each additional half year, or portion thereof.

6.6.4.3. Participants of long-term graduate (leading to a master's or doctoral degree) education and training in a military or civilian institution shall incur an ADO of three times the length of the education or training for the first year, or portion thereof, unless such degree is incidental to the completion of an established residency or fellowship program; i.e., aerospace medicine. Additional ADOs for participation in excess of one year shall be one-half year for each half year, or portion thereof.

6.6.5. ADO's for all health care provider special pays, which require a contractual agreement, shall be in accordance with 37 U.S.C. (reference (f)) and as prescribed by ASD(HA).

6.7. Health Manpower and Personnel Data System (HMPDS)

6.7.1. The Department of Defense shall maintain the HMPDS as a

centralized data base of healthcare personnel assigned, and positions and/or billets authorized. It is the primary DoD source for healthcare personnel data, and shall be used when providing data to organizations outside the individual Military Service. The HMPDS shall incorporate and compare data from other files maintained at the Defense Manpower Data Center (DMDC), Monterey.

6.7.2. The ASD(HA) shall promulgate an annual HMPDS policy memorandum announcing data submission requirements for the Military Services in preparation for annual validation. The Military Services shall perform an annual total force quality validation of the HMPDS.

6.7.3. The Director, DMDC, shall:

6.7.3.1. Establish and maintain an HMPDS data dictionary.

6.7.3.2. Review the submitted data as outlined by the data dictionary, and merge data from other sources, as appropriate.

6.7.3.3. Develop, produce, and distribute all periodic and special HMPDS reports.

6.7.3.4. Maintain an automated data retrieval program for authorized users.

6.7.3.5. Provide a copy of the data tape to the ASD(HA).

6.7.3.6. Coordinate with the Health Affairs Functional Data Administrator, as appropriate.

6.8. Authorized Strengths for Medical and Dental Officers. The authorized strengths of the Military Departments, as determined by the Secretary concerned, for medical and dental officers on active duty in grades below Brigadier General and Rear Admiral (lower half) shall be based on the needs of the Military Departments, as determined by the Secretary concerned, in accordance with policies prescribed by the ASD(HA).

7. INFORMATION REQUIREMENTS

The annual DoD internal reporting requirement identified in paragraph 6.7.2. has been assigned Report Control Symbol DD-P&R(A)1514, in accordance with DoD 8910.1-M

(reference (h)).

8. EFFECTIVE DATE

This Instruction is effective immediately.

Edward D. Martin M.D.

Edward D. Martin, M.D.
Acting Assistant Secretary of Defense
(Health Affairs)

Enclosures - 2

1. References
2. Definitions

E1. ENCLOSURE 1

REFERENCES, continued

- (e) [DoD Directive 6025.13](#), “Clinical Quality Management Program (CQMP) in the Military Health Services System (MHSS),” July 20, 1995
- (f) Title 37, United States Code
- (g) Title 31, United States Code
- (h) DoD 8910.1-M, “DoD Procedures for Management, of Information Requirements,” November 28, 1986, authorized by DoD Directive 8910.1, June 11, 1993
- (i) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Policy for Special Pay for Dental Officers,” October 28, 1996
- (j) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Policy for the Dental Officer Accession Bonus,” January 6, 1997
- (k) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Special Pays for Nurse Corps Officers,” December 19, 1994
- (l) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Policy for Implementation of Board Certified Pay for Nurse Corps Officers,” May 30, 1996
- (m) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Diplomate Pay for Psychologists and Board Certified Pay for Nonphysician Health Care Providers,” September 22, 1994
- (n) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Board Certification Pay for Non-Physician Health Care Providers,” September 6, 1995
- (o) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Nonphysician Health Care Provider Board Certified Pay for Navy Radiation Specialists and Air Force Health Physicists (Medical),” July 10, 1996
- (p) Assistant Secretary of Defense for Health Affairs Policy Memorandum, “Revised Policy for Nonphysician Health Care Providers Board Certified Pay,” March 12, 1997

