

**BY ORDER OF THE SECRETARY
OF THE AIR FORCE**



**DEPARTMENT OF DEFENSE
INSTRUCTION 6000.13**

**DEPARTMENT OF AIR FORCE
INSTRUCTION 41-110**

23 DECEMBER 2020

Health Services

**MEDICAL HEALTH CARE PROFESSIONS
SCHOLARSHIP PROGRAMS**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This supplement implements and extends the instructions of Department of Defense (DoD) Instruction 6000.13, Accession and Retention Policies, Programs, and Incentives for Military Health Professions Officers (HPOs). This supplement describes Air Force responsibilities under the instruction and establishes the Air Force requirement to support the program. This supplement applies to uniformed members of the Regular Air Force (RegAF), the Air Force Reserve (USAFR) and when on Title 10 orders for 365 days or more, the Air National Guard. This publication does not apply to the United States Space Force. The applicable System of Record Notice F036 AFPC F, Health Education Records, and System of Record Notice F036 are available at: <https://dpcl.d.defense.gov/privacy/SORNS.aspx>. Records, and System of Record Notice F036 AFPC J, Air Force Reserve Application, apply. Ensure all records created as a result of processes prescribed in this publication are maintained in accordance with AFI 33-322, Records Management and Information Governance Program, and disposed of in accordance with the Air Force Records Disposition Schedule located in the Air Force Records Information Management System. 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 the appropriate functional chain of command. This publication may be

supplemented at any level, but all direct supplements must be routed to the OPR of this publication for coordination prior to certification and approval.

The authorities to waive wing/unit level requirements in this publication are identified with a Tier (“T-0, T-1, T-2, T-3”) number following the compliance statement. See DAFI 33-360, Publications and Forms Management, for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the requestor’s commander for non-tiered compliance items.

SUMMARY OF CHANGES

This document has been substantially revised and should be completely reviewed. This publication has been updated in accordance with the Secretary of the Air Force Publication Reduction Directive. AFI 41-110 and 41-109 have been converted to [DODI6000.13_DAFI41-110](#). Updates have been made to the table of contents, references, incorporates AFI 10-302, Reserve Component Health Professions Stipend Program, and additional information has been added pertaining to the Reserve Component Health Professions Loan Repayment Program (RCHPLRP).



Department of Defense **INSTRUCTION**

NUMBER 6000.13

December 30, 2015

Incorporating Change 1, Effective May 3, 2016

USD(P&R)

SUBJECT: Accession and Retention Policies, Programs, and Incentives for Military Health Professions Officers (HPOs)

References: See Enclosure 1

1. **PURPOSE.** This instruction reissues DoD Instruction (DoDI) 6000.13 (Reference (a)) in accordance with the authority in DoD Directive (DoDD) 5124.02 (Reference (b)) to establish policy, assign responsibilities, and prescribe procedures for: **DoD text appears in regular font and Air Force text appears in bold font indicated by (AF) in accordance with DAFI 33-360.**

a. Military Department payment of incentives and bonuses to HPOs pursuant to section 335 of Title 37, United States Code (U.S.C.) (Reference (c)).

b. Incremental transition from current special pays and bonuses for HPOs pursuant to sections 301d, 301e, 302, 302a, 302b, 302c, 302c-1, 302d through 302l, 303, and 303a of Reference (c) to the incentives and bonuses authorized by section 335 of Reference (c).

c. Deferral of retirement for Regular commissioned HPOs and retention of HPOs in an active status in the Reserve Component (RC) pursuant to sections 1251 and 14703 of Title 10, U.S.C. (Reference (d)).

d. Incremental transition from the current procedures for stipend or loan repayment for RC HPOs in DoDD 1205.20 (Reference (e)) and DoDI 1205.21 (Reference (f)) to the procedures in this instruction.

2. **APPLICABILITY.** This instruction applies to OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (referred to collectively in this instruction as the "DoD Components").

3. POLICY. It is DoD policy that:

a. Health professions manpower, personnel, and compensation programs are established to provide the DoD Components with sufficient military health professions personnel.

b. The authorized strengths of the Military Departments for HPOs on active duty (AD) or in an active status in the RC in grades below brigadier general and rear admiral (lower half) will be based on the needs of the Military Departments. **(T-0)**. Those strengths will be determined by the Secretary of the Military Department concerned, in coordination with the Assistant Secretary of Defense for Health Affairs (ASD(HA)) and the Assistant Secretary of Defense for Manpower and Reserve Affairs (ASD(M&RA)). **(T-0)**.

4. RESPONSIBILITIES. See Enclosure 2.

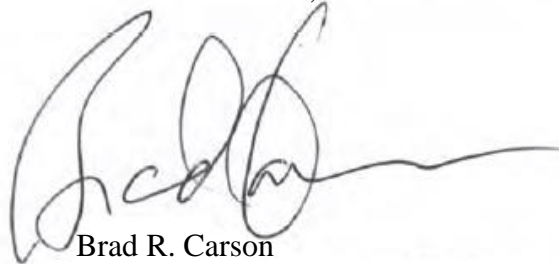
5. PROCEDURES. See Enclosure 3.

6. INFORMATION COLLECTION REQUIREMENTS. The Health Manpower and Personnel Data System (HMPDS) referred to in paragraphs 1d and 3a of Enclosure 2 of this instruction has been assigned report control symbol DD-HA(A)2024 in accordance with the procedures in Volume 1 of DoD Manual 8910.01 (Reference (g)).

7. RELEASABILITY. **Cleared for public release**. This instruction is available on the Internet from the DoD Issuances Website at <http://www.dtic.mil/whs/directives>.

8. SUMMARY OF CHANGE 1. The changes to this issuance are administrative and update organizational titles and references for accuracy.

9. EFFECTIVE DATE. This instruction is effective December 30, 2015.



Brad R. Carson
Acting Under Secretary of Defense for
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DOROTHY A. HOGG
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ENCLOSURE 1

REFERENCES

- (a) DoD Instruction 6000.13, "Medical Manpower and Personnel," June 30, 1997 (hereby cancelled)
- (b) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June 23, 2008
- (c) Title 37, United States Code
- (d) Title 10, United States Code
- (e) DoD Directive 1205.20, "Reserve Component Incentive Programs," January 8, 1996 (hereby cancelled)
- (f) DoD Instruction 1205.21, "Reserve Component Incentive Programs Procedures," September 20, 1999
- (g) DoD Manual 8910.01, Volume 1, "DoD Information Collections Manual: Procedures for DoD Internal Information Collections," June 30, 2014, as amended
- (h) DoD Directive 5136.01, "Assistant Secretary of Defense for Health Affairs (ASD(HA))," September 30, 2013, as amended
- (i) DoD Directive 6000.12E, "Health Service Support," January 6, 2011, as amended
- (j) DoD Directive 5400.11, "DoD Privacy Program," October 29, 2014
- (k) DoD 5400.11-R, "Department of Defense Privacy Program," May 14, 2007
- (l) DoD 7000.14-R, Volume 7A, "Department of Defense Financial Management Regulation: Military Pay Policy: Active Duty and Reserve Pay," current edition
- (m) DoD Instruction 1300.04, "Inter-Service Transfer of Commissioned Officers," December 27, 2006, as amended
- (n) DoD Instruction 1205.05, "Transfer of Service Members Between Reserve and Regular Components of the Military Services," March 30, 2012
- (o) DoD Instruction 1304.25, "Fulfilling the Military Service Obligation (MSO)," October 31, 2013
- (p) DoD Manual 6025.13, "Medical Quality Assurance (MQA) and Clinical Quality Management in the Military Health System (MHS)," October 29, 2013
- (q) Title 31, United States Code
- (r) DoD Instruction 1215.06, "Uniform Reserve, Training, and Retirement Categories for the Reserve Components," March 11, 2014, as amended
- (s) Title 38, United States Code
- (t) DoD Instruction 1332.18, "Disability Evaluation System (DES)," August 5, 2014, as amended
- (u) DoD Instruction 1215.13, "Reserve Component (RC) Member Participation Policy," May 5, 2015
- (v) DoD Directive 1200.7, "Screening the Ready Reserve," November 18, 1999
- (w) Title 20, United States Code
- (x) Title 42, United States Code
- (aa) (AF) DAFI 33-360, "Publications and Forms Management", December 1, 2015**
- (bb) (AF) AFMAN 36-2032, "Military Recruiting and Accessions," September 27, 2019**
- (cc) (AF) AFI 36-2107, "Active Duty Service Commitments (ADSC)" October 22, 2018**

- (dd) (AF) AFMAN 36-2604, "Service Dates and Dates of Rank," December 28, 2018**
- (ee) (AF) AFI 36-3206, "Administrative Discharge Procedures for Commissioned Officers," June 9, 2001**
- (ff) (AF) AFI 36-3207, "Separating Commissioned Officers," July 9, 2004**
- (gg) (AF) AFI 36-3208, "Administrative Separation of Airmen," July 9, 2004**
- (hh) (AF) AFI 36-3209, "Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members," April 14, 2005**
- (ii) (AF) AFI 44-119, "Medical Quality Operations," August 16, 2011**
- (jj) (AF) AFI 48-123, "Medical Examinations and Standards," November 5, 2013**
- (kk) (AF) AFMAN 33-322, "Records Management and Information Governance Program," March 23, 2020**
- (ll) (AF) "Air Force Officer Classification Directory," April 30, 2020**
- (mm) (AF) AFROTCI 36-2011, "Cadet Operations," June 22, 2018**
- (nn) (AF) DoDI 5105.45, "Uniformed Services University of the Health Sciences (USU)," May 30, 2019**
- (oo) (AF) DoDI 6130.03V1, "Medical Standards for Military Service: Appointment, Enlistment, or Induction" May 6, 2018**
- (pp) (AF) Executive Order 13478, "Amendments to Executive Order 9397 Relating To Federal Agency Use of Social Security Numbers," November 18, 2008**
- (qq) (AF) "The Joint Travel Regulations," December 1, 2020**
- (rr) (AF) Privacy Act (5 U.S.C. § 522a, "Records maintained on individuals)**
- (ss) (AF) Principal Deputy USD(P&R) Memorandum, Repayment of Unearned Portions of Bonuses, Special Pay, and Educational Benefits or Stipends, February 6, 2009**
- (tt) (AF) AFI 36-3203, "Service Retirements," September 18, 2015**
- (uu) (AF) DoDM 5200.02_AFMAN 16-1405, Air Force Personnel Security Program, August 1, 2018**
- (vv) (AF) 37 U.S.C. § 371, Relationship to other incentives and pays**
- (xx) (AF) 37 U.S.C. § 335, Special Bonus and incentive pay authorities for officers in health professions**
- (yy) (AF) 37 U.S.C. § 373, Repayment of unearned portion of bonus, incentive pay, or similar benefit, and termination of remaining payments, when conditions of payment not met**
- (zz) (AF) Title 37 U.S.C. Chapter 5, SPECIAL AND INCENTIVE PAYS**
- (aaa) (AF) 37 U.S.C. § 204, Entitlement**
- (bbb) (AF) 37 U.S.C. § 206, Reserves; members of the National Guard: inactive-duty training**
- (ccc) (AF) 10 U.S.C. § 1102, Confidentiality of medical quality assurance records: qualified immunity for participants**
- (ddd) (AF) 10 U.S.C. § 2005, Advanced education assistance: active duty agreement; reimbursement requirements**
- (eee) (AF) 10 U.S.C. § 634, Retirement for years of service: regular colonels and Navy captains**
- (fff) (AF) 10 U.S.C. § 633, Retirement for years of service: regular lieutenant colonels and commanders**
- (ggg) (AF) AFI 36-2907, "Adverse Administrative Actions," May 22, 2020**

(AF) Prescribed Forms

AF IMT 494, “Academic/Clinical Evaluation Report”

AF Form 1056, “Air Force Reserve Officer Training Corps (AFROTC) Contract”

(AF) Adopted Forms

AF Form 847, “Recommendation for Change of Publication”

Standard Form 312, “Classified Information Nondisclosure Agreement”

AF Form 475, “Education/Training Report”

AF Form 77, “Supplemental Evaluation Sheet”

ENCLOSURE 2

RESPONSIBILITIES

1. ASD(HA). Under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness (USD(P&R)), and consistent with DoDD 5136.01 (Reference (h)) and DoDD 6000.12E (Reference (i)), the ASD(HA):

a. Provides guidance to the Military Departments as necessary and monitors their compliance with the provisions of this instruction and References (c) and (d).

b. In coordination with the ASD(M&RA), publishes a health professions special and incentive (HPS&I) pay plan, including updates to ensure timely implementation of special pay changes by the Military Departments and education and training program guidance for officers in the health professions. The HPS&I pay plan will include a list of critically short wartime skills pursuant to References (c) and (d). **(T-0)**.

c. Establishes the allocation of the F. Edward Hebert Armed Forces Health Professions Scholarship Program (AFHPSP) and Financial Assistance Program (FAP) scholarships.

d. Obtains data annually from the Military Departments to validate the HMPDS.

2. ASD(M&RA). Under the authority, direction, and control of the USD(P&R), the ASD(M&RA):

a. Monitors compliance, provides oversight, and proposes revisions affecting the HPOs of the Military Services.

b. Coordinates with the ASD(HA) to publish the HPS&I pay plan.

3. DIRECTOR, DEPARTMENT OF DEFENSE HUMAN RESOURCES ACTIVITY.

Under the authority, direction, and control of the USD(P&R), the Director, Department of Defense Human Resources Activity, through the Director, Defense Manpower Data Center (DMDC):

a. Establishes and maintains HMPDS as a centralized database of assigned health care personnel and authorized positions or billets. The HMPDS will be the primary DoD source for health care personnel data and will be used when providing data to organizations outside an individual Military Department. **(T-0)**.

b. Incorporates and compares data from DMDC files with the HMPDS.

- c. Establishes and maintains an HMPDS data dictionary, reviews the submitted data as outlined by the data dictionary, and merges data from other sources, as appropriate.
- d. Develops, produces, and maintains a web-based automated retrieval capability for all periodic and special HMPDS reports for authorized users.
- e. Develops, produces, and delivers ad hoc HMPDS reports from internal information requirements as requested.
- f. Coordinates, as appropriate, with the ASD(HA) for management of HMPDS processes.
- g. Ensures that the collection, use, maintenance, and distribution of personally identifiable information in HMPDS is in accordance with DoD Directive 5400.11 (Reference (j)) and DoD 5400.11-R (Reference (k)).

4. DIRECTOR, DEFENSE FINANCE AND ACCOUNTING SERVICE (DFAS). Under the authority, direction, and control of the Under Secretary of Defense (Comptroller)/Chief Financial Officer of the Department of Defense, the Director, DFAS:

- a. Conducts pay operations consistent with statute in support of the programs in this instruction.
- b. Provides recoupment financial data to the requesting Service within 30 days of receiving such a request.
- c. Provides for modifications and adaptations to the pay system that are consistent with changes in DoD policy and the HPS&I pay plan within 6 months of such changes.

5. SECRETARIES OF THE MILITARY DEPARTMENTS. The Secretaries of the Military Departments:

- a. Administer and maintain implementation guidance for using the special bonus and incentive pay (IP) authorities and the education and training authorities in this instruction.
- b. Provide a written implementation plan to the ASD(HA) and provide guidance to the DFAS within 120 calendar days of the date of this instruction.
- c. Provide the ASD(HA) a copy of the guidance implementing future policy changes and any changes to the basic plan within 120 calendar days of such changes.
- d. Perform an annual total force quality validation of the HMPDS.

e. Use DMDC HMPDS data when providing data to organizations outside the Military Department.

f. Program funds to use the incentives in this instruction to provide the number and quality of HPOs needed in their respective Military Departments.

g. Provide the Director, DFAS, with the information to initiate recoupment actions for debts incurred by Service members due to failure to complete service obligations (SO) or maintain eligibility requirements for the programs in this instruction. Repayment of unearned bonuses, special pays, or educational benefits or stipends will be administered in accordance with section 373 of Reference (c) and chapter 2 of Volume 7A of DoD 7000.14-R (Reference (l)). **(T-0)**.

h. Develop Military Department-specific guidance and procedures to ensure the programs in this instruction are conducted in accordance with legislative requirements and the policies established here.

i. Based on critical needs and anticipated shortages, identify the health professions skills that will be included in incentive and pay programs. **(T-0)**.

j. Establish procedures to review and approve requests for entry grade credit waivers and ensure that waiver authority is consistently and equitably applied.

k. After obtaining the approval of the ASD(HA), provide additional payments if an accredited institution has increased total enrollment solely for accepting members of the AFHPSP, pursuant to section 2127(d) of Reference (d). These additional payments will cover the portion of the increased costs of the additional enrollment that the institution's normal tuition and fees do not cover. **(T-0)**.

l. Establish a process to review, analyze, and ascertain qualified loans for repayment in accordance with the health professions loan repayment programs (HPLRP).

m. (Added) (AF) Air Force Specific Responsibilities:

(1) (Added) (AF) The roles and responsibilities of the involved agencies and members or applicants vary depending on the program (AFHPSP, FAP, ADHPLRP). Where noted, the roles and responsibilities assigned to Air Force Institute of Technology, Civilian Institution Medical education division (AFIT/CIM) specifically means the AFHPSP/FAP program manager or ADHPLRP program manager respectively. Consult individual chapters to determine requirements and responsibilities for each program. Roles and responsibilities fall to the updated office symbol or name if reorganization occurs.

(a) (Added) (AF) Roles and responsibilities assigned to Air Force Personnel Center, Non-Line Officer Management Division (AFPC/DP2N) may refer to a specific corps, Graduate Medical Education (GME), Medical Standards, or Force Management

Branch. Roles and responsibilities fall to the updated office symbol or name if reorganization occurs.

(b) (Added) (AF) Air Force Institute of Technology (AFIT/CIM) has program oversight of the AFHPSP, FAP and ADHPLRP programs. The Air Force Personnel Center (AFPC/DP2N) has program oversight of the Uniformed Services University (USU) as it pertains to this instruction.

(c) (Added) (AF) AFHPSP and FAP. AFIT/CIM roles and responsibilities are outlined in Section 9.

(d) (Added) (AF) The Uniformed Services University of the Health Sciences. AFPC/DP2N and USU roles and responsibilities are outlined in Section 6.

(2) (Added) (AF) ADHPLRP. Roles and responsibilities outlined in Section 9.

(a) (Added) (AF) Air Force Personnel Center (AFPC/DP2SSM) is the program manager for execution of special pays. AFPC/DP2SSM is responsible for maintaining references for HPOs to utilize in order to determine eligibility (to include annual pay plans, contracts, frequently asked questions, webinar slides, etc.), verifying contract eligibility, processing contracts, and confirming contract payment. AFPC/DP2SSM should forward processed special pay documents to be stored or loaded in officer's personnel record for future reference. ARPC/DPAM Medical Incentives Branch is the processing center for Health Professions Officers assigned to the Reserve Pay File. Reserve special pay details may be found in the FY Air Force Reserve (USAFR) Health Professions Special & Incentive (HPS&I) Pay Plan.

(b) (Added) (AF) AF/SG1/8 is responsible for monitoring special pay policy, coordinating annual pay plans and contract development, providing eligibility clarification, as well as implementing and advertising AF/SG guidance. AF/SG1/8 should work closely with AFPC/DP2SSM to aid in the management of the Medical Special Pay Program.

(c) (Added) (AF) Each Health Professions Officer must monitor for special eligibility, route contract(s) for timely endorsement, submit contract(s) to AFPC/DP2SSM (specific details outlined in Chapter 3 of this instruction), and verify receipt of payment(s). (T-3). Multiple resources (pay plans, webinar slides, etc.) are available to HPOs on myPers at https://mypers.af.mil/app/answers/detail/a_id/29350/p/9/c/447 to clarify eligibility criteria, rates, etc.

(d) (Added) (AF) Authorized endorsers must abide by procedures outlined in Section 12 of this publication. (T-1). Additional responsibilities include making termination and withhold recommendations (outlined in Section 12) and mentoring HPOs on their special pay eligibility. Authorized endorsers or Medical Treatment

Facilities (MTFs) are not required to submit documentation to higher headquarters levels, except in the cases of withhold recommendations or termination.

ENCLOSURE 3

PROCEDURES

1. ENTRY GRADE CREDIT. A prospective HPO's entry grade and rank within grade will be determined by the number of years of entry grade credit awarded on original appointment, designation, or assignment as an HPO. **(T-0)**. This section does not apply to the original appointment of officers transferring between Services or between components of a Service pursuant to DoDI 1300.04 (Reference (m)) or DoDI 1205.05 (Reference (n)), except as provided in those instructions.

a. Administration

(1) The entry grade credit will equal the sum of constructive service credit and prior commissioned service credit for service other than as a commissioned warrant officer up to the maximum credit allowed in paragraph 1e of this enclosure. **(T-0)**.

(2) A period of time will be counted only once when computing entry grade credit, and qualifying periods of less than 1 full year will be proportionately credited to the nearest day, except where noted otherwise. **(T-0)**. Credit will be awarded in accordance with this instruction and pursuant to sections 533 and 12207 of Reference (d). **(T-0)**.

(3) Prior commissioned service credit will be calculated first. **(T-0)**.

b. Prior Commissioned Service Credit. Credit for prior service as a commissioned officer, other than as a commissioned warrant officer, will be granted to recognize previous commissioned experience, while maintaining cognizance of the level of professional knowledge, skill, and experience required at specific grade levels of each health profession. **(T-0)**. Credit will be awarded equitably and consistently. **(T-0)**.

