BY ORDER OF THE SECRETARY OF THE AIR FORCE

AIR FORCE POLICY DIRECTIVE 41-2

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Health Services

MEDICAL SUPPORT



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This publication implements Department of Defense Instruction 1322.24, Medical Readiness Training, Department of Defense Instruction 2310.08E, Medical Program Support for Detainee Operations, Department of Defense Directive 6010.04, Healthcare for Uniformed Services Members and Beneficiaries, Department of Defense Instruction 6010.23, Department of Defense and Department of Veterans Affairs Health Care Resource Sharing Program, Department of Defense Instruction 6015.17, Planning and Acquisition of Military Health Facilities, Department of Defense Instruction 6015.23, Foreign Military Personnel Care and Uniform Business Offices in Military Treatment Facilities, Department of Defense Instruction 6025.18, Privacy of Individually Identifiable Health Information in DoD Health Care Programs, Department of Defense Instruction 6025.23, Health Care Eligibility Under the Secretarial Designee Program and Related Special Authorities, Department of Defense Instruction 6040.45, DoD Health Record Life Cycle Management, Department of Defense Instruction 6430.02, Defense Medical Materiel Program, Department of Defense Instruction 6490.03, Deployment Health, and Department of Defense Instruction 8260.04, Military Health System Support to DoD Strategic Analysis. This Air Force Policy Directive provides policy on the primary functions of medical support: TRICARE operations and patient administration, medical resources and manpower, information systems, medical readiness, medical logistics, Department of Defense/Veterans Affairs resource sharing and other Department of Defense/Veterans Affairs patient care initiatives, medical facility management and access to care. This publication applies to all military and civilian Air Force personnel, members of the Air Force Reserve Command and Air National Guard, 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 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 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System, and Records Disposition Schedule.

SUMMARY OF CHANGES

This Publication has been revised to reflect the most up-to-date information available.

1. Background. Medical Support is necessary to sustain Air Force 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 Air Force can offer medical care at a reasonable cost while improving quality and access. As much as possible, the Air Force Medical Service 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 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.

2.6. Provide sufficient technology and management to assure safe and efficient physical facility operations in delivering quality health care.

2.7. Efficiently use resources to deliver safe, quality healthcare for all patients seen at Air Force facilities.

2.8. Establish, monitor and report internal controls to measure Air Force Medical Service compliance.

3. Roles and Responsibilities.

3.1. The Air Force Surgeon General serves as the principal advisor to the Secretary of the Air Force and the Chief of Staff of the Air Force on all health and medical matters of the Air Force, including strategic planning and policy development relating to such matters. The Air Force Surgeon General also serves as the chief medical advisor of the Air Force to the Director of the Defense Health Agency on matters pertaining to military health readiness requirements and safety of members of the Air Force.

3.2. The Air Force Surgeon General has authority to commit resources worldwide for the Air Force Medical Service, to make decisions affecting the delivery of medical services, and to develop plans, programs and procedures to support worldwide medical service missions. The Air Force Surgeon General exercises direction, guidance and technical management of an integrated health care delivery system serving beneficiaries at Air Force military treatment facilities worldwide.

3.3. MAJCOMs and the Air National Guard interpret and enforce this policy, guide commanders of the medical treatment facilities in carrying it out, collect and report data to higher headquarters and develop and maintain standards for medical readiness within their respective components.

HEATHER WILSON 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

DoDD 6010.04, Healthcare for Uniformed Services Members and Beneficiaries, 17 August 2015

DoDI 6010.23, Department of Defense and Department of Veterans Affairs (VA) Health Care Resource Sharing Program, January 23, 2012

DoDI 6015.17, Military Health System (MHS) Facility Portfolio Management, 13 January 2012

DoDI 6015.23, Foreign Military Personnel Care and Uniform Business Offices in Military Treatment Facilities (MTFs), 23 February 2015

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 (SECDES) Program and Related Special Authorities, Incorporating Change 1, Effective October 2, 2013

DoDI 6040.45, *DoD Health Record Life Cycle Management*, Incorporating Change 1, April 11, 2017

DoDI 6430.02, Defense Medical Logistics Program, 23 August 2017

DoDI 6490.03, Deployment Health, 11 August 2006

DoDI 8260.04, Military Health System (MHS) Support for DoD Strategic Analysis, 14 May 2015

AFMAN 33-363, Management of Records, 1 March 2008

AFI 33-360, Publications and Forms Management, 1 December 2015

Prescribed Forms

None

Adopted Forms

AF Form 847, Recommendation for Change of Publication

Abbreviations and Acronyms

None