E2. ENCLOSURE 2

DEFINITIONS

E2.1.1. Accredited Institution. A college, university, or institution, located in the United States or Puerto Rico, and accredited by an accrediting agency or association under the U.S. Secretary of Education. Included are those institutions that are in the process of seeking accreditation and currently have provisional or conditional accreditation, or candidacy status for accreditation, based solely on the newness of the institution. (Independent allied health science schools, not affiliated with a college or university and not accredited, are required to submit to the ASD(HA) appropriate documentation from the recognized body to demonstrate that the lack of accreditation is based on circumstances beyond the school's control and in no way implies a deficiency in the academic program.)

E2.1.2. Active Duty. Full-time duty in the active Military Service of the United States. It includes full-time training duty, annual training duty, and attendance, while in the active Military Service, at a school designated as a "Service school" by law or by the Secretary of the Military Department concerned.

E2.1.3. Active Duty List. A single list for the Army, the Navy, the Air Force, or the Marine Corps (required to be maintained under Section 620 of 10 U.S.C. (reference (c)) that contains the names of all officers of that Armed Force, other than the officers described in Section 641 of reference (c), who are serving on active duty.

E2.1.4. Active Status. The status of a Reserve commissioned officer, other than a commissioned warrant officer, who is not in the inactive Army National Guard or the Air National Guard, on an inactive status list, or in the Retired Reserve.

E2.1.5. Armed Forces Health Professions Scholarship Program (AFHPSP) Participant. A person enrolled in the F. Edward Hébert AFHPSP for a course of study and/or training.

E2.1.6. Board Certified. A Medical Corps officer is considered board certified either through: a) Certification by an American medical or osteopathic specialty examining board recognized by the American Board of Medical Specialties or the American Board for Osteopathic Specialists; or b) Board certification equivalency established for specialties unique to military medicine for which there is a formal postgraduate medical training program of not less than two years. Such equivalency is

determined through a formal process, including recommendation of a credentials review board and issuance of a certificate of board certification equivalency to successful candidates.

E2.1.7. Competitive Category. A separate promotion category established by the Secretary of a Military Department, under Section 621 of reference (c) for specific groups of officers whose specialized education, training, or experience, and often rather narrow utilization, make separate career management desirable.

E2.1.8. Course of Study. Education received at an accredited college, university, or institution in medicine, dentistry, or other designated health profession, leading, respectively, to a degree in such a profession. Health profession programs that experiment with modified curricula and permit the awarding of a degree in one of the designated health professions in a timeframe differing from the traditional four-year period are included in this definition.

E2.1.9. Creditable Service. Includes periods of internship and residency while not active duty, provided such training was completed successfully, or if such training was terminated or interrupted as the result of military operational requirements. Also includes all periods of active service in the Medical Corps of the Army or Navy, as an officer of the Air Force designated as a medical officer, or as medical officer of the Public Health Service. Internship or residency in a foreign medical facility that is not acceptable under the credentialing criteria of an American medical or osteopathic specialty examining board may not be included in the computation of creditable service.

E2.1.10. Critical Specialty. Specialty designated as a critically short specialty by the ASD(HA) for payment of Incentive Special Pay.

E2.1.11. Financial Assistance Program (FAP) Participant. A person enrolled in the FAP for a course of study and/or training.

E2.1.12. First Professional Degree. Professional degree such as medicine, osteopathy, dental, optometry, podiatry, veterinary, chiropractic, or pharmacy (Ph.D) for which the length of post high school education must be at least six years.

E2.1.13. First-Term Personnel. Except as noted in the Instruction, all health professions officers, from subsidized or nonsubsidized procurement programs, who are either entering active duty for the first time or are reentering active duty after legally having severed all prior Military Service relationships. Members of the SELRES, the

IRR, the Stand-By Reserve and the Retired Reserve who enter or reenter active duty are excluded from the first-term personnel category. Non-subsidized members include those who enter active duty by direct appointment, reentry (recall), and deferred commissioning programs.