(1) Pursuant to section 533 of Reference (d), a person receiving an original appointment to serve as a Regular commissioned HPO in any Military Service will be awarded:

(a) Credit on a day-for-day basis for any active commissioned service (AD and full-time National Guard duty) as an HPO in the professional specialty in which the person is being appointed. **(T-0)**. The service may have been performed in any Military Service, the National Oceanic and Atmospheric Administration, or the United States Public Health Service before the new appointment.

(b) One-half day of credit for each day of active commissioned service (AD and full-time National Guard duty) as a commissioned officer but not in the profession in which the person is being appointed. **(T-0)**. The service may have been performed in any Military Service, the National Oceanic and Atmospheric Administration, or the United States Public Health Service before the new appointment. The Secretary concerned may grant an exception to this provision and grant day-for-day credit on a case-by-case basis.

(c) Credit on a day-for-day basis for any commissioned service on AD while participating in an educational program leading to appointment in a specialty in which constructive credit is awarded, regardless of whether the service is in the professional specialty in which the person is being appointed. **(T-0)**.

(2) Pursuant to section 12207 of Reference (d), a person receiving an original appointment to serve as a Reserve commissioned HPO in any Military Service will be awarded: **(T-0)**.

(a) Credit on a day-for-day basis for any commissioned service as a Regular HPO, or as a Reserve HPO in an active status, in the professional specialty in which the person is being appointed. The service may have been performed in any Military Service, the National Oceanic and Atmospheric Administration, or the United States Public Health Service before the new appointment.

(b) One-half day credit for each day of commissioned service as a Regular commissioned officer, or as a Reserve commissioned officer in an active status, but not in the professional specialty in which the person is being appointed. The service may have been performed in any Military Service, the National Oceanic and Atmospheric Administration, or the United States Public Health Service. The Secretary concerned may grant an exception to this provision and grant day-for-day credit on a case-by-case basis.

(c) Credit on a day-for-day basis for any commissioned service on AD as a Regular officer, or as a Reserve officer in an active status, while participating in an educational program leading to appointment in a specialty in which constructive credit is awarded, regardless of whether the service is in the professional specialty in which the person is being appointed.

c. Constructive Service Credit. This credit is awarded to a person who begins commissioned service after obtaining the additional education, training, or experience required for appointment, designation, or assignment as an HPO. The designation will be to the same 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. **(T-0)**. Constructive service credit will only be used to determine initial grade, rank in grade, and service in grade for promotion eligibility. **(T-0)**.

(1) Except as described in paragraph 1c(2) of this enclosure, periods of time spent on AD or in an active status as a commissioned officer may not be counted when computing constructive service credit.

(2) The Secretary concerned may grant constructive service credit to an officer on AD or in an active status who completes an advanced education program that would qualify for credit under paragraph 1c(3) of this enclosure in less than the number of years normally required to complete such a program. The amount of constructive service credit that may be awarded is the difference between the number of years normally required to complete the education program and the number of years in which the program is completed by the officer.

(3) One year of constructive service credit will be granted for each year of graduate level education toward the first professional degree completed when that degree is required for appointment in the professional specialty being entered. **(T-0)**. The maximum number of years of constructive service credit that may be awarded under this provision is the number of years of graduate level education required by a majority of institutions that award degrees in that professional field.

(a) The Secretary concerned may direct that doctors of medicine (M.D.), doctors of osteopathic medicine (D.O.), doctors of dental surgery (D.D.S.) and doctors of dental medicine (D.M.D.), doctors of veterinary medicine (D.V.M. or V.M.D.), or other recipients of advanced health professional degrees that typically require 4 years to complete, be given sufficient constructive service credit to allow appointment to the grade of O-3 in a Regular or Reserve Component.

(b) Credit for master's and doctorate degrees in a health profession other than those listed in paragraph 1c(3)(a) of this enclosure may be awarded based on actual full-time equivalent education of up to 2 years for a master's degree and up to 4 years for a doctorate degree. 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 both a master's and a doctorate degree may not exceed the maximum allowed for a doctorate.

(4) Credit will be awarded for any period of advanced education in a health profession (other than medicine and dentistry) beyond the baccalaureate degree level that exceeds the basic education required for the appointment, if such advanced education will be directly used by the Military Department concerned. **(T-0)**.

(5) Additional day-for-day credit will be granted for the successful completion of post-baccalaureate internship, residency, fellowship, or equivalent graduate, medical, dental, or other formal health professions training required by the Military Department concerned. **(T-0)**. This credit may not exceed 1 year unless such graduate-level training or experience in excess of 1 year is required for certification in a specialty required by the Military Department concerned, in which case the additional day-for-day credit will be granted for the period required for certification. **(T-0)**.

(6) Credit of one-half year for each year of experience, to a maximum of 3 years, may be granted for experience in a health profession.

(a) Credit may only be given for experience in a health profession other than medicine or dentistry if such experience will be directly used by the Military Department concerned. **(T-0)**.

(b) Credit may only be given for experience as a physician or dentist if the person receiving the credit will be appointed or designated as a medical or dental officer. **(T-0)**.

(c) Creditable experience cannot predate the receipt of any licensure, registration, or certification required by the Military Department concerned. This means experience in a volunteer or student status will not be credited. **(T-0)**.

(7) The Secretary concerned may grant additional credit in unusual cases based on special experience in a particular field. The amount of credit will be 1 year for each year of special experience. **(T-0)**. Maximum credit based on paragraph 1c(6) of this enclosure must be granted before granting this special experience credit. **(T-0)**.

(8) If the ASD(HA) and the ASD(M&RA) determine that the number of HPOs in a specialty in grades below O-4, serving in an active status in an RC of the Army, the Navy, or the Air Force, is critically below the number needed by the RC in such specialty and in such grades, the ASD(HA) may authorize the Secretary concerned to credit any person receiving an original appointment as an HPO for service in such specialty with a period of constructive service credit (in addition to any amount credited under paragraph 1c(1) through (7) of this enclosure) as will result in the person being appointed to the grade of O-3. **(T-0)**.

d. Service Academy Graduates. Graduates of the United States Military Academy, the United States Naval Academy, the United States Air Force Academy, the United States Coast Guard Academy, and the United States Merchant Marine Academy may not receive credit as described in paragraphs 1b or 1c of this enclosure for service performed or education, training, or experience obtained before graduation from the respective academy.

e. Maximum Entry Grade Credit. The total entry grade credit granted will be no more than that required for an original appointment to the grade of O-4, unless a waiver is granted in accordance with paragraph 1f of this enclosure. **(T-0)**.

f. Waivers

(1) The Secretary concerned may waive the maximum entry grade credit limitation of paragraph 1e of this enclosure and grant credit beyond that required for an original appointment in the grade of O-4 when:

(a) An individual has earned more grade credit than required for appointment to the grade of O-4.

(b) The Secretary concerned determines that the individual receiving the waiver possesses the overall ability to perform effectively at a higher grade level and appointment to that higher grade will not be detrimental to the efficiency and effectiveness of the individual's military assignment. **(T-0)**.

(2) Waiver requests involving the award of more constructive service credit than is needed for a Regular appointment to the grade of O-4 may only be approved for medical and dental officers, but waiver requests involving the award of more constructive service credit than is needed for a Reserve appointment to the grade of O-4 may be approved for any HPO.

2. ENTRY GRADE

a. A person granted prior commissioned service credit or constructive service credit and placed on the AD list or the Reserve active status list of a Military Department may have an entry grade determined by comparing the entry grade credit established in accordance with section 1 of this enclosure to the currently established promotion phase points of the Military Department and officer category concerned.

(1) 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 will be used to adjust the date of the entry grade. **(T-0)**.

(2) The maximum entry grade for a person receiving an original appointment as a Regular medical or dental officer is O-6.

(3) The maximum entry grade for a person being appointed as a Reserve officer is O-4 unless the person was formerly a commissioned officer of a Military Service or such an appointment is recommended by a board of officers convened by the Secretary concerned.

b. Officers transferring between Services or between components of a Service will be appointed in the same grade and with the same date of rank as the grade and date of rank held by the officer before the new appointment, except as provided in paragraph 2c of this enclosure, Reference (m), or Reference (n). **(T-0)**.

c. A Reserve officer (other than a warrant officer) who receives an original appointment as a AD officer (other than warrant officer) in the Army, Navy, or Air Force will:

(1) In the case of an officer on the AD list immediately before that appointment as a AD officer, be appointed in the same grade and with the same date of rank as the grade and date of rank held by the officer on the AD list immediately before the appointment. **(T-0)**.

(2) In the case of an officer not on the AD list immediately before that appointment as a regular officer, be appointed in the same grade and with the same date of rank as the grade and date of rank which the officer would have held had the officer been serving on the AD list on the date of the appointment as a regular officer. **(T-0)**.

d. A former regular or Reserve commissioned officer may, if otherwise qualified, be appointed or reappointed as a Reserve officer. If so appointed, the person may be:

(1) Placed on the Reserve active status list of an RC 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 AD or in an active status; and

(2) Credited, for determining date of rank pursuant to section 741(d) of Reference (d), with service in grade equal to that held by that person when discharged or separated.

e. When a Reserve commissioned officer is transferred from an inactive status to an active status and placed on the AD list or the Reserve active status list, the Secretary concerned 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 (d). The Secretary concerned does not have the authority to change the date of rank of a Reserve commissioned officer who has served continuously in the Selected Reserve (SELRES) since the officer's last promotion or is placed on the AD list while on a promotion list, pursuant to section 14317(b) of Reference (d).

3. QUALIFICATIONS FOR ORIGINAL APPOINTMENT OF MEDICAL AND DENTAL OFFICERS AND PROVISIONS RELATED TO AGE

a. Only persons who are qualified doctors of medicine, osteopathy, or dentistry may receive original appointments in the Regular Army or Regular Navy in the Medical Corps or Dental Corps or original appointments in the Regular Air Force with a view to designation of an officer as a medical or dental officer.

b. To be eligible for an original appointment as a medical officer, a D.O. must:

(1) Be a graduate of a college of osteopathy whose graduates are eligible to be licensed to practice medicine or surgery in a majority of the States;

(2) Be licensed to practice medicine, surgery, or osteopathy in a State or in the District of Columbia;

(3) Under regulations prescribed by the Secretary of Defense, have completed a number of years of osteopathic and pre-osteopathic education equal to the number of years of medical and pre-medical education prescribed for persons entering recognized schools of medicine who become doctors of medicine and who would be qualified for an original appointment in the grade for which that person is being considered for appointment; and

(4) Have such other qualifications as the Secretary of the Military Department concerned prescribes after considering the recommendations, if any, of the Surgeon General of the Military Service concerned. **(T-0)**.

c. Under section 532(d) of Reference (d), the requirement of section 532(a)(2) of Reference (d) that a person receiving an original appointment as a Regular commissioned officer must be able to complete 20 years of active commissioned service before his or her 62nd birthday does not apply to:

(1) A person receiving an appointment to serve as a medical or dental officer. **(T-0)**.

(2) A commissioned officer appointed to serve in a medical skill other than as a medical officer or dental officer. **(T-0)**.

d. Under section 12201(d) of Reference (d), the maximum age limit that a Military Department may establish for original appointment as a Reserve commissioned officer serving in a health profession that has been designated by the Secretary concerned as a specialty critically needed in wartime may not be less than 47 years of age.

e. Pursuant to section 1251 of Reference (d), the Secretary concerned may defer the retirement of an Active Component medical officer, dental officer, nurse, or other HPO if the HPO is in a category of officers described in paragraph c(2) of this section, beyond age 62, without the HPO's consent, if during the period of the deferment the officer:

- (1) Will be primarily providing patient care or performing other clinical duties; or
- (2) Is in a category of officers designated by the Secretary concerned as consisting of officers whose duties consist primarily of:
 - (a) Providing health care;
 - (b) Performing other clinical care; or
 - (c) Performing health care-related administrative duties. **(T-0)**.

f. A deferment under paragraph 3e of this enclosure may not extend beyond the first day of the month following the month in which an officer becomes 68 years of age unless the Secretary concerned determines that extension of the deferment is necessary for the needs of the Military Department concerned. **(T-0)**. Such an extension shall be made on a case-by-case basis and shall be for such period as the Secretary considers appropriate.

g. Section 14703 of Reference (d) permits the Secretary concerned, with the officer's consent, to retain any of the following RC HPOs (except for those referred to in sections 14503, 14504, 14505, and 14506 of Reference (d)) in an active status until the date on which the officer becomes 68 years of age:

(1) An Army Reserve or Army National Guard of the United States officer assigned to the Medical Corps, the Dental Corps, the Veterinary Corps, the Medical Service Corps (if the officer has been designated as an allied health officer or biomedical sciences officer in that Corps), the Optometry Section of the Medical Service Corps, the Army Nurse Corps, or the Army Medical Specialist Corps;

(2) A Navy Reserve officer appointed in the Medical Corps, Dental Corps, or Nurse Corps, or appointed in the Medical Service Corps and designated to perform as a veterinarian, optometrist, podiatrist, allied health officer, or biomedical sciences officer; and

(3) An Air Force Reserve or Air National Guard of the United States officer designated as a medical officer, dental officer, Air Force nurse, Medical Service Corps officer, or biomedical sciences officer.

4. MILITARY SO (MSO), MINIMUM TERM OF ACTIVE SERVICE (MTAS), SO, AND AD OBLIGATION (ADO) FOR HPOs SERVING ON AD

a. MSO. The MSO that Service members incur will be in accordance with section 651 of Reference (d) and DoDI 1304.25 (Reference (o)). **(T-0)**.

b. MTAS. The MTAS for first-term AD officers will be 2 years following internship for physicians and 3 years for other officers in a health profession. **(T-0)**. The minimum term is not added to an ADO incurred for military sponsored education or training. Prior AD and internships or any other initial qualifying training program will not count toward fulfilling the MTAS. **(T-0)**.

c. SO. An SO is incurred for sponsored education or training and receipt of special pays and bonuses. The amount of time to be served is determined by the requirements of the individual program.

d. ADO

(1) Incurring an ADO. Rules for incurring an ADO associated with individual programs and incentives are contained in the specific sections in this instruction that cover those programs and incentives.

(2) Satisfying an ADO. ADOs will be fulfilled in the order in which they are incurred unless otherwise specified. **(T-0)**. No portion of an ADO may be satisfied:

(a) By prior military service (active or Reserve);

(b) During any period without possession of a current, valid unrestricted license or approved waiver if a health care provider (HCP). An approved waiver must be consistent with DoD Manual 6025.13 (Reference (p));

(c) During any period of long-term health or health-related education or training;

(d) Concurrently with any other ADO or with an obligation incurred for DoD-subsidized undergraduate education or training unless otherwise specified by law or DoD policy;

(e) Concurrently with any other ADO for prior long-term health or health-related education or training, unless otherwise specified by law or DoD policy; or

(f) Concurrently with any other ADO for incentive or special pay as described in section 8, 9, or 10 of this enclosure, unless otherwise specified by law or DoD policy.

(3) Graduate Professional Education (GPE) ADO. A GPE ADO is incurred as a result of attending military-sponsored GPE. HPOs training in specialties in their respective fields will incur an ADO: **(T-0)**.

(a) Sponsored in a Military Training Program. A Service member attending sponsored GPE in a military or affiliated program will incur an ADO of one-half year for each half year or portion thereof; however, the minimum ADO is 2 years. **(T-0)**. That ADO will be served concurrently with other ADOs incurred for DoD-sponsored undergraduate education or training, or prior long-term health or health-related education or training. **(T-0)**. The GPE ADO will be served consecutively with other ADOs incurred for additional GPE training. **(T-0)**.

(b) In a Civilian Training Program. A Service member fully or partially funded by DoD during training in a civilian program will incur an ADO of 26 weeks for each half year or portion thereof; however, the minimum ADO is 2 years. **(T-0)**. This 2-year minimum ADO for training in a civilian program is served in addition to any previous ADO for any and all other government-sponsored training, including but not limited to undergraduate education or training and prior long-term health or health-related education or training and any additional GPE training. This ADO will be served consecutively to any ADO for government-sponsored training that occurs while on AD. **(T-0)**.

(4) Long-Term Health or Health-Related Education and Training ADO. For long-term health or health-related education and training programs:

(a) Participants of partly funded long-term baccalaureate degree education or partly funded non-degree education and training in a military or civilian institution (i.e., participants receive only pay and allowances from their Military Department) will incur an ADO of 2 years for the first 2 years or portion thereof. **(T-0)**. Participation for periods of more than 2 years will result in an additional ADO of 26 weeks for each additional half year or portion thereof. An ADO incurred for non-degree producing education or training may be served concurrently with an ADO incurred for the AFHPSP. **(T-0)**.

(b) Participants of fully funded long-term baccalaureate degree education or fully-funded non-degree education or training in a military or civilian institution (participants receive pay and allowances plus tuition and other expenses from their Military Department) will incur an ADO of 2 years for the first year or portion thereof. **(T-0)**. Participation for periods in excess of 1 year will result in an additional ADO of one-half year for each additional half year or portion thereof. **(T-0)**. An ADO incurred for non-degree producing education or training may be served concurrently with an ADO incurred for the AFHPSP.

(c) Participants of military sponsored long-term graduate (leading to a master's or doctoral degree) education and training in a military or civilian institution will 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, e.g., aerospace medicine. **(T-0)**. An additional ADO of one-half year for each half year or portion thereof of participation in such education or training in excess of 1 year will be incurred. **(T-0)**.

An ADO incurred for participation in a military clinical psychology internship program may be served concurrently with an ADO incurred for the AFHPSP.

(5) Dental Advanced Education in General Dentistry and General Practice Residency. Participation in these two skill enhancement programs incurs no additional ADO for the officer. Time served in these programs does not fulfill any existing ADO.

5. AFHPSP AND FAP

a. Establishment. The Secretaries of the Military Departments may establish and maintain health professions scholarship and financial assistance programs for their respective Military Departments. The programs will consist of courses of study and specialized training in designated health professions, with obligatory periods of military training. **(T-0)**. **(Added) (AF) The Secretary of the Air Force (SECAF) has established and maintains a health professions scholarship and financial assistance program for the Air Force Medical Service.**

b. Administration

(1) Unless otherwise stated, the term “Program” used in this section refers to the AFHPSP and the FAP. The Program will be administered pursuant to sections 2120 through 2128 of Reference (d) and section 3324 of Title 31, U.S.C. (Reference (q)). **(T-0)**. The Secretaries of the Military Departments will appoint a Service program manager for this Program. **(T-0)**.

(2) The Secretaries of the Military Departments will allocate a portion of the total number of scholarships to participants pursuing a degree at the masters or doctorate level in social work, clinical psychology, psychiatry, or other disciplines that contribute to mental health care programs of their respective Military Department. **(T-0)**.

(3) The number of persons who may participate in the Program in each health profession will be prescribed in the HPS&I pay plan. **(T-0)**. At any time, the total number of program participants may not exceed 6,300, and no more than 300 may be participating in health professions that assist in providing mental health care to members of the Military Services.

(4) Pursuant to DoDI 1215.06 (Reference (r)) and section 2125 of Reference (d), Program members will be assigned to the Individual Ready Reserve (IRR) and will not be counted against any prescribed military strength. **(T-0)**.

(5) (Added) (AF) Programs:

(a) (Added) (AF) AFHPSP. Applicants interested in the AFHPSP must obtain necessary qualifying degree required to meet Air Force Officer Classification Directory requirements for the Medical Corps (MC), Dental Corps (DC), Biomedical Sciences Corps (BSC), and Nurse Corps (NC), Air Force Specialty Codes (AFSC). (T-0)

(b) (Added) (AF) Only civilian physicians and dentists enrolled in a specialized accredited training program beyond the basic Doctor of Medicine, Doctor of Osteopathy, Doctor of Dental Surgery, or Doctor of Medical Dentistry degree may apply for FAP.

1. (Added) (AF) MC FAP applicants must be enrolled in a Graduate Medical Education program accredited by the Accreditation Council for Graduate Medical Education. (T-0).

2. (Added) (AF) DC FAP applicants must be enrolled in a specialized dental training program accredited by the American Dental Association - Commission on Dental Accreditation as listed on the American Dental Association website (<https://www.ada.org/en>). (T-0).

c. Eligibility. To be eligible for the Program, an individual must:

(1) Be a U. S. citizen without dual citizenship. **(T-0).**

(2) Be accepted for admission to, or enrolled full-time in, an accredited educational institution, located in the United States or Puerto Rico, in a designated course of study leading to a degree related to the health professions, as prescribed in the HPS&I pay plan, or a specialized training program, as defined in section 2120(4) of Reference (d). **(T-0).**

(3) Meet the requirements for appointment as a commissioned officer. **(T-0).**

(a) (Added) (AF) Comply with Air Force licensure and administrative requirements in accordance with DHA-PM 6025.13, *Medical Quality Assurance and Clinical Quality Management in the Military Health System*, and AFI 44-119, *Medical Quality Operations* (T-0).

(4) Sign a written agreement as prescribed in paragraph 5g(3) of this enclosure. **(T-0).**

(5) Not be obligated for future service to any health institution, community, or other entity other than DoD.

(6) Not be in default of any court-ordered child support payments or federal debt and be free of any court judgment in favor of the United States creating a lien against the individual's property arising from a civil or criminal proceeding.

(7) Not be serving or have incurred an MSO from prior participation in the Program, the Uniformed Services University of the Health Sciences, the AD HPLRP (ADHPLRP), or government-sponsored GPE, unless granted a waiver by the Secretary concerned.

