This publication implements DoDI 1322.24, DoDI 2310.08E, DoDI 6010.23, DoDD 6010.4, DoDI 6015.17, DoDI 6015.23, DoDI 6025.18, DoDI 6025.23, DoDD 6040.41, DoDI 6040.43, DoDI 6040.45, DoDI 6430.2, DoDI 6490.3, and DoDI 8260.04. It covers the primary functions of medical support: patient administration, medical resources and manpower, information systems, medical readiness, medical logistics and medical facility management. This publication applies to all military and civilian Air Force personnel, members of the Air Force Reserve Component (AFRC) and Air National Guard (ANG), and other individuals or organizations as required by binding agreement or obligation with the Department of the Air Force.

Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, Recommendation for Change of Publication; route AF Forms 847 from the field through appropriate functional’s chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, Management of Records, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at https://www.my.af.mil/afrims/afrims/afrims/rims.cfm.

SUMMARY OF CHANGES

This Publication has been rewritten in its entirety.

1. Background. Medical Support is necessary to sustain Air Force (AF) medical care around the world to maintain a fit and vital force, save life and limb, prevent undue suffering, and preserve military strength during contingencies. By efficiently applying medical support, the AF can offer medical care at a reasonable cost while improving quality and access. As much as
possible, the Air Force Medical Service (AFMS) must also care for authorized beneficiaries who are not on active duty.

2. **Policy.** The Air Force shall:

   2.1. Develop procedures for inpatient and outpatient services including establishing and maintaining an accurate, well-documented health record for every patient.

   2.2. Establish processes for medical planning, programming, budgeting and execution (PPBE) to responsibly allocate medical resources and manpower.

   2.3. Develop information systems that help healthcare managers obtain information needed to manage medical operations.

   2.4. Ensure military medical units are ready to respond to contingencies.

   2.5. Provide responsive, economical, and efficient medical logistics support, which includes the availability of peacetime and war reserve materiel (WRM).

   2.6. Provide technology and management to make sure the physical facility operates safely and efficiently in delivering quality health care.

   2.7. Efficiently use resources to deliver healthcare that meets or exceeds federal or state requirements.

   2.8. Establish, monitor and report internal controls to measure AFMS compliance.

3. **Responsibilities.**

   3.1. The Surgeon General of the Air Force (AF/SG) develops, coordinates, and executes medical policy and essential procedural guidance to manage the Air Force Medical Service. AF/SG also ensures AFMS’s readiness, evaluates resource use and policy, and offers the Air Force’s medical views on policies or legislation to the Department of Defense.

   3.2. Major Command (MAJCOM) and ANG interpret and enforce this policy, guide commanders of the medical treatment facilities (MTF) in carrying it out, collect and report data to higher headquarters and develop and maintain standards for medical readiness within their respective components.

MICHAEL B. DONLEY
Secretary of the Air Force
Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References
DoDI 1322.24, Medical Readiness Training, 6 October 2011
DoDI 2310.08E, Medical Program Support for Detainee Operation, 6 June 2006
DoDI 6010.23, Department of Defense and Department of Veterans Affairs Health Care Resource Sharing Program, 23 January 2012
DoDD 6010.04, Healthcare for Uniformed Services Members and Beneficiaries, IC Jan 15, 2010, 15 March 2007
DoDI 6015.17, Planning and Acquisition of Military Health Facilities, 13 January 2012
DoDI 6015.23, Delivery of Healthcare at Military Treatment Facilities: Foreign Service Care; Third Party Collection; Beneficiary Counseling and Assistance Coordinators, (BCAs), 30 October 2002
DoDI 6025.18, Privacy of Individually Identifiable Health Information in DoD Health Care Programs, 2 December 2009
DoDI 6025.23, Health Care Eligibility Under the Secretarial Designee Program and Related Special Authorities, 16 September 2011
DoDD 6040.41, Medical Records Retention and Coding at Military Treatment Facilities, 13 April 2004
DoDI 6040.43, Custody and Control of Outpatient Medical Records, 10 June 2004
DoDI 6040.45, Service Treatment Record (STR) and Non-Service Treatment Record (NSTR) Life Cycle Management, 28 October 2010
DoDI 6430.2, Defense Medical Material Program, 17 August 2011
DoDI 6490.3, Deployment Health, 11 August 2006
DoDI 8260.04, Military Health System (MHS) Support to DoD Strategic Analysis, 18 December 2009
AFMAN 33-363, Management of Records, 1 March 2008

Adopted Forms
AF Form 847, Recommendation for Change of Publication

Abbreviations and Acronyms
AFMAN—Air Force Manual
AFMS—Air Force Medical Service
AFPD—Air Force Policy Directive
AFRC—Air Force Reserve Command
AFRIMS—Air Force Records Information Management System
ANG—Air National Guard
MAJCOM—Major Command
MTF—Military Treatment Facility
PPBE—Programming, Planning, Budgeting, and Execution
RDS—Records Disposition System
WRM—War Reserve Materiel