E2.1.14. Fully Qualified. A physician who has completed a residency training program and/or is eligible for board certification in a medical specialty, if involved with independent patient care, and who is credentialed to practice medicine in that specialty by a credentialing authority.

E2.1.15. Graduate Professional Education (GPE). Internships, residencies, and fellowships in their respective professional fields, only for medical, dental, and veterinary officers. While internship (GPE-1) is included in the definition of GPE, it is obligation neutral; i.e., an ADO is neither incurred nor discharged during internship.

E2.1.16. Health Professions Officer. Refers to a Medical Corps officer (physician), a Dental Corps officer (dentist), a Nurse Corps officer (nurse), a Veterinary Corps officer (veterinarian), a BSC officer, an AMSC officer, or an MSC officer.

E2.1.17. Long-Term Health or Health-Related Education and Training. Full-time DoD-subsidized (military sponsored) health or health-related education or training in a military or civilian facility of one-half year (26 weeks) or more, including education or training received in preparation for commissioning as a health professions officer; i.e., medical school, and subsequent to commissioning; i.e., GPE.

E2.1.18. Medical or Osteopathic Internship. The first year of graduate medical education immediately following medical or osteopathic school, whether a formal internship or the first year of residency. For the purposes of variable special pay, this includes the period during which the active duty Medical Corps officer is waiting to begin internship training as well as the period in which an officer is waiting separation because of failure to complete that training.

E2.1.19. Medical or Osteopathic Residency. A formal program of medical or osteopathic specialty or subspecialty training.

E2.1.20. Initial Residency Training. That period of time in residency training before formal completion of an officer's first residency that qualifies the officer to take the specialty board, including (if a first residency) those programs designated under definition E2.1.6., above, and that qualifies the officer for board certification

equivalency.

E2.1.21. Original Appointment. Refers to an individual's most recent appointment in a Regular or Reserve component that is neither a promotion nor a demotion.

E2.1.22. Program Member. An appointed commissioned officer in a Reserve component of the Armed Forces who is enrolled in either the F. Edward Hébert AFHPSP or the FAP.

E2.1.23. Promotion Phase Point. The timing of promotions to a rank by the length of time an officer will have served (as calculated from the officer's date of rank) in the next lower rank at the time of promotion to the higher rank.

E2.1.24. Reserve Active Status List. A single list for the Army, the Navy, the Air Force, or the Marine Corps, required to be maintained under Section 14002 of 10 U.S.C. (reference (c)), that contains the names of all officers of that Armed Force, except warrant officers, who are in an active status in a Reserve component of the Army, the Navy, the Air Force, or the Marine Corps and are not on an active duty list.

E2.1.25. Specialized Training. Advanced training in a health professions specialty received in an accredited program that is beyond the basic education required for appointment as a commissioned officer with a designation as a "health professional" (allopathic or osteopathic residency or fellowship program, or oral maxillofacial surgery residency program).

E2.1.26. Specialty. Medical specialty for which there is an identifying specialty skill identifier number, a Naval officer billet classification number, or an Air Force specialty code number.

E2.1.27. Ready Reserve. The Ready Reserve consists of the SELRES, the IRR, and the Inactive National Guard. Some personnel are organized in units; others train as individuals. All are subject to recall in time of war or national emergency.

E2.1.28. Selected Reserve. The Selected Reserve is comprised of Reserve component personnel assigned to units, Full-Time Support personnel, and individuals who serve as Individual Mobilization Augmentees.

E2.1.29. Uniformed Services. Those are the Army, the Navy, the Air Force, the Marines Corps, the Coast Guard, the Commissioned Corps of the U.S. Public Health Service, and the Commissioned Corps of the National Oceanic and Atmospheric

Administration.