(8) Have completed the incurred MSO for Reserve Officers' Training Corps participation or from attendance at a U.S. Military Service academy before seeking FAP entry, unless granted a waiver by the Secretary concerned.

(9) (Added) (AF) Meet medical standards for commissioning in accordance with DODI 6130.03V1, *Medical Standards for Military Service: Appointment, Enlistment, or Induction*, and AFI 48-123, *Medical Examinations and Standards* into the program. (T-0) Members must meet retention standards outlined in AFI 48-123 to remain in the program and obtain Extended Active Duty (EAD) orders. (T-0).

d. Military Status and Participation Requirements

(1) AFHPSP participants will be commissioned as an O-1 in the Reserve of the sponsoring Military Department. **(T-0)**. FAP participants will be commissioned at a grade commensurate with their educational level, as determined by appointment pursuant to section 12207 of Reference (d) and this instruction. **(T-0)**.

(2) Program participants will obtain and maintain the appropriate security clearance required. **(T-0)**.

(a) (Added) (AF) Security Clearance will be in accordance with DoDM 5200.02_AFMAN 16-1405, Air Force Personnel Security Program. Participants must sign a Standard Form 312 (SF312), Classified Information Nondisclosure Agreement and be briefed or re-briefed on security requirements. (T-0). Individuals need not sign another SF 312 if verification can be made that a NDA was previously signed.

(3) Program participants will 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. **(T-0)**.

(4) AFHPSP participants will perform a period of 45 days AD for training (ADT) during each year of participation, with full pay and allowances as an O-1, regardless of previous grade held, except as prescribed in section 2121(c) (2) of Reference (d). **(T-0)**.

(5) FAP participants will serve on AD in a grade commensurate with their educational level, as determined by appointment pursuant to section 12207 of Reference (d) and this instruction, with full pay and allowances of that grade for a period of 14 days during each year of participation. **(T-0)**.

(6) Annual ADT for Program participants should be performed at a military installation, facility, command, or organization.

(a) (Added) (AF) Air Force Institute of Technology, Civilian Institution Medical Education Division (AFIT/CIM) directs when and where program participants are placed on annual ADT.

(b) (Added) (AF) Annual ADT may be performed at a program participant's school or home when an educational program precludes performance at a military institution, facility, command, or organization and, or it is deemed to be in the best interest of the United States Air Force.

(7) Program participants are not authorized to drill for pay or receive pay for additional periods of ADT other than those associated with the Program. **(Added) (AF) Additional travel days are authorized if or when a program member is unable to return home from ADT, due to unforeseen circumstances (e.g., flight delays, weather related travel cancellations, strikes), within the 45 day window in accordance with the Joint Travel Regulation.**

(8) Program participants will participate in military and professional training and instruction as prescribed by the Secretary concerned. **(T-0). (Added) (AF) Air Force Institute of Technology, Civilian Institution Medical Education Division (AFIT/CIM) arranges course attendance at earliest opportunity based on program participant's academic schedule and has authority to waive attendance if or when necessary.**

(9) Upon completion of their academic curriculum, Program participants will be appointed as military officers in accordance with current appointment instructions. **(T-0).**

(10) Credit for military service while a Program participant will be determined in accordance with section 2126 of Reference (d):

(a) Service Not Creditable. Except as provided in paragraph 5d(10)(b) of this enclosure, service performed while a Program participant will not be counted:

1. In determining eligibility for retirement other than by reason of a physical disability incurred while on AD as a Program participant; or

2. In computing years of service creditable pursuant to section 205 of Reference (c). **(T-0).**

3. **(Added) (AF) Creditable and not creditable service is in accordance with AFMAN 36-2032, Military Recruiting and Accessions and AFMAN 36-2604, Service Dates and Dates of Rank.**

(b) Service Creditable for Certain Purposes. The Secretary of the Military Department concerned may authorize service performed by a participant in the AFHPSP to be counted in accordance with paragraph 5d(10)(c) of this enclosure if the member:

1. Completes the course of study.

2. Completes the ADO imposed pursuant to section 2123 of Reference (d).

3. Possesses a specialty designated by the Secretary of the Military Department concerned as critically needed in wartime.

4. **(Added) (AF) Completes the ADO in accordance with AFMAN 36-2032.**

(c) Application of Creditable Service. Service credited to an AFHPSP participant pursuant to paragraph 5d(10)(b) of this enclosure:

1. Counts only for the award of retirement points for computation of years of service in accordance with section 12732 of Reference (d) and for computation of retired pay in accordance with section 12733 of Reference (d).

2. Will be credited at a rate of 50 retirement points for each year of participation in a course of study. **(T-0)**. The points will be credited to the participant for one of the years of that participation at the end of each year after the completion of the course of study that the participant serves in the SELRES and is credited pursuant to section 12732 (a)(2) of Reference (d) with at least 50 points. **(T-0)**. The points credited for the participation will be recorded in the participant's records as having been earned in the year of the participation in the course of study. **(T-0)**.

3. Will not be counted for more than 4 years of participation in a course of study. **(T-0)**.

4. May be credited to a member of the SELRES who is in an active status while pursuing a course of study only for purposes of sections 12732 (a) and 12733 (3) of Reference (d). **(T-0)**.

5. Will not be credited retroactively, or be the basis of an increase in pay or allowances pursuant to Reference (c). **(T-0)**.

e. Stipend, Grant, and Accession Bonus (AB) Payment

(1) Section 2121 of Reference (d) entitles Program participants to receive a monthly stipend except when serving on AD. Additionally, those in specialized training under the FAP will be paid an annual grant, in accordance with section 2127 of Reference (d). **(T-0)**. The amount of the stipend and grant will be in accordance with the HPS&I pay plan. **(T-0)**.

(2) Payment of the stipend and grant will start on the later of: the date of execution of the oath of office, the date of execution of the Program agreement, or the date of commencement of the academic curriculum. **(T-0)**.

(3) Payment of the stipend and grant will continue until the date of graduation or the completion of specialized training, unless the Program participant is suspended or disenrolled from the designated course of study or specialized training or fails to comply with terms of the Program agreement, Service policy, or regulation. **(T-0)**.

(4) Payment of the stipend and grant will be terminated on the date of completion of the academic program or specialized training if it precedes the date of graduation by more than 45 days. **(T-0)**. In this case, Program participants will remain in an IRR status without pay until they graduate and report to AD. **(T-0)**.

(5) Payment of the stipend is on an academic year basis, not on a calendar year basis.

(6) Proration of the stipend and grant based upon length of ADO is not authorized.

(7) Payment of an AB in a lump sum is authorized pursuant to section 2128 of Reference (d) and in accordance with the HPS&I pay plan. An AB is in addition to the stipend and grant payments authorized in paragraph 5e of this enclosure. The Secretary concerned may choose not to use this authority. **(Added) (AF) Due to limitations of Reserve pay systems, disbursement of the AB is made in several installments totaling the AB amount.**

(8) Taxation of the stipend, grant, or AB will be determined by the governing federal laws and policies. **(T-0).**

f. Expenses

(1) Payment of educational expenses incurred by a Program participant is authorized, including tuition, fees, books, laboratory expenses, microscope rental, computer rental, laboratory and clinical coats, and precious and semiprecious metals (for dental students). Such payments are limited to educational expenses normally incurred by students at the institution and in the health profession concerned who are not Program participants.

(a) Payment of educational expenses is on an academic year basis, not on a calendar year basis. Proration of expenses based upon length of ADO is not authorized.

(b) Payment for health and disability insurance is authorized when required by the educational institution. Such payments will be limited to those required for students at the institution who are pursuing the same course of study or specialized training but are not Program participants. **(T-0).**

(c) The Secretary concerned may issue expensive items, such as microscopes, as government equipment on a hand-receipt basis.

(d) Reimbursement is not authorized for room and board or noneducational expenses, such as yearbooks, school newspapers, parking fees, and tickets for sports activities.

(e) (Added) (AF) The AF may pay required educational expenses, including tuition, fees, textbooks, small medical equipment, and laboratory expenses.

(f) (Added) (AF) The AF determines and limits reimbursement for other educational expenses to those costs deemed necessary as evidenced by students not enrolled in the program but are attending the same institution and obtaining the same degree.

(2) The sponsoring Military Department will determine whether payment of authorized expenses will be made under a contract with an accredited civilian educational institution or to the Program participant. Payments to educational institutions may be made without regard to section 3324 of Reference (q). **(T-0).**

(a) (Added) (AF) The student's academic institution may be paid for authorized normal tuition, fees, laboratory expenses, computer rental, laboratory and clinical coats, precious and semiprecious metals (for dental students), and payments for educational services as authorized by AFIT/CIM, if the expenses were incurred for the current academic session.

(b) (Added) (AF) Students may rent microscopes and other non-expendable equipment at AF expense and in accordance with Air Force Institute of Technology (AFIT) guidelines.

(3) Participants who enter the Program during an academic or training year are eligible for reimbursement, on a prorated basis, of all normally incurred and authorized tuition, fees, books, and other educational expenses if they are for use during the current academic or training year. Those expenses incurred and items purchased before the current academic or training year but still in use or required to be used in the future may be approved for reimbursement.

(a) (Added) (AF) These expenses incurred and items purchased up to 60 calendar days prior to the eligibility date, but still in use or required to be used in the future, may be approved for reimbursement.

(b) (Added) (AF) Expenses incurred and items purchased during a non-academic year (i.e., prior to HPSP sponsorship), are not eligible for reimbursement regardless of future use.

(4) (Added) (AF) AFIT/CIM reimburses national board examinations fees for exams considered graduation requirements of the institution. Exception: AFIT/CIM will pay national board examinations fees (Parts I and II) for Doctor of Medicine, Doctor of Osteopathy, Doctor of Dental Surgery, or Doctor of Medical Dentistry regardless of the requirement as long as examination was taken during period of program sponsorship. (T-1).

g. Program Participant Requirements

(1) Contractual MSO. Each Program participant will incur a contractual 8-year MSO, a portion of which will be an ADO that must be served before any reserve obligation can be repaid. **(T-0)**.

(a) The remaining MSO beyond the contractual ADO and any additional ADO for GPE will be served in the IRR, unless the Secretary concerned and the Program participant mutually agree that the rest of the MSO will be served on AD or in the SELRES. **(T-0)**. The remaining mutually agreed upon service in the AD or SELRES to complete the initial MSO may be incentivized under sections 10 through 12 of this enclosure.

(b) Time spent on AD in military GPE may be credited toward satisfying the RC MSO. Time spent on AD in military GPE and time spent on AD beyond the incurred ADO may be credited toward fulfilling the Reserve MSO.

(2) Incurring and Satisfying an ADO

(a) Each AFHPSP participant incurs a minimum ADO of 2 years, or one half year for each half year or portion thereof of AFHPSP sponsorship, whichever is greater.

(b) Each FAP participant incurs a minimum ADO of 2 years or one half year for each half year or portion thereof of FAP sponsorship, whichever is greater.

(c) Time spent in military internship or residency training or other similar health related education and training programs as identified in the HPS&I pay plan will not satisfy an AFHPSP or FAP ADO. **(T-0)**. A participant may not serve any part of a military obligation incurred by participation in the AFHPSP or FAP concurrently with any other military obligation, unless specified otherwise. Regardless of the length of participation in the Program, a Service member who accepts an AB as prescribed in section 2128 of Reference (d) and paragraph 5e(7) of this enclosure will incur a 4-year ADO, which may be served concurrently with the AFHPSP or FAP ADO. **(T-0)**.

(d) Upon graduation from a Military Service academy and upon subsequent participation in the AFHPSP and FAP, the participant will fulfill any unserved obligation incurred pursuant to section 4348(a), 6959(a), or 9348(a) of Reference (d) on AD, regardless of the type of appointment held, upon completion of and in addition to any MSO incurred pursuant to section 2123 of Reference (d) and this section. **(T-0)**.

(e) A participant who is dropped from the Program for deficiency in conduct or studies, or for other reasons, may be required to perform AD in a military capacity appropriate for the participant's level of education and training in accordance with the ADO imposed by paragraph 5g(2) of this enclosure.

(f) Relief of a participant from an ADO and alternative obligations in the event of such a relief are addressed in section 7 of this enclosure.

(3) Contractual Agreement. Each Program participant must sign a contractual agreement with the Military Service concerned that states the participant will:

(a) Serve on AD for the time period described in this enclosure and complete any remaining MSO. **(T-0)**.

(b) Complete the educational phase of the Program, including appropriate steps or levels of the United States Medical Licensing Examination/Comprehensive Medical Licensing Examination for physicians, or other applicable exams specified in the service agreement. **(T-0)**.

(c) Meet other state and Service licensure requirements and Service administrative requirements. **(T-0)**.

(d) Accept an appropriate appointment or designation if tendered, based on his or her health profession, following satisfactory completion of the educational phase of the Program. **(T-0)**.

(e) Participate in the intern program of the Military Service concerned if selected for such participation. **(T-0)**. If not selected for a military internship, the participant must apply for an accredited civilian internship. **(T-0)**.

(f) Participate in the residency program of the Military Service concerned if selected for such participation, or be released from AD for the period required to complete a civilian residency, if selected for such training. **(T-0)**.

(g) Participate in prescribed military training because of a sincere motivation and dedication to a career in the Uniformed Services. **(T-0)**.

(h) Comply with all other requirements of the Program. **(T-0)**.

(i) **(Added) (AF) Participate in active duty tours as directed by AFIT/CIM. (T-0). The following prescribed active duty tours may not be a comprehensive list as requirements change annually:**

1. (Added) (AF) Campus Tour: An officer performs an active duty for training (ADT) campus tour at their institution for a period of 45 days for AFHPSP or 14 days for FAP participants when a member's schedule does not permit participation in a military training program, or the member has not attended Officer Training School.

2. (Added) (AF) Officer Training School (OTS): A military training program for direct accession commissioned Air Force and Space Force officers. Students commissioned through Air Force Reserve Officer Training Corps (AFROTC) or United States Air Force Academy (USAFA) and prior or current commissioned officers are exempt from attending OTS. Refer to AFMAN 36-2032, for additional guidance.

3. (Added) (AF) United States Air Force School of Aerospace Medicine (USAFSAM) Air Force Operational Medicine (AFOM) Course: An orientation course for students enrolled in medicine or osteopathic programs and who have completed their first year of medical school. Commissioning through USAFA, AFROTC, or OTS is mandatory prior to attending the USAFSAM AFOM course.

4. (Added) (AF) Air Force Clerkship: An ADT to provide MD and DO students an opportunity to train at AF facilities to gain exposure to the AF residency programs prior to making their final choice for residency applications. Students may also receive school credit for clerkships performed in AF hospitals.

5. (Added) (AF) AFIT/CIM directs any remaining portion of the ADT for OTS, USAFSAM courses, or Air Force Clerkships less than 45 days.

6. (Added) (AF) Send all Air Force Clerkship or ADT evaluations to AFPC/DP2N, 550 C Street West, Suite 25, JBSA-Randolph, TX 78150-4729. (T-3).

a. (Added) (AF) OTS students are evaluated on an AF Form 475, Education/Training Report, which is prepared by Holm Center for Air Force Officer Accessions and Civilian Development in accordance with AFMAN 36-2032.

b. (Added) (AF) Each MD or DO student receives a written evaluation after completing an ADT at an AF installation. Reports evaluate students for graduate medical education (GME), graduate dental education or future assignments after completing AFHPSP.

c. (Added) (AF) USAFSAM students receive an AF Form 77, Supplemental Evaluation Sheet.

d. (Added) (AF) AFHPSP clerkships are evaluated on an AF IMT 494, Academic/Clinical Evaluation Report. The medical facility AFHPSP clerkship director completes the evaluation.

7. (Added) (AF) Serve any remaining Active Duty Service Commitment (ADSC) upon completing AFHPSP and residency training in accordance with AFI 36-2107, *Active Duty Service Commitments*.

8. (Added) (AF) AFHPSP participants are prohibited from:

a. (Added) (AF) Release of AF obligation solely because they are willing and able to refund the cost of their education.

b. (Added) (AF) Incurring any medical practice obligations other than those that the AF requires.

9. (Added) (AF) Medical and Osteopathic student participant additional requirements for GME or combined medical education degrees, participants should understand:

a. (Added) (AF) GME is performed on RegAF or Reserve status at the discretion of AFPC.

b. (Added) (AF) The AF guarantees only 1 year of GME. Whether individuals participate in RegAF GME, deferred GME, or civilian sponsored GME is at the discretion of the AF, with consideration for the individuals' preferences.

10. (Added) (AF) Dental student additional requirement: dental students must apply for an AF-sponsored Advanced Education in General Dentistry (AEGD-1) program. (T-3). If selected for an AF-sponsored AEGD-1 program, applicants may be required to attend. Program location will be at the discretion of AFPC. (T-0).

11. (Added) (AF) The AF does not approve combined education degree programs except under limited and unusual circumstances where the combined program is in the best interest of the AF. Inquiries should be submitted through AFIT/CIMJ to AFPC/DP2N, as appropriate.

a. (Added) (AF) The AF does not guarantee assignments that allow individuals to use the expertise of the additional degree.

12. (Added) (AF) Program participants are required to notify AFIT/CIM of changes to health status during program participation in accordance with program contract. (T-1).

13. (Added) (AF) Complete required health assessment paperwork as directed by AFIT/CIM or AFPC/DP2N. (T-1).

h. (Added) (AF) Application Process:

(1) (Added) (AF) Civilians should contact their local AF Health Professions Recruiter, Air Force Recruiting Service (AFRS), Officer Accessions Branch (AFRS/RSOC), 550 D Street West, Suite 1, JBSA-Randolph, TX 78150-4527 (<https://www.airforce.com/careers/specialty-careers/healthcare/overview>).

(2) (Added) (AF) Air Force Reserve Officer Training Corps (AFROTC) cadets may apply for the Pre-Health Professions Program (Pre-HPP) according to Air Force Reserve Officer Training Corps Instruction 36-2011, *Cadet Operations*.

(3) (Added) (AF) RegAF members, AFROTC educational delay cadets, AFROTC cadets not designated as Pre-HPP, and designated USAFA cadets must contact AFPC/DP2N (550 C Street West, Suite 25, JBSA-Randolph, TX 78150-4727) for further application information, and if applicable, obtain a sample letter of approval for the member or commander use to apply to the program. (T-3).

(a) (Added) (AF) RegAF members who meet the eligibility criteria for AFHPSP must submit a letter of approval to apply to the program, endorsed by their immediate commander and wing, installation commander, or equivalent, before sending their request to the Retirements and Separations Branch, AFPC/DP2SSR, 550 C Street West, Suite 3, JBSA-Randolph, TX 78150-4727. (T-3).

(b) (Added) (AF) AFROTC cadets, who are not designated as Pre-HPP cadets, must submit their request for approval to apply to the program endorsed by their commander to Line Officer Accession Branch, AFPC/DP2LT, via email. (T-3).

(4) (Added) (AF) USAFA cadets identified by USAFA may enter the AFHPSP provided they are accepted to the advanced degree program prior to graduation. No letter of approval is required.

i. (Added) (AF) Separation Instructions:

(1) (Added) (AF) RegAF officers or enlisted members selected for AFHPSP must complete an application for separation from RegAF in accordance with AFI 36-3207, *Separating Commissioned Officers*, or in accordance with AFI 36-3208, *Administrative Separation of Airmen*. (T-0). Requests for separation from RegAF and transfer to the United States Air Force Reserve (USAFR) must be completed prior to starting the program. (T-1).

(2) (Added) (AF) When separated or released from RegAF status, officers holding a RegAF commission or a USAFR commission must accept appointment as a second lieutenant in the Medical Service Corps (MSC) of the USAFR in order to have their resignations accepted. (T-0). All officers must take the oath of office the day after their separation or release from RegAF to prevent a break in service. (T-0).

(3) (Added) (AF) No break in service will occur for enlisted personnel selected for AFHPSP. (T-0). Enlisted members will be separated from RegAF and appointed as a Reserve officer effective the day before travelling to their training program or Officer Training School (OTS). (T-0).

6. (Added) (AF) Application to the Uniformed Services University of the Health Sciences:

a. (Added) (AF) Biomedical Sciences (BSC) and Nurse Corps (NC) Applicants.

(1) (Added) (AF) Apply to the USU Graduate Program via the online application form (<https://www.usuhs.edu/apply>). (T-1).

(2) (Added) (AF) Application procedures may change periodically and should be reviewed for the applicable school year. Applications must be received by 1 December in order to start desired program in the summer or fall semester. (T-0).

(3) (Added) (AF) USU will forward acceptance notification to AFPC/DP2N to meet a selection board. (T-3).

b. (Added) (AF) Medical Corps Applicants:

(1) (Added) (AF) Apply to the School of Medicine through the American Medical College Application Service, 655 K Street, NW, Suite 100, Washington DC, 20001-2399 (<https://students-residents.aamc.org/applying-medical-school/applying-medical-school-process/applying-medical-school-amcas/>). (T-1).

(2) (Added) (AF) Application procedures are announced each year in the school bulletin. The Office of Admissions maintains academic requirements and school bulletins, USU, 4301 Jones Bridge Road, Room A1041, Bethesda, MD, 20814-4799, (<https://www.usuhs.edu/medschool/admissions>).

(3) (Added) (AF) Applications must be submitted between 1 June and 15 November for classes beginning the next school year. (T-0). The American Medical College Application Service does not accept applications arriving after 15 November. Dates are approximate and may change year to year.

(4) (Added) (AF) USU may call competitive applicants for a formal interview. Applicants are responsible for their own travel expenses for the interview. RegAF members may request permissive temporary duty to interview at USU.

c. (Added) (AF) Eligibility:

(1) (Added) (AF) Be a U. S. citizen without dual citizenship. Dual citizens may apply, however must renounce their non-U.S. citizenship prior to commissioning, Officer Training School (OTS) attendance, and matriculation to USU. (T-0).

(2) (Added) (AF) Demonstrate good moral character. (T-0).

(3) (Added) (AF) Pursue a medical career in the Uniformed Services. (T-0).

(4) (Added) (AF) Meet academic, intellectual, and personal qualifications for entering the USU. (T-0).

(5) (Added) (AF) Civilian applicants must; be at least 18-years of age at matriculation but not yet age 30 as of 15 June of the year of admission. (T-0).

(a) (Added) (AF) RegAF members and prior service applicants may exceed the age limit of 30 by a period equal to the time served RegAF but cannot exceed 35 years of age as of 15 June in the year of admission. (T-0).

(b) (Added) (AF) Age requirements can only be waived by the SECAF.

(6) (Added) (AF) Meet the AF commissioning requirements in AFMAN 36-2032 and meet:

(a) (Added) (AF) Security requirements for commissioning in the military (see DoDM 5200.02_AFMAN 16-1405).

(b) (Added) (AF) Medical qualifications for obtaining a USAFR commission. Certification is required for those not requiring a waiver, and AETC/SG for defects noted in the current DoDI 6130.03V1 as disqualifying in accordance with AFI 48-123.

(7) (Added) (AF) RegAF commissioned officers must be at their first permanent duty station a minimum of 1-year before being permitted to apply to USU. (T-1).

d. (Added) (AF) Application Process:

(1) (Added) (AF) The RegAF member and AFROTC cadet application and separation procedures are delineated below. Members must have approval before matriculating to the program and must submit a letter of approval before school starts. (T-0).

(a) (Added) (AF) Examples of letters of approval to apply are available from AFPC/DP2N.

(b) (Added) (AF) AFROTC cadets submit the letter of approval to AFPC/DP2LT, Line Officer Accession Branch.

(c) (Added) (AF) RegAF members submit the letter of approval to AFPC/DP2SSR, Retirement and Separations Division, Separations Branch, 550 C Street West, Suite 3, JBSA- Randolph, TX 78150-4727.

(2) (Added) (AF) USU School of Medicine accepts American Medical College Application Service applications before receiving the letter of approval from Air Force Personnel Center (AFPC), but will not make any final decision until the official approval letter arrives. (T-0). The approval letter serves as an official pre-approval of applicant's possible voluntary separation. For separation policy and procedures, contact AFPC/DP2SSR. Final approval of separation is dependent on:

(a) (Added) (AF) Acceptance into USU.

(b) (Added) (AF) Requesting separation and being able to accept separation to attend USU.

(c) (Added) (AF) Accepting rank and pay grade of a medical student.

(d) (Added) (AF) RegAF officers submitting their resignation, agreeing to accept a Reserve commission in the MSC, and accepting the pay grade as a second lieutenant in the USAF.

e. (Added) (AF) Contractual Information:

(1) (Added) (AF) Substantial obligations are incurred when chosen. A contract, which clearly outlines these obligations, must be signed. (T-3).

(2) (Added) (AF) The AF contract changes slightly each year. A current copy of the contract may be obtained from AFPC/DP2N.

(3) (Added) (AF) Applicants receive a current contract after being notified of their selection to USU.

f. (Added) (AF) Service Commitments:

(1) (Added) (AF) **Military Service Obligation (MSO):** Every person who enters the armed services shall serve an 8-year MSO. (T-0). Any portion of this 8-year obligation not served on RegAF shall be served in the Individual Ready Reserve (IRR) in accordance with Title 10 of the U.S. Code. (T-0).

(2) (Added) (AF) **Active Duty Service Commitment (ADSC):** Students incur a 7-year ADSC for participation in USU. The ADSC incurred as a result of participation in USU shall be served at the completion of residency or fellowship training and is served concurrently (at the same time) with the MSO. (T-0). If USU graduate completes an internship and serves as a general medical officer prior to residency, the time spent during internship and as a general medical officer counts towards completion of USU ADSC. (T-0).

(3) (Added) (AF) **Minimum Term of Active Service:** In addition to the ADSC, students will incur a minimum term of active service of 2-years RegAF for physicians following internship and 3 years RegAF for other officers in a health profession. (T-0). This will be served concurrently with the ADSC and MSO. (T-0).

g. (Added) (AF) Agency Responsibilities:

(1) (Added) (AF) **AFPC/DP2N: Program manager for USU Scholarships:**

(a) (Added) (AF) Appoints students as RegAF second lieutenants in the MSC (AFSC: 92M1) (regardless of status: AFROTC, USAFA, civilian, or RegAF).

(b) (Added) (AF) Provides instructions and directions for students pertaining to:

1. (Added) (AF) Formally requesting conditional release from other services.

2. (Added) (AF) Formally requesting removal from flying status.

3. (Added) (AF) USU scholarship and program requirements.

(c) (Added) (AF) Provides guidance for applications to the Joint Services Graduate Medical Education Selection Board for residency training.

(d) (Added) (AF) Calculates ADSC, coordinates changes of grade, corps, and separation actions.

(e) (Added) (AF) Sends the list of students eligible for RegAF commission to AFPC/DP2SPP (Officer Promotion Branch) 9-months before graduation.

(f) (Added) (AF) Oversees and coordinates confirmed action requirements.

(2) (Added) (AF) AFPC Separations Branch (AFPC/DP2SSR):

(a) (Added) (AF) Sends a copy of the letter of approval to apply to the Director of Admissions at the School of Medicine and AFPC/DP2N.

(b) (Added) (AF) Prepares and processes applications for separation.

(c) (Added) (AF) Processes TORs.

(3) (Added) (AF) AFPC/DP2NA:

(a) (Added) (AF) Appoints qualified individuals as RegAF officers in the MC upon graduation from USU.

(4) (Added) (AF) USU:

(a) (Added) (AF) Determines academic standards for commissioning USU candidates.

(b) (Added) (AF) Requests national agency checks.

(c) (Added) (AF) Requests the Department of Defense Medical Evaluation Review Board schedule medical examinations.

(d) (Added) (AF) Sends selection notification to AFPC/DP2N.

(e) (Added) (AF) Applicants must meet Department of the Air Force (Added) (AF) medical accession standards or have an approved waiver to enter the program and to enter RegAF status. (T-0).

(5) (Added) (AF) Defense Medical Evaluation Review Board:

(a) (Added) (AF) Schedules free physical examinations for potential entrants at military or civilian facilities as near as possible to the applicants' homes. The government does not reimburse travel expenses to and from the examination sites.

h. (Added) (AF) For additional information See DoDI 5105.45, *Uniformed Services University of the Health Sciences (USU)*.

7. ADHPLRP

a. Purpose. To provide a direct accession and retention incentive program to maintain adequate numbers of commissioned officers of the Military Departments on AD who are qualified in the various health professions.

b. Administration. Under the ADHPLRP, the Secretary of a Military Department may repay a loan that was used by a person to finance a degree that qualifies the person to practice in a health profession and was obtained from a governmental entity, private financial institution, or school. The Secretary concerned will appoint a program manager and ensure that the ADHPLRP is managed pursuant to section 2173 of Reference (d). **(T-0)**. Unless otherwise specified, these provisions apply equally to the ADHPLRP when offered for accession or retention. The Secretary concerned may prescribe additional requirements and standards regarding eligibility.

(1) (Added) (AF) The AF/SG may exercise the ADHPLRP to meet the needs of the Air Force Medical Service through recruitment of civilians and offer of retention incentives for qualified AFSCs by repaying debts incurred while obtaining advanced healthcare education. Requirements for the program may change annually based on the eligible specialties identified by the AF/SG and AFRC/SG.

c. Eligibility. To be eligible for the ADHPLRP, an individual will:

(1) Be qualified for, or hold, an appointment as a commissioned officer in one of the health professions. **(T-0)**. **(Added) (AF) A fully-qualified health professional is defined as:**

(a) (Added) (AF) A licensed physician who has completed a residency or fellowship training program; is eligible for board certification in a medical specialty; and meets service requirements for accession on RegAF to practice medicine in that specialty.

(b) (Added) (AF) A licensed, registered, or certified Healthcare provider (excluding physicians) who meets service requirements for accession or retention on RegAF to practice in the profession or specialty in which educated and licensed, registered or certified.

(c) (Added) (AF) A fully-trained and, or licensed, registered, or certified health professional (non-healthcare provider) who meets service requirements for accession or retention on RegAF.

(d) (Added) (AF) Health Professions Officers include MC officers, DC officers, NC officers of the Army and Navy, officers of the Air Force designated as medical officers, dental officers, or nurse officers, Veterinary Corps officers (veterinarians), BSC officers, MSC officers, and Medical Specialist Corps officers.

(e) (Added) (AF) Licensed/Certified/Registered.

1. (Added) (AF) License: Permission granted by an official agency of a state, the District of Columbia, a commonwealth, territory, or possession of the U.S. to provide healthcare independently as a healthcare professional. License must be: active

(not revoked, suspended, or lapsed in registration), valid pursuant to the issuing authority's requirement for continued licensure; and unrestricted (not subject to restriction pertaining to the scope, location, type of practice, or jurisdiction). (T-0).

2. (Added) (AF) Certified or Registered: For the purpose of this instruction, where the term certified or registered is used, it includes the full spectrum of relative terms that describe qualifications as required by the appropriate health profession. This applies to any person providing direct patient care. A certification or registration license must be: current (not revoked, suspended, or lapsed in registration), valid pursuant to the issuing authority's requirement for continued licensure, and unrestricted (not subject to restriction pertaining to the scope, location, type of practice, or jurisdiction). (T-0).

(f) (Added) (AF) Accredited Institution: A college, university, or institution, located in the U.S. or Puerto Rico, and accredited by an accrediting agency or association under the U.S. Secretary of Education. Included are those institutions located in the U.S. or Puerto Rico 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.

(g) (Added) (AF) Commissioned Appointment: An individual's most recent (original) appointment in a RegAF or Reserve Component (USAFR) that is neither a promotion nor a demotion.

(h) (Added) (AF) Specialty Qualification: Qualification received upon completion of advanced training in a health profession specialty obtained at an accredited institution that is beyond the basic education required for appointment as a health professions officer.

(i) (Added) (AF) Full-Time Student: An individual currently enrolled in a course of study leading to a baccalaureate or post-baccalaureate degree in a health profession, taking a minimum of nine semester hours, and on schedule to complete the program in the normal time expected.

(j) (Added) (AF) Award Amount: The total value or amount of the loan payments made by the Government on behalf of the participant, including tax withholdings as required by statute.

(2) Sign a written agreement to serve on, or remain on, AD for a specified period in addition to any other incurred ADO.

(3) Meet one of the following requirements:

(a) Be fully qualified in a health profession that the Secretary concerned has determined to be necessary to meet identified skill shortages;

(b) Be enrolled as a full-time student in the final year of a course of study at an accredited educational institution leading to a degree in a health profession other than medicine or osteopathic medicine;

(c) Be enrolled in the final year of an approved graduate program at an educational institution accredited by a U.S. accrediting agency leading to specialty qualification in medicine, dentistry, osteopathic medicine, or other health profession; or

(d) Be enrolled in the AFHPSP or FAP for a number of years less than is required to complete the normal length of the course of study required for the health profession concerned.

(4) Have completed a basic military officer indoctrination course or have equivalent credit as authorized by proper authority. The Secretary concerned may waive this requirement for a participant in the final year of an approved military-sponsored graduate program leading to specialty qualification in medicine, dentistry, osteopathic medicine, or other health profession.

(5) Be licensed to practice in the profession or specialty in which they are trained if currently on AD and applying for the ADHPLRP as a retention incentive.

(6) Be free of any court judgment in favor of the United States creating a lien against the individual's property arising from a civil or criminal proceeding regarding a debt, and not be in default of any federal debt. The Secretary concerned may grant an exception to the default exclusion in cases when all other eligibility criteria are met and when loan default disclosure, as well as substantiation that loan payments are up-to-date, is provided by the individual at the time of application.

(7) Not be a student or graduate of the F. Edward Hebert School of Medicine.

(8) Not be a current or former AFHPSP or FAP participant who received the maximum 4 years of sponsorship for a health profession degree.

(9) If currently not fully qualified in the specialty targeted by the ADHPLRP, be licensed to practice in the profession or specialty in which they are trained before payments are executed consistent with the ADHPLRP contract.

(10) Have been separated from prior active commissioned service for at least 24 months or released from an RC commitment, if the individual seeks to obtain an original appointment as a new accession in the ADHPLRP. This applies only to prior active service in the same corps designation as the health profession being applied for in the ADHPLRP. It does not apply to officers in an RC serving on AD for a period of less than 1 year. The Secretary concerned may waive this requirement if the applicant is re-entering the same Military Department.

(11) Have been on AD for at least 6 months before applying for ADHPLRP benefits for retention purposes. The Secretary concerned may waive this requirement for Service members who received partial sponsorship in AFHPSP or FAP and may require a longer minimum amount of AD service by Military Department policy.

d. Repayment of Qualified Loans. Once a participant meets the requirements in paragraph 6c of this enclosure, the Secretary concerned may repay a government, school, or commercial loan that the person used to finance a degree from an accredited educational institution that qualifies the person to practice in a health profession.

(1) The Secretaries of the Military Departments will establish a process to review, analyze, and ascertain qualified loans. **(T-0)**. Qualified loans are for the actual costs paid for tuition and other reasonable educational expenses and reasonable living expenses relating to the attainment of a degree in a health profession. Such loans must have documentation that indicates the loan was incurred concurrently with the training received in a health professions school. **(T-0)**. If health professions educational loans are refinanced, the original documentation of the loan(s) will be submitted to the Secretary concerned to establish the simultaneous nature of such loans. **(T-0)**.

(a) (Added) (AF) Government Loans: Loans made by federal, state, county, or city agencies that are authorized by law to make such loans.

(b) (Added) (AF) Commercial Loans: Loans made by banks, credit unions, savings and loan associations, insurance companies, schools, and other financial or credit institutions that are subject to examination and supervision in their capacity as lenders by an agency of the U.S. or by the state in which the lender has its principal place of business.

(2) Subject to the limits established in this section, an ADHPLRP loan repayment may consist of payment of the principal, interest, and related expenses of a qualified loan.

(a) Reasonable educational expenses are any that would be payable under the AFHPSP and the FAP, as described in paragraph 5f of this enclosure. Such expenses may include tuition, fees, books, supplies, educational equipment and materials, clinical travel, and other expenses that are part of the estimated standard student budget of the educational institution in which the participant was enrolled.

(b) Reasonable living expenses are the room and board, transportation and commuting, and other costs incurred during an individual's attendance at an educational institution, as estimated each year as part of the school's standard student budget. The amount of the loan to be repaid for living expenses will not exceed the annual stipend amount authorized for participants of the AFHPSP and the FAP. **(T-0)**.

(3) The maximum annual loan repayment amount that the Secretary concerned may grant an ADHPLRP participant will be issued by the ASD(HA) in the HPS&I pay plan. **(T-0)**.

(4) The total length of an ADHPLRP contract for any participant may not exceed a period determined by dividing the current total value of qualified loans by the annual benefit, rounding up to the nearest whole number of years. The Secretary concerned may further limit the length of contracts and may allow the participant to extend for additional years (within the maximum length contained in the HPS&I pay plan), based on availability of funding.

(5) The repayments will be paid to the lending institution on behalf of the participant. **(T-0)**. The repayment process will begin after the participant signs a written service agreement, is on AD, completes the basic officer indoctrination course, reports to the first permanent duty station, and complies with all other Service requirements. **(T-0)**.

(6) Loan repayment benefits are taxable income, requiring that a portion of the annual benefit be withheld as income tax and not paid to the lending institution. The participant must pay the portion of the loan repayment benefit withheld as income tax to the lending institution. This section is to be applied in accordance with current tax authority. **(T-0)**.

e. SO

(1) Participants of the ADHPLRP will incur an ADO of at least 2 years, or 1 year of ADO for each annual repayment, whichever is greater. **(T-0)**. The ADO for the accession ADHPLRP will be served first when combined with an existing medical education or training ADO. **(T-0)**. An ADO for a contractual multiyear pay to include multiyear incentives and AB will be served consecutively and after the ADHPLRP ADO. **(T-0)**. No portion of the ADO for accession or retention ADHPLRP will be fulfilled:

- (a) By prior military service, active or reserve. **(T-0)**.
- (b) During GPE. **(T-0)**.
- (c) During an obligation incurred for any AB. **(T-0)**.
- (d) During any ADO for AFHPSP or FAP. **(T-0)**.

(2) The MTAS will run concurrently with the ADHPLRP ADO, unless the ADO is less than the MTAS, in which case the participant will not be released from AD until the MTAS has been served. **(T-0)**.

(3) Participants who enter AD with the ADHPLRP ADO as their initial obligation will be subject to the 8-year MSO. **(T-0)**. This 8-year MSO is served concurrently with any other obligation. Once the ADO in paragraph 6e(1) of this enclosure is served, subject to mutual agreement, the participant may fulfill any remaining MSO in the SELRES.

(4) Participants who enter AD with the ADHPLRP ADO as their initial obligation, and who subsequently apply for and are granted benefits for retention purposes, will incur a new minimum ADO as described in paragraph 6e(1) of this enclosure. **(T-0)**. This new ADO will be served after the previously incurred ADO. **(T-0)**.

(5) No portion of an ADHPLRP ADO may be reduced or satisfied through partial credit based on a remaining loan repayment amount that is less than the maximum annual amount. A qualifying loan balance that does not require the maximum authorized annual loan repayment will not result in a pro-rated ADO. **(T-0)**.

(6) An ADO incurred for GPE is in addition to and will be served after the ADHPLRP ADO. **(T-0)**.

(7) In accordance with section 3033(b) of Title 38, U.S.C. (Reference (s)), an individual who enters AD through the ADHPLRP is not eligible to remain enrolled in the All-Volunteer Force Educational Assistance Program, also known and referred to in this instruction as the “Montgomery GI Bill (MGIB),” and have their pay reduced by \$100 per month for their first 12 months of AD. This provision does not apply to individuals who qualified for MGIB benefits during a period of service completed before entry into health professions training. An individual on AD is not precluded from using both the MGIB and the ADHPLRP benefits as long as the individual completes the required length of service specified in the MGIB and the ADHPLRP SO.

(8) Any ADO incurred in accordance with the ADHPLRP will not be considered qualifying AD for the purposes of the Post-9/11 Educational Assistance Program pursuant to section 3322(b) of Reference (s). **(T-0)**. Any AD after completion of the HRLRP SO may be qualifying for the Post-9/11 Educational Assistance Program in accordance with section 3311 of Reference (s).

f. (Added) (AF) ADHPLRP Application Process:

(1) (Added) (AF) Civilians should contact their local AF Health Professions Recruiter (<https://www.airforce.com/careers/specialty-careers/healthcare/overview>).

(2) (Added) (AF) RegAF members who meet the eligibility criteria should contact AFPC/DP2N for further application information.

g. (Added) (AF) Failure to Complete Obligation. An ADHPLRP participant who is relieved of his or her active duty service commitment (ADSC) before the completion of that ADSC may be given, with or without the consent of the member, any of the following alternative obligations as determined by the SECAF:

(1) (Added) (AF) A military service obligation (MSO) is another component of the Armed Forces for a period not less than the member's remaining ADSC.

(2) (Added) (AF) A MSO in a component of the SELRES for a period not less than twice as long as the member's remaining ADSC.

(3) (Added) (AF) Repayment to the SECAF of a percentage of the total cost incurred by the SECAF on behalf of the member equal to the percentage of the member's total ADSC being relieved, plus interest on that calculated amount.

(4) (Added) (AF) In addition to the alternative obligations specified above, if the member is relieved of ADSC by reason of his or her separation because of a physical disability, the SECAF may give the member a MSO as a civilian employed as a healthcare

professional in a facility of the Uniformed Services for a period of time equal to the member's remaining ADSC.

(5) (Added) (AF) An individual who is not otherwise eligible to serve in another component of the Armed Forces may be given an alternative obligation as described in paras 7.g.(3). and 7.9.(4). of this enclosure.

8. RELIEF FROM AN ADO AND ALTERNATIVE OBLIGATIONS FOR AFHPSP, FAP, AND ADHPLRP PARTICIPANTS

a. Authorities. Section 2123 of Reference (d) authorizes the Secretary of the Military Department concerned to relieve AFHPSP and FAP participants from the ADO incurred in those programs. Section 2173 of Reference (d) authorizes the Secretary of the Military Department concerned to relieve an ADHPLRP participant of the ADO incurred in that program. Relief from an ADO pursuant to one of these authorities does not relieve a participant from any military obligation imposed by any other law.

(1) (Added) (AF) Includes provision for members attending the Uniformed Services University of the Health Sciences (USU).

b. Individuals Affected. Subject to the provisions of the written service agreement, the alternatives prescribed here apply to the following individuals who do not fulfill the initial ADO incurred as AFHPSP, FAP, or ADHPLRP participants:

(1) Participants currently serving on AD.

(2) Participants who have been deferred from AD while undergoing a civilian residency program.

(3) Participants who are dropped from AFHPSP or FAP for deficiency in conduct, deficiency in studies, or for some other reason. **(Added) (AF) Participants include students at USU.**

(4) AFHPSP and FAP participants who have completed the educational portion of the program but have yet to receive an appointment as an AD HPO.

c. Individuals Not Affected. AFHPSP and FAP participants may not be dropped from these programs or separated from military service for failure to comply with physical readiness and weight control standards. The Secretary concerned may retain the participant until the ADO incurred has been served.

d. Alternatives. Except as described in paragraph 7c of this enclosure, the Secretary concerned may relieve an AFHPSP, FAP, or ADHPLRP participant of an ADO based on the needs of the Military Service concerned as long as the underlying military personnel action is in accordance with References (d), (m), and (n), DoDD 1332.18 (Reference (t)), and Service-

specific regulations. When a participant is qualified for further service and has been relieved of an ADO, the participant may be given, with or without consent, one of the following alternative obligations, as determined by the Secretary concerned:

(1) An SO in another Military Service for a period of time not less than the participant's remaining ADO.

(2) An SO in a component of the SELRES for a period twice as long as the participant's remaining ADO.

(3) Repayment of a percentage of the cost incurred by the Secretary concerned on behalf of the participant pursuant to the repayment provisions of section 373 of Reference (c). **(Added) (AF) This alternative does not apply to USU Participants.**

(4) If a participant is relieved of an ADO because of separation for physical disability, an SO as a civilian employee employed as a health-care professional in a facility of the Uniformed Services for a time period equal to the participant's remaining ADO. The participant will be referred to the servicing civilian personnel office for assistance. **(T-0)**. All statutory and regulatory requirements for employment must be adhered to. **(T-0)**.

(5) (Added) (AF) Pursuant to Principal Deputy Under Secretary of Defense for Personnel and Readiness (USD(P&R)) Memorandum, Repayment of Unearned Portions of Bonuses, Special Pay, and Educational Benefits or Stipends, a participant who is currently enrolled in USU, AFHPSP, or FAP and is dropped prior to program completion for deficiency in conduct or studies or for other reasons may be required to perform a period of RegAF status in the sponsoring Military Department. The SECAF will ensure service members are assigned in an appropriate military capacity based on prior education and training. (T-0). The minimum time period of RegAF status for USU students will be 1-day for each day of participation or a minimum of 1 year, whichever is greater. (T-0). This minimum obligation is in addition to any ADSC imposed by any other provision of the law. This obligation will be served after any other pre-existing obligation. (T-0).

e. Repayment

(1) Process. Consistent with Reference (1), the Secretary concerned will be responsible for providing an AFHPSP, FAP, FAP AB, or ADHPLRP program participant with due process notification of indebtedness and providing DFAS the required documentation to initiate collection. **(T-0)**.

(a) (Added) (AF) Initiating commander's recommendation to terminate, withhold or recoup. The authorized endorser (usually the MTF commander) may recommend termination, withhold or recoupment action. To initiate a request, commanders must:

(b) (Added) (AF) Notify the officer, in writing (an example is provided in reference of this instruction). (T-0). The letter of notification should:

1. (Added) (AF) Explain in detail specific reasons for terminating, withholding or recouping special pays.

2. (Added) (AF) Include copies of all substantiating documents. All supporting documents (e.g., evaluation letters, AF/SG final decision regarding adverse action, consultant trip reports, and security forces or redacted Office of Special Investigations reports) should be included as attachments to the notification letter. The documents (attached to the letter of notification) must provide reasonable notice of the facts underlying the termination, withholding or recoupment action.

3. (Added) (AF) Direct the officer to acknowledge receipt of the notification letter (an example is provided in Attachment 3 of this instruction) within three calendar days. (T-1). If the officer fails to return the acknowledgement it must be noted on the notification letter.

(c) (Added) (AF) Officers will be advised of their option to submit a written rebuttal to accompany the request package within 10 calendar days from the date of acknowledgement. (T-0).

(d) (Added) (AF) Obtain a legal review of the package. Send the notification letter with attachments to the local Staff Judge Advocate for a legal review. (T-0).

(e) (Added) (AF) Coordinate with the appropriate MAJCOM/SG. (T-1). Send the notification letter and attachments to MAJCOM/SG for a written recommendation. (T-1). The MAJCOM/SG must not add additional information to the package unless the officer concerned is notified and given a reasonable opportunity to respond to the new information. (T-1).

(f) (Added) (AF) Coordinate with AFPC/DP2SSM. (T-1). Send the entire package to AFPC/DP2SSM. (T-1).

(g) (Added) (AF) AFPC/DP2SSM will forward to AFPC/JA for final legal review and submit the complete package to AF/SG1/8D for AF/SG approval. (T-1).

1. (Added) (AF) When AF/SG authorizes S&I pay(s) to be terminated, withheld or recouped, an effective date of termination, withholding or recoupment will be determined. (T-0).

2. (Added) (AF) Submission of termination or withholding packages should only include items specified in section 3.6.3.3. of this publication to be in agreement with 10 U.S.C. §1102, *Confidentiality of medical quality assurance records: qualified immunity for participants*. Quality assurance protected records should be clearly marked as such and inclusion of these records should be kept to a minimum.

(2) Costs to be Repaid. Repayment will be the percentage of the cost incurred by the Secretary concerned for the AFHPSP, FAP, or ADHPLRP, prorated based on the remaining obligation, plus interest. **(T-0)**. For AFHPSP and FAP participants, the amount of indebtedness will be the total of tuition, grant, stipend, bonus, and educational expenses received by the participant, divided by the number of days comprising the full ADO, multiplied by the number of days in the unfulfilled ADO. **(T-0)**. For the ADHPLRP, the amount of indebtedness will be equal to loan repayments made on behalf of the recipient divided by the number of days comprising the full ADO incurred at that point, multiplied by the number of days in the unfulfilled ADO. **(T-0)**. Interest costs added to the indebtedness will be calculated in accordance with current financial regulations. **(T-0)**.

(a) (Added) (AF) For USU, repayment will be the percentage of an estimate of equivalent civilian tuition, prorated based on the remaining obligation, plus interest. (T-0).

f. (Added) (AF) Contract Termination:

(1) (Added) (AF) Participants may be eliminated from the program for cause or when it is in the best interest of the AF. Examples of students being eliminated may include:

(a) (Added) (AF) Failure to comply with or meet medical, academic, conduct, or administrative requirements in accordance with program requirements.

(b) (Added) (AF) Failure to meet institution academic or other standards; or failure to make satisfactory progress.

(c) (Added) (AF) Lacking qualities required of an AF officer as described in DoDD 5500. 07, *Standards of Conduct*; AFI 36-3206, *Administrative Discharge Procedures For Commissioned Officers*; AFI 36-3207 and AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members*.

(d) (Added) (AF) Ignoring requests for either information or administrative directives.

(e) (Added) (AF) Involvement in illegal activities or conduct unbecoming an AF officer.

(2) (Added) (AF) The AF does not approve requests based on change of mind, altered financial status, misunderstanding of obligations, or personal convenience. Exception: Individuals who request to decline their scholarship and tender their resignation from the USAFR prior to their scholarship eligibility date may do so through AFIT/CIM, regardless of OTS attendance.

(3) (Added) (AF) Elimination from the program does not necessarily result in separation or discharge from the AF.

(a) (Added) (AF) All participants are subject to options outlined in their contracts if they fail to complete the program.

(b) (Added) (AF) Options include being called to RegAF to serve their ADSC in any capacity for which they possess the qualifications.

g. (Added) (AF) Separating or Discharging an Eliminated Participant:

(1) (Added) (AF) All program participants hold commissions as officers in the USAFR and must be able to attain and maintain the appropriate security clearance to serve in RegAF. (T-0) An officer who has been eliminated from AFHPSP/FAP does not always require separation or discharge.

(2) (Added) (AF) Possible reasons for discharge or separation:

(a) (Added) (AF) Member was eliminated from AFHPSP/FAP.

(b) (Added) (AF) Member meets requirements specified by AFI 36-3209.

(3) (Added) (AF) Initiation or recommendation to separate and discharge.

(a) (Added) (AF) A participant may ask for separation and discharge by submitting a tender of resignation (TOR) of commission for personal reasons if prior to the scholarship eligibility date.

(b) (Added) (AF) AFIT/CIM may eliminate the member from AFHPSP/FAP, suspend benefits, and ask for the member's separation or discharge for cause.

(c) (Added) (AF) Air Reserve Personnel Center (ARPC) Separation Branch may separate and discharge a member:

1. (Added) (AF) In response to a TOR if prior to the scholarship eligibility date.

2. (Added) (AF) Based on AFIT/CIM's notification of the participant's elimination from AFHPSP/ FAP and the recommendation of the appropriate AFPC/DP2N Branch.

3. (Added) (AF) For reasons stated in AFI 36-3206, AFI 36-3207, AFI 36-3208, AFI 36-3209 or another instruction.

(4) (Added) (AF) The AF may discharge and separate a member on the recommendation of medical facility commanders or commanders of military organizations providing active duty training.

(5) (Added) (AF) Separation procedures and potential recoupment actions are in accordance with AFI 36-3209, with recommendations from AFPC/DP2N and in accordance with Air Reserve Personnel Center Judge Advocate (ARPC/JA). Separation or discharge from the USAFR while participating in the program does not necessarily mean that a member is relieved from MSO imposed by other federal statutes.

(a) (Added) (AF) Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR) may administratively discharge members who were commissioned for the program, submitted a TOR before receiving program benefits, are not otherwise obligated to the AF, may have attended OTS, and were removed for cause.

(b) (Added) (AF) The AF may separate members who previously participated in this or other AF sponsored education programs or may call them to EAD in another capacity to repay the ADSC. If separated, the AF decides whether to recoup educational expenses (including grants and other expenses) after SAF/MR reviews and decides the case.

(6) (Added) (AF) SAF/MR decides how individuals pay back their obligations, to include EAD in another capacity, SELRES, or recoupment of educational expenses (to include grants and other expenses).

9. (Added) (AF) AGENCY RESPONSIBILITIES

a. (Added) (AF) USAF Office of the Surgeon General (AF/SG), Medical Force Development (AF/SG1/8A):

(1) (Added) (AF) Manages, operates, and sets policy for the AFHPSP/FAP/ADHPLRP programs.

(2) (Added) (AF) Plans and submits program objectives to the Medical Accessions Working Group and Force Development Panel for approval.

(3) (Added) (AF) Forwards the approved program details to AFPC/DP2N, AFRS/RSOC, AFIT/CIM, and Air Force Reserve Medical Directorate (AF/REM) for action.

(4) (Added) (AF) Coordinates with AFIT/CIM and AF/REM prior to reallocation, allocation, or mix changes during the budget execution year.

(5) (Added) (AF) Provides oversight for AF/SG OTS Training Requestor Quota Identifier requirements and interface with the 23d Training Squadron.

(6) (Added) (AF) Provides oversight for Air Force Medical Service OTS seats.

(7) (Added) (AF) Establishes selection criteria in consultation with AFPC/DP2N and AFRS/RSOC.

(8) (Added) (AF) Responsible for annual ADHPLRP contract review and point of contact for RegAF member inquiries concerning ADHPLRP.

b. (Added) (AF) Air Force Personnel Center, Non-Line Officer Management Division (AFPC/DP2N):

(1) (Added) (AF) Recommends policy changes to AF/SG1/8A. Implements and manages policies and procedures.

(2) (Added) (AF) AFHPSP/FAP is responsible for annual program contract review and point of contact for student inquiries concerning GPE.

(3) (Added) (AF) AFHPSP, oversees applications from USAFA, AFROTC, and RegAF to the AFHPSP selection board.

(4) (Added) (AF) AFHPSP, convenes annual selection board for all AFROTC cadets (not designated as Pre-HPP) and RegAF members applying for the Armed Forces Health Professions Scholarship Program (AFHPSP).

(a) (Added) (AF) Notifies applicants of select or non-select status.

(b) (Added) (AF) Ensures applicants complete the appropriate contract package and are administered the appropriate oath of office.

(5) (Added) (AF) Informs AFROTC/Cadet appointments and special actions of all information and documents required from pre-HPP participants who enter AFHPSP.

(6) (Added) (AF) AFHPSP, is the appointing authority for USAFA, AFROTC and RegAF selectees. Ensures USAFA, AFROTC and RegAF selectees are enrolled in the program through AFIT/CIM and ARPC/DPAM by forwarding the contract and pay packages to the appropriate office. Notifies AF/SG1/8A and AFIT/CIM of any unused scholarships.

(7) (Added) (AF) Consults with AFIT/CIM on health professional matters.

(8) (Added) (AF) AFHPSP/FAP, reviews and coordinates program withdrawal cases and makes recommendations about the discharge actions to ARPC/CC.

(9) (Added) (AF) AFHPSP/FAP, provides a list of potential program selection board members to AFRS/RSOC.

(10) (Added) (AF) AFHPSP/FAP, reviews and recommends approval or disapproval of all requests for interservice transfer to ARPC Separation Branch.

(11) (Added) (AF) AFHPSP/FAP, reviews and coordinates approval, or disapproval requests for dual-degree programs and pre-graduate fellowships recommended by AFIT/CIM in coordination with AF/SG1/8A.

(12) (Added) (AF) AFHPSP/FAP, accomplishes graduating program medical clearances by doing the following:

(a) (Added) (AF) Receive, review, and track completed health assessment documents.

1. (Added) (AF) Review for accurate completion and physician signature and return to student if not complete or signed.

2. (Added) (AF) Review for identification of change in health status.

3. (Added) (AF) If change identified ensure supporting medical records are included and complete.

4. (Added) (AF) Suspend student for additional records, evaluations, or tests.

5. (Added) (AF) Notifies AFPC/DP2N (Corps Specific) in writing of determination or medical qualification for EAD requirements.

6. (Added) (AF) Notifies AFIT/CIM in writing of medical disqualification determinations for further action.

(b) (Added) (AF) Maintain copies of documents submitted to AETC and AETC determination during members' program participation.

(13) (Added) (AF) AFHPSP/FAP, accomplishes annual medical clearances for program member non-graduates by receiving, reviewing, and tracking positive identification of health status changes.

(a) (Added) (AF) Engage with program member to determine full extent of health status change.

(b) (Added) (AF) Suspend student for additional records, evaluations or tests, as needed.

(c) (Added) (AF) Review submitted records, evaluations or tests to ensure required information is included and complete.

(d) (Added) (AF) Notifies AFIT/CIM in writing of determination of medical qualification assessment for program participation and medical disqualification determination for further action.

(e) (Added) (AF) Maintain copy of documents submitted to AETC and AETC determination during members' program participation.

(14) (Added) (AF) Responsible for annual ADHPLRP contract review and point of contact for RegAF member inquiries concerning ADHPLRP.

(15) (Added) (AF) Convenes annual selection board to consider ADHPLRP applications for retention.

(16) (Added) (AF) Notifies ADHPLRP applicants of select or non-select status.

(17) (Added) (AF) Coordinates ADHPLRP candidate applications with AFIT/CIM for processing for retention.

c. (Added) (AF) Air Force Recruiting Service, Medical Officer Accessions (AFRS/RSOC):

(1) (Added) (AF) Convenes the AFHPSP/FAP selection boards.

(2) (Added) (AF) AFHPSP/FAP, notifies civilian applicants of their selection status (selected, non-selected, or alternate).

(3) (Added) (AF) AFHPSP/FAP, recruits and administers oath of office to civilian, USAFR, and ANG program participants.

(4) (Added) (AF) Coordinates with, develops, and provides board schedule to AFPC/DP2N and AF/SG1/8A.

(5) (Added) (AF) AFHPSP/FAP, sends master personnel and pay record documents to ARPC/DPAM to build the students' personnel record in the Military Personnel Data System (MilPDS). Additional copies of personnel or program documents are sent to AFIT/CIM and AFPC/DP2N (corps specific) for the generation of education and program records.

(6) (Added) (AF) Advertises the program.

(7) (Added) (AF) AFHPSP/FAP, notifies AFIT/CIM of AFHPSP/FAP selected recipients at the time of commissioning.

(8) (Added) (AF) AFHPSP/FAP, awards vacated scholarships to applicants in alternate status from current fiscal year (FY) selection boards in coordination with AFPC/DP2N and AF/SG1/8A.

(9) (Added) (AF) Recruits civilian accession ADHPLRP program participants.

(10) (Added) (AF) ADHPLRP, notifies civilian applicants of their selection status (selected, non-selected, or alternate).

(11) (Added) (AF) Coordinates civilian accession ADHPLRP candidate applications with AFIT/CIM for processing.

d. (Added) (AF) Air Force Reserve Officer Training Corps (AFROTC):

(1) (Added) (AF) Identifies Pre-HPP cadets.

(2) (Added) (AF) Office of Primary Responsibility (OPR) for AFROTC medical service scholarships. Validates eligibility of Pre-HPP participants annually.

(3) (Added) (AF) Sends quarterly Pre-HPP roster to AFPC/DP2N to identify cadets eligible to enter the medical service programs.

e. (Added) (AF) AFROTC Detachments:

(1) (Added) (AF) Send a copy of a completed contract package to AFPC/DP2N on all pre-HPP and AFROTC cadets accepted into medical school, dental school, nurse anesthetist program, Pharm-D program, or optometry school and selected for the Armed Forces Health Professions Scholarship Program (AFHPSP). To include:

(a) (Added) (AF) Air Force Form 1056, *AF Reserve Officer Training Corps Contract*.

(b) (Added) (AF) DD Form 4, *Enlistment/Reenlistment Document*.

(c) (Added) (AF) AFROTC Detachment commanders appointment order with order number.

(d) (Added) (AF) Line oath with date of commission; and MSC oath completed within 24 hours after the line oath.

(e) (Added) (AF) Complete pay package.

(f) (Added) (AF) Commissioning physical.

(2) (Added) (AF) Complete the AF Form 24, *Application for Appointment as Reserve of the Air Force or US Air Force without Components*, packages and forwards it to AFPC/DP2N.

f. (Added) (AF) Holm Center, 23d Training Squadron:

(1) (Added) (AF) AFHPSP/FAP, conducts OTS and allocates class seats during the summer to accommodate participants in the AFHPSP/FAP.

(2) (Added) (AF) Provides training facilities.

(3) (Added) (AF) AFHPSP/FAP, identifies commissioned officers who do not meet OTS academic, conduct, or other standards of the USAF and notifies AFIT/CIM.

(4) (Added) (AF) AFHPSP/FAP, AFIT/CIM in turn notifies ARPC Separations Branch and ARPC/JA of appropriate recommendations.

g. (Added) (AF) Air Force Institute of Technology, Civilian Institution Programs, Medical Education Division (AFIT/CIM):

(1) (Added) (AF) AFHPSP/FAP, primary point of contact with students and student programs.

(2) (Added) (AF) AFHPSP/FAP, manages the academic program.

(a) (Added) (AF) AFHPSP/FAP, approves and processes change of schools.

(b) (Added) (AF) Grants leaves of absence and authorizes program extensions up to one-year increments. Coordinates program extensions and leaves of absence with AFPC/DP2N, ARPC/DPAM, and ARPC/FM to ensure maintenance of program integrity.

(c) (Added) (AF) Monitors student academic progress.

(3) (Added) (AF) Coordinates with AF/SG1/8A and AFPC/DP2N on end strength reporting.

(4) (Added) (AF) AFHPSP/FAP, coordinates vacated scholarships with AF/SG1/8A and AFRS/RSOC.

(5) (Added) (AF) AFHPSP/FAP, supervises and manages students by issuing necessary instructions. Updates students on program developments.

(6) (Added) (AF) AFHPSP/FAP, reconciles student census with AF/SG1/8A, ARPC/DPAM, and AFPC/DP2N at least once a year.

(7) (Added) (AF) AFHPSP/FAP, identifies students for possible elimination from AFHPSP/FAP. Terminates student benefits if the student fails to:

(a) (Added) (AF) Meet academic standards of the institution.

(b) (Added) (AF) Meet medical, academic, conduct, or other standards of the USAF.

(c) (Added) (AF) Demonstrate the qualities required by an Air Force officer.

(d) (Added) (AF) Provide information requested by any Air Force agency.

(8) (Added) (AF) AFHPSP/FAP, when students are identified for program elimination:

(a) (Added) (AF) Holds responsibility and authority to make program elimination determination.

(b) (Added) (AF) Discontinues academic entitlements, including tuition, stipend, RegAF pay, and personal reimbursements pending results.

(c) (Added) (AF) Prepares program withdrawal and request for separation or discharge package.

(d) (Added) (AF) Forwards completed elimination package through AFPC/DP2N to ARPC Separation Branch, ARPC/DPAM, ARPC/FM, and ARPC/JA.

(e) (Added) (AF) Transmits TOR through ARPC Separations Branch and ARPC/JA for action and disposition.

(9) (Added) (AF) Develops the operating and maintenance budgets based on the program objectives and coordinates through AF/SG1/8A.

(10) (Added) (AF) Assists AFIT/FM to validate student claims for reimbursement for books, supplies, and equipment rental.

(11) (Added) (AF) AFHPSP/FAP, decides when program members serve their active duty for training (ADT) tours and submits requests for orders through ARPC/FM.

(a) (Added) (AF) Serves as the training quota identifier (TRQI) for HPSP scheduling and attending military training courses.

(b) (Added) (AF) Schedules students for OTS and AFOM courses.

(c) (Added) (AF) Determines and authorizes a waiver when it is required for OTS or AFOM attendance during program participation.

(12) (Added) (AF) AFHPSP/FAP, coordinates with ARPC/DPAM on personal information updates.

(13) (Added) (AF) AFHPSP/FAP, after reinstating a student, coordinates with ARPC/FM to reinstate RPA scholarship benefits, AFIT/FM to reinstate essential educational expenses, ARPC/DPAM for personnel record update, and AFPC/DP2N for education record update.

(14) (Added) (AF) AFHPSP/FAP, in the final year of the program coordinates with the civilian institution and program member to determine program completion date and degree conferral and provides verified or projected program completion dates to ARPC/DPAM, ARPC/FM, and AFPC/DP2N. It also provides information for reappointment.

(15) (Added) (AF) AFHPSP/FAP, notifies AFPC/DP2N when a student reports health status changes or other sources suggests a physical examination or medical consultation is needed.

(16) (Added) (AF) AFHPSP/FAP, reviews requests for interservice transfer and coordinates with AFPC/DP2N and ARPC Separation Branch for approval or disapproval.

(17) (Added) (AF) AFHPSP/FAP, coordinates establishment of Education Service Agreements (ESAs) with institutions that provide professional education for program members.

(18) (Added) (AF) AFHPSP/FAP, graduating program member medical clearances:

(a) (Added) (AF) Send program members that are within 12 months of program completion the required health assessment and instructions for electronic submission of required documentation to AFPC/DP2N, Medical Standards Branch.

(b) (Added) (AF) Retain a copy of AFPC/DP2N determination(s) in the program member's AFIT record during program participation.

(c) (Added) (AF) Staff medical disqualification, discharge request case package through AFPC/DP2N to ARPC Separations Branch and ARPC/JA.

(19) (Added) (AF) AFHPSP/FAP, annual medical clearances for program member non-graduates.

(a) (Added) (AF) Review all annual health status certification forms and forward all positive identification of health status changes to AFPC/DP2N for action.

(b) (Added) (AF) Retain a copy of AETC determination(s) in the program member's AFIT record during program participation.

(20) (Added) (AF) Coordinates ADHPLRP and civilian accession ADHPLRP applications with AFPC/DP2N and AFRS/RSOC.

(21) (Added) (AF) Validates loan(s) for amount and loan eligibility and determines prospective award amount for RegAF and civilian accession ADHPLRP participants.

(22) (Added) (AF) Authorizes loan payments for disbursement.

h. (Added) (AF) Air Force Institute of Technology, Financial Management (AFIT/FM):

(1) (Added) (AF) Validates educational expenses and authorizes payment through Defense Finance and Accounting Service (DFAS) using ESAs, purchase orders, or personal reimbursements.

(2) (Added) (AF) Records expenditures for each program member during AFHPSP/FAP participation.

(3) (Added) (AF) Computes incurred expenses and forwards expense summaries to AFIT/CIM or AFPC/DP2N (or separation authority) to include in elimination packages.

(4) (Added) (AF) Stops payment or reinstates payment of essential educational expenses when directed.

i. (Added) (AF) Air Reserve Personnel Center (ARPC):

(1) (Added) (AF) AFHPSP/FAP, ARPC/CC maintains Administrative control and serves as Uniform Code of Military Justice (UCMJ) authority for program members.

(a) (Added) (AF) Processes and publishes the ADT order.

(b) (Added) (AF) Publishes orders for medical consultations when needed.

(2) (Added) (AF) AFHPSP/FAP, ARPC Accessions Division (ARPC/DPAR):

(a) (Added) (AF) Facilitates original Reserve appointment (scroll).

(b) (Added) (AF) Publishes Reserve appointment orders after receiving the personnel packages and oaths of office from ARPC/DPAM.

(3) (Added) (AF) ARPC Medical Incentives Branch (ARPC/DPAM):

(a) (Added) (AF) Receives and validates personnel package and oath of office from AFRS/RSOC or AFPC/DP2N.

(b) (Added) (AF) Forwards validated personnel package to ARPC/DPAR for publication of appointment orders.

(c) (Added) (AF) Validates members' initial student data file into the MilPDS and updates members' addresses, names, and tour changes.

(d) (Added) (AF) Sends pay forms to ARPC/FM to start up members' pay accounts.

(e) (Added) (AF) Functions as the Military Personnel Flight (MPF) for program students.

(f) (Added) (AF) Monitors master personnel records.

(4) (Added) (AF) AFHPSP/FAP, ARPC Financial Management Division (ARPC/FM):

(a) (Added) (AF) Builds and maintains program members' master military pay accounts.

(b) (Added) (AF) Pays program members their monthly stipend, pay, and allowances.

(c) (Added) (AF) Forecasts and manages Reserve Personnel Appropriations (RPA) budget in coordination with AFIT/CIM and AF/SG1/8A.

(d) (Added) (AF) RPA finances stipends, uniform allowance, critical skills bonus, and active duty pay, allowances and travel for students on active duty tours.

(e) (Added) (AF) Develops and coordinates the operating and maintenance budget through AFRC/FMARA.

(f) (Added) (AF) For students identified for elimination, annotates grant and stipend pay histories in Defense Joint Military Pay Systems – Reserve Component (DJMS-RC).

(5) (Added) (AF) AFHPSP/FAP, ARPC Benefits and Entitlements Branch (ARPC/DPTTB):

(a) (Added) (AF) Enters students into Defense Enrollment Eligibility Reporting Systems (DEERS) and updates information as necessary.

(6) (Added) (AF) AFHPSP/FAP, ARPC Director of Staff- Security Manager (ARPC/DS):

(a) (Added) (AF) ARPC/DS verifies personnel security clearances and processes as required.

(7) (Added) (AF) AFHPSP/FAP, ARPC Judge Advocate (ARPC/JA), will coordinate, as needed, with AFIT, AFPC/DP2N, ARPC Separations Branch and other pertinent organizations regarding all administrative discharge or separation and recoupment actions; and advise ARPC/CC and other commanders as needed. (T-0).

(8) (Added) (AF) AFHPSP/FAP, ARPC Separations Branch (ARPC/DPTTS):

(a) (Added) (AF) Consummates final separation or discharge action in accordance with AFI 36-3209 and SAF/PERS recommendation and initiates recoupment actions with ARPC/FM.

(b) (Added) (AF) Acts as the focal point for interface with the affected student.

(c) (Added) (AF) Maintains personal information records (names, school, reason and dates of discharge) of former program members for 3-months.

(d) (Added) (AF) Approves or disapproves all interservice transfer requests from program participants.

j. (Added) (AF) USAF School of Aerospace Medicine (USAFSAM):

(1) (Added) (AF) AFHPSP/FAP, Develops and presents the USAFSAM AFHPSP AFOM Course in aerospace medicine.

(2) (Added) (AF) AFHPSP/FAP, Provides training facilities.

(3) (Added) (AF) AFHPSP/FAP, Completes and distributes training evaluations on students who complete the course.

k. (Added) (AF) Air Force Reserve Medical Directorate (AF/REM): AFHPSP/FAP, Provides all strategic programming and requirements planning related to the RPA.

l. (Added) (AF) Defense Finance and Accounting Service (DFAS) Indianapolis Customer Care Center manages recoupment procedures in accordance with the Department of Defense Financial Management Regulation (DoD FMR) 7000.14-R.

m. (Added) (AF) AFHPSP/FAP, Headquarters Individual Reservist Readiness Integration Organization (HQ RIO) Travel Pay Office, Buckley AFB, CO:

(1) (Added) (AF) Maintains program members' account in the Reserve Travel System (RTS) and the Defense Travel System (DTS). Provides the Automated Travel Reporting and Accounting System (ATRAS) file from RTS to 94th Air Wing/FM for payment disbursement.

(2) (Added) (AF) Authorizes travel advances and pays program members' travel and per diem for active duty tours.

(3) (Added) (AF) Notifies ARPC/FM for recoupment of travel and per diem over payments and unsettled travel advances.

n. (Added) (AF) AF Military Treatment Facilities (MTF): The MTF commander reports students assigned to their MTF that fail to meet AF standards to AFIT/CIM.

o. (Added) (AF) AFHPSP/FAP, ensures member complies with and meets all requirements outlined in this instruction, other applicable AF directives, and the instructions issued by AFIT/CIM, AFPC/DP2N, and ARPC/DPAM. Member must notify ARPC/DPAM with changes to contact information. (T-1).

10. GENERAL PROVISIONS FOR SPECIAL PAY PROGRAMS

a. The Secretary concerned will designate a separate manager for the AC and RC special pay programs. **(T-0)**. Special pays will be administered pursuant to Reference (c) and the HPS&I pay plan. **(T-0)**. The HPS&I pay plan will prescribe the amounts payable for each special pay and include a list of clinical specialty professional boards. **(T-0)**.

(1) (Added) (AF) AFPC/DP2SSM is the program manager for execution of special pays. AFPC/DP2SSM is responsible for maintaining references for HPOs to utilize in order to determine eligibility (to include annual pay plans, contracts, frequently asked questions, webinar slides, etc.), verify contract eligibility, processing contracts, and confirm contract payment. AFPC/DP2SSM will forward processed special pay documents to be stored/loaded in officers' personnel record for future reference. (T-0).

(2) (Added) (AF) ARPC/DPAM, Medical Incentives Branch, processes special pays for all reservist assigned to the Reserve Pay File including Traditional Reservist, Individual Mobilization Augmentees (IMAs) and officers on Title 10 orders regardless of length (including Active Guard Reserve Officers). Reservist assigned to the Active Duty Pay File are processed by AFPC.

b. Special pays for officers in a health profession are additional to any other pay or allowance to which an officer is entitled, except as specified in section 10 of this enclosure.

c. The amount of special pay an officer receives may not be included in computing the amount of any increase in pay authorized by Reference (c) or in computing retired pay, separation pay, severance pay, or readjustment pay.

d. An officer may not receive special pays pursuant to sections 9 and 10 of this enclosure simultaneously. Once an officer receives a special pay from the consolidated special pays (CSP) in section 10 of this enclosure, all special pays will be pursuant to the CSP program, and a member cannot revert back to the special pays in section 9 of this enclosure. **(T-0)**.

e. To be eligible to participate in a special pay program, an officer must:

(1) Sign a service agreement when required. (T-0). All service agreements must contain repayment language pursuant to section 303a or 373 of Reference (c) and chapter 2 of Reference (l), and include:

(a) The amount of the bonus or pay. (T-0).

- (b) The method of payment of the bonus or pay. **(T-0)**.
- (c) The period of obligated service for the bonus or pay. **(T-0)**.
- (d) Whether the service will be performed on AD or in an active status in an RC. **(T-0)**.
- (e) The type or conditions of the service. **(T-0)**.
- (f) The circumstances that may result in termination of the agreement and repayment of any unearned portion of the bonus or pay if the officer fails to fulfill the conditions of the bonus or pay, to include an unfulfilled SO or eligibility requirement pursuant to References (c) and (l). **(T-0)**.

(2) Not have reached the mandatory retirement or removal date due to age (pursuant to section 3 of this enclosure) or years of service (pursuant to section 633, 634, or 14507 of Reference (d)) and will complete any additional SO incurred before the individual's mandatory retirement or removal date, unless granted a waiver. **(T-0)**.

(3) (Added) (AF) Must be RegAF designated as a health professions officer or in the case of accession bonus (AB), agree to accept a commission. (T-0).

(a) (Added) (AF) Meet retainability requirements to complete the ADSC incurred upon signing and submitting any contract. The officer's signature on a special pay contract authorizes AFPC/DP2SSM to extend the officer's ADSC provided it does not exceed a mandatory date of separation (DOS) based on age, commissioned years of service, or other force management tools. If an extension to the current DOS is required for the officer to serve the full ADSC incurred by the S&I pay contract, all changes must be made to the officer's record before the contract is submitted to AFPC/DP2SSM. (T-1).

(b) (Added) (AF) Upon reaching age 61, officers who wish to remain RegAF beyond age 62, but not to exceed age 68, must obtain an approved age waiver and submit the waiver with the special pay contract. (T-0). Note: Officers in the rank of lieutenant colonel and below may request DOS waivers and age waivers through the appropriate assignments office at AFPC/DP2N. DOS changes and age waivers for officers in the rank of colonel and above are managed by the AF Colonel Management Office (AF/DPO).

(c) (Added) (AF) Commissioned Years of Service. In accordance with in accordance with 10 U.S.C. §634, Retirement for years of service: regular colonels and Navy captains, 10 U.S.C. §633, Retirement for years of service: regular lieutenant colonels and commanders, and AFI 36-3203, Service Retirements, Table 4.1., officers cannot exceed commissioned years of service limits unless approved for continuation by a selective continuation board. Officers in the rank of lieutenant colonel cannot enter a special pay agreement that results in an ADSC that surpasses 28 years of total active commissioned service. Officers in the rank of colonel cannot enter a special pay agreement that results in an ADSC that surpasses 30 years of total active commissioned service.

(d) (Added) (AF) Be fully qualified in a designated specialty and not currently attending internship training or initial residency training except as specified in the current pay plan.

(e) (Added) (AF) For privileged HPOs: meet requirements of licensure or certification and be able to practice independently to the extent authorized in AFI 44-119.

(f) (Added) (AF) Demonstrate the conduct, competence, and professional practice standards expected of a commissioned officer and health care professional.

f. The Secretary concerned may, upon acceptance of a written service agreement, pay a special pay to an eligible officer. All participants in a health professions special pay program must hold an appointment as a commissioned officer. **(T-0).**

g. A participant must have a current, valid, and unrestricted license or approved waiver, in accordance with Reference (p). Participants must maintain all licensing, credentialing, and specialty qualifications and meet privileging requirements to remain in the special pay program. **(T-0). (Added) (AF) Criteria is subject to change based on legislation, budgetary restrictions, needs of the Air Force (AF), and ASD(HA) policies. Each fiscal year (FY), the AFMS S&I pay plans are approved for implementation by the Secretary of the Air Force for Manpower and Readiness (SAF/MR) and published by the Air Force Personnel Center, Medical Special Pays Branch (AFPC/DP2SSM). For details, refer to the current FY pay plans and contracts.**

h. Failure to maintain a valid State license, either through inaction or legal action by the State against an officer, will immediately terminate all special pay disbursements. **(T-0).** Repayment of received benefits during the ineligible period will be based on the pro-rata amount of the benefit as of the date the license was deemed invalid for purposes of medical special pays. **(T-0).** Once the officer's license is reinstated and eligibility is re-established, the officer's non-contractual special pays may restart and the officer may negotiate new contractual special pay agreements. Regardless of whether the officer receives special pays, the officer will be held responsible for the originally contracted special pay SO until completed or involuntary separation from military service occurs. **(T-0).**

i. An RC participant in a special pay program must execute a written agreement to remain a satisfactory participant in the SELRES in accordance with DoDI 1215.13 (Reference (u)). **(T-0).**

j. Based on Service-unique requirements, the Secretary concerned may decline to offer a special pay, or restrict the length of a special pay agreement to less than the maximum number of years authorized in the HPS&I pay plan, for any specialty.

k. The Secretary concerned may terminate at any time a health professions special pay agreement. Reasons for termination may include, but are not necessarily limited to, loss of privileges; court-martial conviction; failure to maintain a current, unrestricted license; or reasons that are in the best interest of the Military Department. If an agreement for one or more special

pays is terminated, the officer will be paid, on a pro-rata basis, for the portion served until the official date of termination. **(T-0)**. The Secretary concerned will establish regulations that specify the conditions and procedures for termination, and they will be included in the written service agreement for the specific special pay. **(T-0)**.

l. An officer who fails to maintain the eligibility requirements for a special pay, does not complete the obligation period for the pay, or whose pay is terminated in accordance with this instruction, will be subject to the repayment provisions of section 373 of Reference (c) and chapter 2 of Reference (1). **(T-0)**. These repayment authorities will be stipulated in the written service agreement. **(T-0)**.

m. HPOs in the SELRES who transfer to the Standby Reserve as authorized by DoDD 1200.7 (Reference (v)), will have their special pay suspended during this period and will not be entitled to any payments. **(T-0)**.

(1) This period of authorized absence may be up to 1 year for valid personal reasons as determined by the Secretary concerned.

(2) If subsequently assigned in the SELRES in a skill that they had previously contracted for, if applicable, officers may be reinstated in the special pay program if they extend their term of service or SO to serve the full original special pay agreement period.

(3) Subsequent payments will resume on the adjusted anniversary date of satisfactory and creditable SELRES service, as appropriate. **(T-0)**. The date will be adjusted for periods of authorized absence. **(T-0)**. Failure to meet reinstatement criteria will result in termination and recoupment of the special pay. **(T-0)**.

11. LEGACY SPECIAL PAYS

a. Officers who entered into a written agreement for receipt of a special pay in accordance with sections 301d, 301e, 302, 302a, 302b, 302c, 302c-1, 302d through 302l, 303, and 303a of Reference (c) (referred to in this instruction as “legacy special pays”) before the date referred to in paragraph 9c of this enclosure will continue to receive payments until the completion date of the written agreement. **(T-0)**. After that date, all new agreements for special pays for HPOs will be administered in accordance with the CSP authorities in section 335 of Reference (c). **(T-0)**.

b. Legacy special pays will be administered in accordance with Reference (1). **(T-0)**.

c. Effective January 28, 2018, all health professions legacy special pay authorities will be discontinued, and any new agreements will be in accordance with the CSP authorities in section 10 of this enclosure. **(T-0)**.

d. Subject to acceptance by the Secretary concerned, an officer who entered into a written agreement in accordance with the legacy special pay authorities may request termination of that agreement to enter into a new agreement with an equal or longer obligation at the annual rate in

effect at the time of execution of the new agreement. The new obligated period will not retroactively cover any portion or period that was executed under the old agreements. **(T-0)**. This option to terminate and enter into a new agreement is not available to officers who received lump sum payments. **(T-0)**.

12. CSP

a. General

(1) An HPO may be paid special pay at the rate for any specialty for which they are fully qualified. The specialty or subspecialty must be the same for all pays received. **(T-0)**. The officer may only receive IP pursuant to section 335(b) of Reference (c) and a retention bonus (RB) pursuant to section 335(a)(3) of Reference (c) for one specialty, even if the officer holds qualifications in two or more specialties. The IP and RB must be effective on the same date. **(T-0)**. **(Added) (AF) Officers may not sign contracts that extend beyond their orders end date.**

(2) The amount of each bonus or pay, by specialty, will be listed in the HPS&I pay plan. **(T-0)**.

(a) The Secretary concerned will determine whether bonuses pursuant to section 335 (a) of Reference (c) are paid in a lump sum or in periodic installments. **(T-0)**.

(b) IP will be paid monthly. **(T-0)**. A member of the RC will be paid at the daily rate of 1/30th of the monthly rate for any period in which the member is entitled to basic pay pursuant to section 204 or compensation pursuant to section 206 of Reference (c). **(T-0)**.

(c) The Secretary concerned will pay board certified pay (BCP) pursuant to section 335(c) of Reference (c) monthly, in a lump sum at the beginning of the certification period, or in periodic installments during the certification period. **(T-0)**. An RC member will be paid monthly at the daily rate of 1/30th of the monthly rate for any period in which the member is entitled to basic pay pursuant to section 204 or compensation pursuant to section 206 of Reference (c). **(T-0)**.

(3) An officer receiving a health profession bonus is not eligible to receive a payment pursuant to section 332 of Reference (c) for the same period of obligated service.

(4) An officer receiving health professions IP is not eligible to receive a payment pursuant to section 353 of Reference (c) for the same skill and period of service.

(5) An officer receiving BCP is not eligible to receive a payment pursuant to section 353 (b) of Reference (c) for the same skill and period of service covered by the certification.

(6) Legacy IP will be terminated as the CSP IP is executed. **(T-0)**. Any subsequent payment of legacy IP will be immediately recouped pursuant to sections 371 and 303a(e) of Reference (c). **(T-0)**.

(7) Legacy BCP will be terminated as the CSP BCP is executed. **(T-0)**. Any subsequent payment of the legacy BCP will be immediately recouped pursuant to sections 371 and 303a(e) of Reference (c). **(T-0)**.

b. AB

(1) Eligibility. To be eligible for AB, an individual must: **(T-0)**.

(a) Be a graduate of an accredited school in a health profession.

(b) Be qualified for appointment as a commissioned officer in a regular component or in an RC. An individual must accept an appointment as an HPO before payment of the bonus. **(T-0)**.

(c) Be qualified in the specialty to which appointed.

(d) Execute a written agreement to accept an appointment as an HPO of the Army, the Navy, or the Air Force to serve on AD in a regular component or in an active status in an RC in a health profession for a specified period.

(e) At the time of appointment, have completed all SO for receipt of financial assistance from the DoD to pursue a course of study in a health profession. This includes, but is not limited to, participants and former participants of the Reserve Officers' Training Corps, AFHPSP, FAP, Uniformed Services University of the Health Sciences, and other commissioning programs.

(f) Have been discharged from any Uniformed Service at least 24 months before execution of the written agreement to receive an AB, and no longer hold an appointment, if a former HPO.

(g) Have been honorably discharged or released from any prior service.

(h) (Added) (AF) Eligible RegAF and Reservist officers on Title 10 orders 365 days or more assigned to the Active Duty Pay File should submit a copy of orders along with the appropriate contract under the submission procedures of this instruction. USAFR submission procedures are detailed in the RC FY pay plan for officers assigned to the Reserve Pay File.

(2) Ineligibility. Individuals ineligible for AB include:

(a) A current Service member.

(b) A cadet who has completed or is completing a program for accession.

(3) SO. During the discharge of the SO associated with an AB, officers are eligible for IP and BCP, if applicable. Any SO incurred by these pays will be served concurrently. **(T-0)**.

c. Affiliation Bonus for the RC

(1) Eligibility. To be eligible for an affiliation bonus for the RC, an HPO must:

(a) Be serving on AD or have served on AD and have a DD Form 214, "Certificate of Release or Discharge from Active Duty," that verifies an honorable discharge or release. **(T-0)**.

(b) Provide the original DD Form 214 (copy 1 or copy 4) or a reproduction with a certified true-copy stamp and the appropriate Federal Government authenticating seal imprinted for each period of prior military service. **(T-0)**.

(c) Be qualified to hold an appointment as an HPO. **(T-0)**.

(d) Be qualified in the specialty in which they agree to serve. **(T-0)**.

(e) Execute an agreement to serve in the SELRES. **(T-0)**.

(f) Not have previously received an AB in the SELRES, unless granted a waiver. **(T-0)**.

(2) Payment. Annual payment amounts will be listed in the HPS&I pay plan. **(T-0)**.

d. IP

(1) Eligibility. To be eligible for IP, an HPO must:

(a) Be in a regular or RC of a Military Service and be entitled to basic pay under section 204 of Reference (c) or compensation under section 206 of Reference (c). **(T-0)**.

(b) Be serving on AD or in an active status in a designated health profession specialty or skill. **(T-0)**.

(2) General Provisions

(a) Payment. Annual payment amounts for IP contracts will be listed in the HPS&I pay plan and paid in equal monthly payments. **(T-0)**.

(b) IP When Not Participating in an RB Agreement. Subject to acceptance by the Secretary concerned, an HPO who is eligible for and not in an existing RB agreement, and who is no longer obligated pursuant to a previous IP agreement, may enter into a new 1-year IP

agreement at the rate in the HPS&I pay plan. IP agreements must be for at least 1 year and cannot be prorated. **(T-0)**. If, during the IP agreement, the HPO becomes eligible for a higher IP, the HPO may terminate and renegotiate at that higher rate, obligating for at least a year from the date of renegotiation.

(c) IP When Participating in an RB Agreement. An HPO who enters into an RB contract may also be eligible for IP for the same specialty at the amount in the HPS&I pay plan. An HPO who elects this option will continue IP eligibility, at the rate in effect at the time the RB agreement is effective, for each active year of the RB contract. **(T-0)**. Any renegotiation of either the RB or IP will require signing a new RB contract at the annual rate in effect at the time of signature, with an obligation that ends after the obligation of the original agreement. **(T-0)**.

(d) Effective Date. The effective date of IP will be calculated from the completion of the qualifying training plus 3 months. **(T-0)**.

e. RB

(1) Eligibility. To be eligible for an RB, an HPO must:

(a) Be below the grade of O-7. **(T-0)**.

(b) Meet one of the following requirements:

1. Have completed any AD or reserve duty service commitment incurred for any and all pre-commissioning education and training;

2. Have completed the SO for an AB (an individual eligible for an AB may decline the AB and accept the RB); or

(c) Have completed qualification for the specialty or subspecialty for which the RB is being paid before the beginning of the fiscal year during which a written agreement is executed. **(T-0)**.

(d) Enter into a written agreement to remain on AD or in an active status in the RC as an HPO for 2, 3, or 4 years, which is accepted by the Secretary concerned. **(T-0)**.

1. (Added) (AF) RB (multiyear special pays) will not be prorated, but must be in 12-month increments of 24, 36, 48, or 72 months. (T-0).

(2) General Provisions

(a) Subject to acceptance by the Secretary concerned, an HPO with an existing multiyear pay pursuant to subchapter I of chapter 5 of Reference (c), or with an RB contract pursuant to subchapter II of chapter 5 of Reference (c), may request termination of that contract to enter into a new RB contract with an equal or longer obligation at the RB annual rate in effect

at the time of execution of the new contract. The new obligation period will not retroactively cover any portion or period that was executed in accordance with the prior contract. **(T-0)**.

(b) The Secretary concerned may pay an RB to HPOs based on their clinical specialty or subspecialty regardless of their ability to spend appropriate time in a clinical setting.

(3) SO. In calculating the SO for RBs:

(a) SOs for education and training and previous multiyear pay agreements will be served before serving the RB SO.

(b) If there are no education and training SOs, the RB SO will be served concurrently with the RB contract period and all non-education and training SOs. **(T-0)**. If the RB contract is executed before the start date of specialty education or training and no other education and training SO exists, the RB SO will be served concurrently with the RB contract period. **(T-0)**. However, if the RB contract is executed on or after the start date of specialty education or training, the HPO is obligated for the full specialty education or training period and the RB SO will begin 1 day after the specialty education or training SO is completed. **(T-0)**. Once an HPO has begun to serve an RB SO, the obligation will be served concurrently with any existing SO, including obligations for other special pay agreements or medical education and training obligations incurred after the execution date for that particular RB contract. **(T-0)**.

(c) Obligations for RB may be served concurrently with all other special pay contractual SOs.

(d) During the discharge of the SO associated with the HPLRP, individuals are eligible for RB. The RB SO is added to all HPLRP obligations.

f. BCP. To be eligible for BCP, an HPO must:

(1) Be entitled to basic pay under section 204 of Reference (c) or compensation under section 206 of Reference (c). **(T-0)**.

(2) Have a post-baccalaureate degree in a clinical specialty. A post-Master's certificate acceptable to the Secretary concerned can satisfy this requirement. **(T-0)**.

(3) Be certified by a professional board in a designated health profession clinical specialty. **(T-0)**.

(4) Be serving on AD or in an active status in the specialty of the board certification. **(T-0)**.

g. **(Added) (AF) Air Force Special Pay:**

(1) (Added) (AF) Officers requesting Medical Special Pays must complete the applicable endorsement option as noted below. (T-0). Available options for pays are

described on each contract. Health Professions Officers (HPO) must be credentialed, privileged when applicable or appropriate, and practicing in the specialty for which pay is requested except as noted below. (T-0).

(a) (Added) (AF) Option I. Standard single or multiyear contract. (T-0).

(b) (Added) (AF) Option II. For officers in fellowships, secondary residency training, Air Force Institute of Technology (AFIT) programs, or flight surgeons working outside of the root specialty and precluded from practicing in the specialty for which pay is requested. (T-0).

(c) (Added) (AF) Option III. An exception to policy for those HPOs unable to practice at all in a clinical setting. (T-0). There are very few assignments that preclude all practice in a specialty. HPOs in positions outside a traditional MTF are expected to devote time to some type of clinical practice at a local MTF.

(d) (Added) (AF) The Air Force Deputy Surgeon General (AF/DSG) is the approval authority for awarding special pay to fully qualified officers assigned to positions requiring a substantial portion of time performing military unique duties under adverse conditions, in remote locations outside the continental United States (OCONUS), or that preclude the ability to spend appropriate time in a clinical setting. (T-0). All Option III contracts must be endorsed and validated at the local level and forwarded, along with a copy of the HPO's license, to AFPC/DP2SSM per normal submission directions. (T-0). AFPC/DP2SSM should forward the request to AF/SG1/8 for AF/DSG approval.

(2) (Added) (AF) If the officer is not in a clinical setting, the authorized endorser must also validate credentials. (T-0). Under no circumstances will a subordinate endorse a contract. (T-3).

(a) (Added) (AF) Above Wing/Installation-level. Directors and MAJCOM Surgeons shall have contracts endorsed by their rater or the senior AF medical person of higher rank in the direct functional authority. (T-1).

(b) (Added) (AF) Staff agencies. Officers assigned to staff agencies shall obtain endorsement at the director level (any Service if joint) or the senior AF medical officer of higher rank in the direct functional authority (e.g., Air Force Medical Readiness Agency, MAJCOM, TRICARE Agencies, Inspector General, Joint Agencies, Direct Reporting Units, Defense Logistics Agency, AF Elements). (T-1).

(c) (Added) (AF) Wing/Installation-level and below. MTF and Limited-Scope Military Treatment Facility commanders shall obtain endorsement from their rater. (T-3).

(d) (Added) (AF) MTF. Officers assigned to an MTF must obtain endorsement from the MTF commander (MTF/CC). (T-3).

1. (Added) (AF) Limited-Scope Military Treatment Facilities and stand-alone medical squadron commanders are the authorized endorsers for special pay contracts within their organization. (T-3).

2. (Added) (AF) Line units/Squadron Medical Elements. Officers assigned to line units or stand-alone Squadron Medical Elements may:

a. (Added) (AF) Coordinate the contract request through the local MTF credentials office and the local MTF commander with final endorsement by the line group commander, or

b. (Added) (AF) Coordinate the contract request through the line group commander to the local MTF credentials office with final endorsement from the MTF commander.

(e) (Added) (AF) The MTF/CC may designate the deputy commander as the endorsing authority.

(f) (Added) (AF) Civilian AFIT. Officers assigned to civilian AFIT positions must send contracts to the applicable organization below for endorsement: (T-0).

**1. (Added) (AF) Medical Corps/Dental Corps (MC/DC) Officers:
AFIT/HCED
ATTN: MEDDEN
2950 Hobson Way
Wright Patterson AFB, OH 45433-7765**

**2. (Added) (AF) Biomedical Sciences Corps (BSC) Officers:
AFPC/DP2NW
ATTN: BSC Education
550 C Street West, Suite 25
JBSA-Randolph, TX 78150-4729**

**3. (Added) (AF) Nurse Corps (NC) Officers:
AFPC/DP2NN
ATTN: Nursing Education
550 C Street West, Suite 27
JBSA-Randolph, TX 78150-4729**

(g) (Added) (AF) Military AFIT. Officers assigned to military AFIT positions, such as those undergoing training in military fellowships or secondary residency programs must obtain credentials validation and endorsement from the Director of Medical Education. (T-3).

(h) (Added) (AF) Uniformed Services University of the Health Sciences (USUHS). Officers assigned to USUHS shall obtain validation and endorsement from the

first O-6 in the immediate rating chain or the appropriate Corps Director. (T-1). O-6s assigned to USUHS may obtain credentials validation and endorsement from the USUHS Medical Director, Dean, or Vice Dean of the College, President, Acting President or Vice President, any General Officer (active or retired) assigned, or their senior rater. The endorser's title must be noted in the appropriate block of the contract. (T-3).

(i) (Added) (AF) San Antonio Military Medical Center (SAMMC). Officers assigned to SAMMC shall obtain credentials validation and endorsement from the SAMMC or Wilford Hall Ambulatory Surgical Center commander. (T-3).

(j) (Added) (AF) United States Air Force School of Aerospace Medicine (USAFSAM). Officers assigned to USAFSAM must obtain credentials validation and endorsement from the USAFSAM commander. (T-3).

(k) (Added) (AF) Developmental Education, Officers attending (DE) in residence shall obtain validation and endorsement from the group commander or equivalent. (T-3).

(l) (Added) (AF) NC Officers, All NC (Certified Registered Nurse Anesthetist Incentive Pay (IP) or NC-Retention Bonus) contracts requests must be validated by the MTF Chief Nurse or designee prior to seeking endorsement. (T-3). Failure to obtain signatures/validation may result in delay in endorsement, processing, and payment.

(3) (Added) (AF) Officers with expiring contracts must determine the effective date necessary to avoid any interruption in pay or unintended extension of active duty service commitment (ADSC). (T-1).

(a) (Added) (AF) New contracts may be submitted no earlier than 60 days prior to the effective date. Contracts cannot have an effective date prior to the first day of the month in which the member signs the contract (e.g., member signs contract 14 July 2019 and cannot use an effective date earlier than 1 July 2019). Valid effective dates must meet the following criteria:

(b) (Added) (AF) The officer was eligible on the date to be used as the effective date,

(c) (Added) (AF) The authorized endorser's signature is dated within 30 days of the officer's signature on the contract, and

(d) (Added) (AF) The contract is received by AFPC/DP2SSM within 60 days of the officer's signature. (T-0).

(4) (Added) (AF) Each officer must take responsibility for requesting and monitoring the officer's medical special pays and obligations. (T-1). Officers should maintain a copy of the pay plan and signed contract for their records.

(a) (Added) (AF) Officers requesting special pay must:

1. (Added) (AF) Download the most current pay plan and contract for review and submission. (T-1).

2. (Added) (AF) Accurately and legibly complete each applicable block of the contract request. (T-0). The requesting officer must sign and date the bottom of the form where indicated. (T-0). Digital signatures cannot be processed at this time. (T-0).

3. (Added) (AF) Use locally prescribed procedures to route the contract request through the appropriate chain of command for validation and endorsement at the appropriate level as indicated in para 3.2. of this enclosure. (T-0). Contract Endorsement of this instruction. Endorsements must include signatures, dates, and titles in the appropriate blocks. (T-3).

4. (Added) (AF) Submit completed contracts to AFPC/DP2SSM up to 60 days prior to the effective date for processing. (T-3). Contracts must be submitted via the appropriate corps special pay page on myPers (https://mypers.af.mil/app/answers/detail/a_id/29350/p/9/c/447). If/when myPers submission is not possible, contracts may be emailed to AFPC.DP2SSM.MedicalSpecialPay@us.af.mil. (T-1).

5. (Added) (AF) Receive email confirmation of receipt of contract from AFPC/DP2SSM. (T-1). Members will receive a confirmation email when they correctly submit their contracts. (T-1). Members should keep contract receipt notification in order to ensure contract was received by AFPC/DP2SSM. Do not send duplicate contracts unless requested. (T-1). Receipt of duplicate contracts may delay processing and cause payment errors.

6. (Added) (AF) Monitor contracts for expiration and renewal. (T-0). Previously completed contracts are available in Personnel Records Display Application. The Defense Finance and Accounting Service (DFAS) system does not always appropriately monitor when pays should begin or end. If there is an error due to contract start or stop dates resulting in overpayment the special pay will be recouped upon discovery. (T-1).

(b) (Added) (AF) Contracts are binding upon submission to AFPC/DP2SSM. Requests for deferment or termination of a submitted contract are not allowed.

(c) (Added) (AF) Contracts must be:

1. (Added) (AF) Signed by the requesting officer, effective no earlier than 1 October and no later than 30 September of the current fiscal year, and submitted no earlier than 60 days prior to effective date of the contract, (T-1).

2. (Added) (AF) Signed by the authorized endorser within 30 days of the requesting officer. (T-1).

3. (Added) (AF) Complete packages. (T-0). All necessary waivers (age, DOS changes, retirement orders, etc.) must be accomplished prior to package submission to AFPC/DP2SSM. (T-1).

(d) (Added) (AF) Upon acceptance of a written contract, the total amount of pay is fixed for the length of the contract. (T-0).

(e) (Added) (AF) All payments are subject to state and federal taxes and the availability of funds. (T-0).

(f) (Added) (AF) Special pay contracts will not be processed through the local finance office. (T-1).

(5) (Added) (AF) An officer with a multiyear contract may request termination of that contract to enter into a new (renegotiated) multiyear contract with an obligation that is at a minimum of 12 months additional or higher payment rate at the time of execution of the new contract. Unearned portions of the terminated contract will be recouped by DFAS. (T-0). Contracts may not be renegotiated to obtain a shorter ADSC or for purposes of assignment or separation.

(a) (Added) (AF) Some single year contracts must be renewed annually and may be submitted up to 60 days prior to expiration of the previous contract to avoid an interruption in pay. (T-0).

(b) (Added) (AF) Officers may sign a new (renegotiated) single year IP contract upon completion of sub-specialty or fellowship training eligible for a higher IP rate and a longer ADSC.

(c) (Added) (AF) Officers retiring with less than 12 months of retainability following the expiration of a multiyear contract and prior to a mandatory retirement/separation date must sign a single year retirement CSP IP contract prior to the conclusion of the multiyear contract in order to avoid losing pay. (T-0). This contract should be signed as soon as retirement orders are received. Retirement orders must be submitted in conjunction with contract. (T-0). The retirement IP contract specifies the officer will earn the single year IP rate when the IP/RB contract expires. (T-0).

(d) (Added) (AF) The requesting officer must submit a copy of retirement orders along with the endorsed IP contract to AFPC/DP2SSM. (T-1). Due to the length of time required to receive retirement orders, officers should sign and have the contract endorsed when starting the retirement process but do not send the contract to AFPC/DP2SSM until retirement orders are obtained.

(e) (Added) (AF) Officers planning to retire/separate with less than 12 months of retainability following the expiration of a multiyear contract and prior to a desired retirement/separation date (not based on a mandatory date of separation/retirement) will

lose pay unless the officer signs a single year IP contract and commits a full year ADSC. (T-0).

(f) (Added) (AF) Officers retiring/separating with less than 12 months of retainability following the expiration of a multiyear contract and who have an ADSC due to consecutive commitments (a tail) are required to sign an IP-only contract prior to the conclusion of the existing multiyear contract in order for their IP to continue. The IP-only rate will be paid for the remainder of the “tail” period. (T-0). The contract must be submitted at least 30 days prior to the conclusion of the multiyear contract in order to avoid a lapse in pay. (T-0).

(6) (Added) (AF) Air Force Surgeon General (AF/SG) approval is required to terminate or withhold an officer’s special pay, except in cases of statutory ineligibility. Commander/authorized endorser use of termination or withholding of Medical Special Pays is an administrative function, not a disciplinary action. A commander may initiate a termination/withholding action in conjunction with adverse administrative action or disciplinary action taken against the HPO under the Uniform Code of Military Justice (UCMJ).

(a) (Added) (AF) Statutory Ineligibility. Statutory ineligibility refers to the loss or restriction of all licenses or certifications or dual receipt of pays as prohibited by 37 U.S.C. §371, *Relationship to other incentives and pays*. AFPC/DP2SSM has the authority to initiate immediate termination and recoupment of pays under 37 U.S.C. §335, *Special bonus and incentive pay authorities for officers in health professions* and 37 U.S.C. §373, *Repayment of unearned portion of bonus, incentive pay, or similar benefit, and termination of remaining payments, when conditions of payment not met*.

(b) (Added) (AF) Loss of License or Certification (inability to practice independently). In accordance with Title 37 U.S.C. Chapter 5, *Special and Incentive Pays*, DoDI 6025.13, *Medical Quality Assurance and Clinical Quality Management in the Military Health System*, and AFI 44-119, HPOs must possess an active, current, valid, unrestricted license or certification for independent practice as defined by the state or national organization for the specialty. (T-0). If the officer possesses multiple licenses or certifications, all valid licenses or certifications must be suspended, restricted or revoked in order for AFPC/DP2SSM to initiate stop pay action under statutory ineligibility. (T-0).

(c) (Added) (AF) Dual Receipt of Pays. In accordance with Title 37 U.S.C. §371, an officer is prohibited from receiving a bonus or incentive pay under both Subchapter I and Subchapter II for the same activity, skill, or period of service.

(d) (Added) (AF) Initiating Statutory Ineligibility Action. The commander or HPO must contact AFPC/DP2SSM at AFPC.DP2SSM.MedicalSpecialPay@us.af.mil to initiate termination/withhold action. (T-1).

1. (Added) (AF) AFPC/DP2SSM will initiate termination and recoupment of pays upon confirmation of statutory ineligibility. (T-0). The effective date will be the date the officer became ineligible for the special pays. (T-0).

2. (Added) (AF) To avoid significant recoupment and continued erroneous disbursements by DFAS, commanders or the HPO must contact AFPC/DP2SSM immediately if their license or certification expires, terminates, or is revoked. (T-1).

3. (Added) (AF) Any payments made after loss of eligibility are subject to recoupment. AFPC/DP2SSM will notify the officer and allow 10 calendar days for response prior to taking recoupment action. (T-1). The officer may appeal the debt through the local finance office.

4. (Added) (AF) In the event the officer's license or certification is restored to unrestricted status, the officer may contact AFPC/DP2SSM at AFPC.DP2SSM.MedicalSpecialPay@us.af.mil for directions to apply for a new contract.

(e) (Added) (AF) Incarcerated officers. All medical special pays will be terminated and unearned payments will be subject to recoupment of funds on a pro rata basis. (T-0). The effective date will be either the date of ineligibility or the date of incarceration, whichever is earliest. (T-0).

(f) (Added) (AF) Recommendation to Terminate/Withhold (other than statutory ineligibility). Recommendation of termination/withhold refers to a request by an authorized endorser to the AF/SG to approve termination of special pays or withhold a contract. Reasons for recommending termination/withhold action may include, but are not limited to: loss of privileges, court-martial conviction, nonjudicial punishment under Article 15, UCMJ, unprofessional conduct, failure to demonstrate proficient medical skill, noncompliance with AF professional practice standards, substandard performance, or the best interest of the AF. Withholding S&I pays and contract renewals must not be taken as the primary and exclusive action to address an HPO's noncompliance with physical fitness standards, substandard performance, or engaging in illegal conduct. (T-0) These actions are appropriate when taken secondarily to administrative actions under AFI 36-2905 Fitness Program and other adverse administrative actions, or disciplinary actions under the UCMJ.

1. (Added) (AF) Insufficient retainability to enter into a specified time period contract. Commanders (authorized endorsers) may initiate a recommendation to withhold special pays based on the propensity to continue serving on active duty and continued retainability for entering into specified time period contracts. If an officer is allowed to continue to fulfill professional duties but there is doubt about the officer's retention, commanders shall consider approving a contract for fewer years, rather than completely withholding pay. (T-3).

a. (Added) (AF) Pending separation. If the officer is pending Physical Evaluation Board review for medical retirement, undergoing an administrative separation

action or judicial action authorizing a punitive discharge or incarceration, or if the officer is subject to force shaping separation programs, this officer does not have the retainability to sign a multiyear contract. In these cases, the authorized endorser shall request to limit the number of years an officer is allowed to commit to military service while awaiting final decision or discharge. (T-3). If the officer is not retained, medical special pays will be terminated and the unearned payment is subject to recoupment on a pro rata basis. (T-0).

b. (Added) (AF) Clinical adverse action. If a commander deems an officer's unprofessional conduct is a detriment to the safety and welfare of patients and staff, or significantly impacts the integrity of the medical service, the commander must initiate a clinical adverse action against the HPO. (T-0). If the final action is supported by the AF/SG and results in a revocation of privileges or practice, the commander will seek approval to withhold/terminate all special pay. (T-0).

c. (Added) (AF) Unfavorable Information File (UIF). In accordance with AFI 36-2907, *Unfavorable Information File (UIF) Program*, officers with an open UIF, Article 15, pending Court-Martial, or are in confinement, may not be eligible for new multiyear retention contracts or the continuation of existing multiyear contracts.

d. (Added) (AF) If an officer has an ongoing UIF or a propensity for continued substandard performance and it is unclear if retention of the officer is warranted, the authorized endorser may limit the number of years to be awarded on a multiyear medical special pay contract.

e. (Added) (AF) Once the UIF is completed or removed, the officer may be eligible to initiate a new multiyear contract with a new obligation period.

f. (Added) (AF) Fitness Assessment Failures. Officers who are being considered for discharge due to a fitness failure may not be eligible for new multiyear contracts as they may not have the retainability to voluntarily commit to continued military service.

2. (Added) (AF) Reinstatement of previous contracts or obligation dates is not authorized.

3. (Added) (AF) Reinstatement of Special Pay. Reinstatement of previous contracts or obligation dates is not authorized. If an officer's performance improves significantly or license/certification is reinstated, the commander may approve a new special pay contract. The officer must submit an endorsed contract along with a memorandum for record signed by the endorsing authority explaining why special pay is being reinstated. (T-3). AFPC/DP2SSM may request additional information based on the circumstances surrounding the original termination/withhold. All contract requests will be negotiated at the current pay rates. (T-0).

13. RC HEALTH PROFESSIONS STIPEND PROGRAM

a. Purpose. For the purpose of obtaining adequate numbers of commissioned officers in the RC who are qualified in health professions, the Secretaries of the Military Departments may establish and maintain a program to provide financial assistance pursuant to sections 16201 through 16204 of Reference (d) to persons engaged in training that leads to a degree in medicine or dentistry or training in a health professions specialty that is critically needed in wartime.

(1) (Added) (AF) The purpose of the RCHP Stipend is to obtain critical wartime medical specialists for the United States Air Force Reserve (USAFR).

(2) (Added) (AF) Requirements for the program may change annually based on the eligible specialties identified by the AF/SG and AFRC/SG.

b. General Provisions

(1) The Secretary concerned will designate a manager for this Program.

(2) The stipends in this section may be offered in combination with one another, with all incurred SOs running consecutively (not concurrently) to fulfill the required payback period for each separate stipend.

(3) The Secretary concerned may agree to pay a financial stipend to a person engaged in health care education and training in return for a commitment to subsequent service in the SELRES of the Ready Reserve. The stipend amount will be designated in the HPS&I pay plan. **(T-0).**

(4) The participant must sign an agreement specifying the required ADT and acknowledging the requirement to serve on AD in time of war or national emergency as provided by law for members of the RR. **(T-0)**. A participant contracted to serve in the SELRES will serve not less than 12 days of ADT each year during the period of service required by the agreement. **(T-0)**.

(5) Failure to complete training:

(a) A Program participant who is dropped from the Program for deficiency in training, or for other reasons, will be required, at the discretion of the Secretary concerned, to:

1. Perform 1 year of AD for each year (or part thereof) that the participant received a stipend; or

2. Comply with the repayment provisions of section 303a(e) of Reference (c). **(T-0)**.

(b) The Secretary concerned may relieve a participant who is dropped from the Program of any requirement of the Program, but such relief will not relieve the participant from any military obligation imposed by any other law. **(T-0)**.

(6) A participant may not receive a stipend in accordance with this program and section 2107 of Reference (d) simultaneously.

c. Medical and Dental School Students

(1) Eligibility. To be eligible, a person will:

(a) Be eligible to be appointed as an officer in an RC. **(T-0)**.

(b) Be enrolled or have been accepted for enrollment in an accredited institution in a course of study that results in a degree in medicine or dentistry. **(T-0)**.

(c) Sign an agreement that, unless sooner separated, the person will:

1. Complete the educational phase of the Program. **(T-0)**.

2. Accept a reappointment or redesignation within the person's RC, if tendered, based upon the person's health profession, following satisfactory completion of the educational and intern programs. **(T-0)**.

3. Participate in a residency program. **(T-0)**.

4. Apply for, if eligible, and accept, if offered, residency training in a health profession skill which has been designated by the ASD(HA) in the HSP&I pay plan as a critically needed wartime skill. **(T-0)**.

(2) Payment of Stipend. A stipend will be paid for the period or the remainder of the period that a participant is satisfactorily progressing toward a degree in medicine or dentistry while enrolled in an accredited medical or dental school. **(T-0)**. A stipend will not be paid until a participant has been appointed, designated, or assigned as an officer for service in the RR. **(T-0)**.

(3) SO

(a) The participant will agree to serve, upon successful completion of the program, 1 year in the SELRES for each 6 months, or part thereof, for which the stipend is paid. **(T-0)**.

(b) In the case of a participant who enters into a subsequent agreement in accordance with paragraph 11d of this enclosure, and successfully completes residency training in a specialty designated in the HSP&I pay plan as one critically needed by the person's Military Department in wartime, the requirement to serve in the SELRES may be reduced to one year for each year, or part thereof, for which the stipend was paid while enrolled in medical or dental school.

d. Physicians and Dentists in Critical Wartime Specialties

(1) Eligibility. To be eligible, a person will:

(a) Be a graduate of an accredited medical school or dental school. **(T-0)**.

(b) Be eligible for appointment, designation, or assignment as a medical officer or dental officer in an RC, or have been appointed as a medical or dental officer in an RC. **(T-0)**.

(c) Be enrolled or have been accepted for enrollment in a residency program for physicians or dentists in a medical or dental specialty designated in the HPS&I pay plan as a specialty critically needed by the person's Military Department in wartime. **(T-0)**.

(2) Payment of Stipend. A stipend will be paid for the period or the remainder of the period of the residency program in which the participant enrolls or is enrolled. **(T-0)**. A stipend will not be paid until a participant has been appointed, designated, or assigned as a medical or dental officer for service in the RR. **(T-0)**.

(3) SO. The participant will agree to serve, upon successful completion of the program, 1 year in the SELRES for each 6 months, or part thereof, for which the stipend is paid. **(T-0)**.

e. Registered Nurses in Critical Specialties

(1) Eligibility. To be eligible, a person will:

(a) Be a registered nurse. **(T-0)**.

(b) Be eligible for appointment as:

1. A Reserve officer for service in the Army Reserve in the Army Nurse Corps;

2. A Reserve officer for service in the Navy Reserve in the Navy Nurse Corps; or

3. A Reserve officer for service in the Air Force Reserve with a view to designation as an Air Force nurse pursuant to section 8067(e) of Reference (d). **(T-0)**.

(c) Be enrolled or have been accepted for enrollment in an accredited program in nursing in a specialty designated in the HPS&I pay plan as a specialty critically needed by the person's Military Department in wartime. **(T-0)**.

(2) Payment of Stipend. A stipend will be paid for the period or the remainder of the period of the nursing program in which the participant enrolls or is enrolled. **(T-0)**. A stipend will not be paid until a participant has been appointed as a Reserve officer for service in the RR in a Nurse Corps or as a nurse. **(T-0)**.

(3) SO. The participant will agree to serve, upon successful completion of the program, 1 year in the SELRES for each 6 months, or part thereof, for which the stipend is paid. **(T-0)**.

f. Baccalaureate Students in Nursing or Other Health Professions

(1) Eligibility. To be eligible, a person will:

(a) Upon completion of the program be eligible to be appointed, designated, or assigned as a Reserve officer for duty as a nurse or other health professional. **(T-0)**.

(b) Be enrolled or have been accepted for enrollment in the third or fourth year of:

1. An accredited baccalaureate nursing program; or

2. Any other accredited baccalaureate program leading to a degree in a health-care profession designated in the HPS&I pay plan as a profession critically needed by the person's Military Department in wartime. **(T-0)**.

(2) Payment of Stipend. A stipend will be paid for the period or the remainder of the period of the baccalaureate program in which the participant enrolls or is enrolled. **(T-0)**. A stipend will not be paid until a participant has enlisted in the RR. **(T-0)**.

(3) SO. The participant will agree to serve, upon graduation from the baccalaureate program, 1 year in the SELRES for each year, or part thereof, for which the stipend is paid. **(T-0)**.

g. Mental Health Professionals in Critical Wartime Specialties

(1) Eligibility. To be eligible, a person will:

(a) Be eligible to be appointed as an officer in an RC. **(T-0)**.

(b) Be enrolled or have been accepted for enrollment in an institution in a course of study that results in a degree in clinical psychology or social work. **(T-0)**.

(c) Sign an agreement that, unless sooner separated, the person will:

1. Complete the educational phase of the program. **(T-0)**.

2. Accept a reappointment or redesignation within the person's RC, if tendered, based upon the person's health profession, following satisfactory completion of the educational and intern programs. **(T-0)**.

3. Participate in a residency program if required for clinical licensure in a mental health profession skill. **(T-0)**.

4. Apply for, if eligible, and accept, if offered, residency training in a mental health profession skill that has been designated in the HPS&I pay plan as a critically needed wartime skill. **(T-0)**.

(2) Payment of Stipend. A stipend will be paid for the period or the remainder of the period that the participant is satisfactorily progressing toward a degree in clinical psychology or social work while enrolled in a school accredited in the designated mental health discipline. (T-0). A stipend will not be paid until a participant has been appointed, designated, or assigned as an officer for service in the SELRES. (T-0).

(3) SO. The participant will agree to serve, upon successful completion of the program, 1 year in the SELRES for each 6 months, or part thereof, for which the stipend is paid. (T-0).

h. (Added) (AF) Application Procedures:

(1) (Added) (AF) **The applicant may request information and application requirements from a recruiter or ARPC/DPAM and must submit a signed RCHP Stipend Certificate of Enrollment. Its purpose is to certify enrollment of an applicant in an accredited professional training program for critical wartime medical specialties. Programs must be approved by Air Reserve Personnel Center (ARPC/DPAM). (T-0).**

(2) (Added) (AF) Contractual Information. Terms of Agreement:

(a) (Added) (AF) **The participant must complete the entire training program agreed to in the contract, unless sooner relieved for the convenience of the government or elimination under section (i) below. (T-0). Leaves of absence during the training program will require specific approval by ARPC/DPAM. (T-1).**

(b) (Added) (AF) **When tendered, the applicant accepts an appropriate appointment or designation based on the individual medical specialty. Upon completion of the training program, the participant agrees to fulfill the appropriate Reserve Service Obligation (RSO) as specified in the contract.**

(c) (Added) (AF) **The participant may be allowed to fulfill the RSO through extended active duty (EAD) in the Air Force with the concurrence of AFRC/SG and AFPC/DP2ND.**

(3) (Added) (AF) **Normally stipend start will be the date appointed to the Reserve. (T-1).**

(4) (Added) (AF) **The participant will be subject to the RSO requirements as specified in the contract and to active duty in time of war or national emergency, as the law provides. (T-0).**

(5) (Added) (AF) **In the event participant fails, voluntarily or because of misconduct, to fulfill the obligations imposed by the contract, recoupment under 10 U.S.C. §2005, *Advanced education assistance: active duty agreement*; reimbursement requirements may be initiated.**

(6) (Added) (AF) Elimination from the RCHP Stipend does not necessarily mean the member will be separated from the Air Force Reserve. Separation is in accordance with AFI 36-3209. (T-1).

(7) (Added) (AF) Stipend payments will stop when the training program is completed, the participant is eliminated, action is initiated to eliminate the participant or during authorized period of non-availability. (T-0).

i. (Added) (AF) Requirements: ARPC/DPAM:

(1) (Added) (AF) Reviews and processes all RCHP Stipend applications.

(2) (Added) (AF) Maintains information on program participants in MilPDS and provide quality control of MilPDS data.

(3) (Added) (AF) Coordinates with AF/REM and AFPC/DP2ND to determine quotas and ceilings for program participants, and to provide various reports as required.

(4) (Added) (AF) Coordinates with AFMPC/DPMMU to approve a participant's request to fulfill the RSO (or remaining portion of the RSO) on EAD, rather than in the Ready Reserve.

(5) (Added) (AF) Coordinates with AFRC/SG on participant's physical qualifications.

(6) (Added) (AF) Coordinates with ARPC/SG on participant's course of study.

(7) (Added) (AF) Processes training program elimination actions. Monitor training program progress and authorize training program extensions, when appropriate.

(8) (Added) (AF) Coordinates with other ARPC directorates to complete various actions, including pay, separation, promotion, reassignment and legal.

(9) (Added) (AF) Notifies participants, 6 months before graduation that they must elect a training category, and ensure they satisfy all obligations. (T-1).

(a) (Added) (AF) By 1 January of each year provides AFRC/RS with a fiscal listing of all RCHP Stipend graduates for that year. Coordinates with AFRC/RS on assignment actions.

(b) (Added) (AF) AFRC/RS receives a list of projected RC STIPEND graduates from ARPC/DPA six months prior to members' graduation from residency/fellowship. AFRC/RS will actively work with RC STIPEND members near graduation to place them in the unit program. (T-1). AFRC/RS will notify ARPC/DPA and respective AFRC/SG CFMs of all RC STIPEND graduates who have failed to obtain a participating assignment within

six months of completing residency training or are not responding or working with the recruiter to be placed in a position. (T-1).

(10) (Added) (AF) ARPC/DPAM is the office of primary responsibility for the administration of program participants.

j. (Added) (AF) Requirements for participants.

(1) (Added) (AF) Complete enrollment verification forms in a timely manner when requested by ARPC/DPAM. Will keep ARPC/DPAM aware of any changes in address, residency/fellowship training or graduation dates. (T-1).

(2) (Added) (AF) Provide AFRC/RS copies of transcript, diploma, license or certificate upon graduation.

(3) (Added) (AF) Assigned to ARPC and upon graduation from residency/fellowship will work with a recruiter in a timely manner to find an assignment to pay back service commitment. (T-1).

14. RC HPLRP (RCHPLRP)

a. Purpose. To provide an incentive program to maintain adequate numbers of commissioned officers in the SELRES who are qualified in health professions needed to meet critical wartime combat medical skill shortages.

(1) (Added) (AF) Civilians should contact their local AF Health Professions Recruiter, Air Force Recruiting Service (AFRS), Officer Accessions Branch (AFRS/RSOC), 550 D Street West, Suite 1, JBSA Randolph, TX 78150-452 (<https://www.airforce.com/careers/specialtycareers/healthcare/overview>).

(2) (Added) (AF) This program applies to Air Force Reserve Officers as an accession/retention incentive for qualified AFSCs by repaying debts incurred while obtaining healthcare education.

(3) (Added) (AF) Requirements for the program may change annually based on the eligible specialties identified by the AF/SG and AFRC/SG.

b. Administration. The RCHPLRP will be managed at the Service level pursuant to section 16302 of Reference (d). The Secretary concerned will appoint a program manager for this program. The Secretary concerned may prescribe additional requirements and standards regarding eligibility.

c. Eligibility. To be eligible for the RCHPLRP, an officer will:

(1) Possess professional qualifications, or be enrolled in a program of education leading to professional qualifications, in a health profession that is needed in order to meet identified critical wartime combat medical skill shortages as identified in the HPS&I pay plan;

(2) Be performing satisfactory service as an officer in the SELRES;

(3) Be assigned to a position requiring the specialty for which the officer is eligible to receive a loan repayment incentive. **(T-0)**.

(4) Have completed a basic military officer indoctrination course or have equivalent credit as authorized by proper authority. **(T-0)**.

d. (Added) (AF) Application Process. SELRES members who meet the eligibility criteria should contact ARPC/DPAM for further application information.

e. Repayment of Qualified Loans

(1) The Secretary concerned may repay:

(a) A loan made, insured, or guaranteed pursuant to chapter 28, subchapter IV, part B, of Title 20, U.S.C. (Reference (w)).

(b) A loan made pursuant to chapter 28, subchapter IV, part C, of Reference (w).

(c) A loan made pursuant to chapter 28, subchapter IV, part D, of Reference (w) after October 1, 1975.

(d) A health professions education loan made or insured pursuant to chapter 6A, subchapter V, part A, or subchapter VI, part E, of Title 42, U.S.C. (Reference (x)).

(e) A loan made, insured, or guaranteed through a recognized financial or educational institution if that loan was used to finance education regarding a basic professional qualifying degree or graduate education in a health profession that the Secretary of Defense determines is critically needed to meet identified wartime combat medical skill shortages, as identified in the HPS&I pay plan.

(2) Qualified loans to participants are for the actual costs paid for tuition and other reasonable educational expenses and reasonable living expenses relating to the attainment of a degree in a health profession eligible for the RCHPLRP. Qualified loans must have documentation that indicates the loan was incurred concurrently with the training received in a health professions school. **(T-0)**. If health professions educational loans are refinanced, the original documentation of the loan(s) will be submitted to the Secretary concerned to establish the simultaneous nature of such loans. **(T-0)**. The loan must have been secured at least 1 year before the repayment date. **(T-0)**.

(3) An RCHPLRP loan repayment may consist of payment of the principal, interest, and related expenses of a loan obtained by an eligible person for reasonable educational expenses and reasonable living expenses incurred during attendance at an accredited educational institution. The amount of the loan to be repaid for living expenses will not exceed the annual stipend amount authorized for participants of the AFHPSP. **(T-0)**.

(4) The amount of repayment of any loan on behalf of any officer will be determined on the basis of each complete year of satisfactory service as an officer in the SELRES and performed by the officer after the date on which the loan was made. **(T-0)**.

(5) The annual maximum award amount that the Secretary concerned may grant a program participant will be issued in the HPS&I pay plan. **(T-0)**. The repayment will not exceed the outstanding balance. **(T-0)**. The borrower will not be reimbursed for payments already made on loans. **(T-0)**.

(6) The loan repayments will be paid to the lending institution on behalf of the officer. Loans in default are not authorized for repayment. **(T-0)**.

(7) Loan repayment benefits are taxable, requiring that a portion of the annual benefit be withheld for tax and not be paid to the lending institution. The officer is responsible for paying the portion of the benefit representing taxes withheld to the lending institution. This provision is to be applied in accordance with current tax authority.

(8) An individual who enters the SELRES through the RCHPLRP is not eligible to remain enrolled in the MGIB AD program. This does not apply to individuals who qualified for MGIB AD benefits during a period of service completed before entry into health professions training. An individual in the SELRES is not precluded from using the MGIB–SELRES or the Post-9/11 GI Bill and RCHPLRP benefits as long as the individual completes the length of service required for the MGIB–SR, or the Post 9/11 GI Bill in addition to the RCHPLRP SO.

15. (Added) (AF) Special Pay for Mobilized Reserve, Retained, or Recalled Officers.

a. (Added) (AF) HPOs on Title 10 active duty (not for training) orders for 1 year or more, who meet all eligibility criteria, may be eligible for single year contractual pays. Officers called to Title 10 active duty status in annual increments for more than one year (not for training) may be eligible to request multiyear contracts.

b. (Added) (AF) Reservists and Guardsmen. Reservists and Guardsmen mobilized or called to Title 10 active duty status (not for training), such as Active Duty Operational Support or Active Duty Special Work for a period more than 30 days but less than 1 year (in accordance with Department of Defense Financial Management Regulation (DoD FMR) 7000.14-R, Volume 7A, Chapter 5) may be eligible for medical special pay in accordance with the current pay plan. Reservists and Guardsmen mobilized based on their primary AFSC, 2AFSC or 3AFSC which entail a higher rate of incentive pay/bonus will receive 1/30th the monthly pro rated pay during the period of mobilization. (T-0).

c. (Added) (AF) Medical Special Pays for Reservist and Guardsmen activated for a) less than 1 year duty, b) more than 30 days but less than one year duty, or c) other than active duty for training are not processed through AFPC/DP2SSM and should pursue special pays through their personnel section.

d. (Added) (AF) Retained active component healthcare providers. Healthcare officers involuntarily retained for a period exceeding 30 days may be eligible for special pay.

e. (Added) (AF) Recalled retirees. Recalled retirees are not eligible for multiyear special pays.

(1) (Added) (AF) In accordance with 37 U.S.C. §335, *Reserve; members of National Guard: inactive duty training*, an officer in a reserve component authorized IP or BCP who is not serving on continuous active duty and is entitled to compensation under 37 U.S.C. §204 or compensation under 37 U.S.C. §206 may be paid a monthly amount of incentive pay that is proportionate to the basic pay or compensation received under title 37. Consult Reserve or Guard Medical Special Pay program manager to determine eligibility for medical special pays.

COMMANDER'S NOTIFICATION OF ACTION

(date)

MEMORANDUM FOR (officer)

FROM: COMMANDER

SUBJECT: Notification of Recommendation for Withholding or Terminating Special Pays

- 1. I am recommending (withholding)(terminating)(recouping) your (type of special pays) for the following reason(s):**
- 2. You may submit a written rebuttal to this action, if you desire. You are allowed 10 calendar days from the date you acknowledge receipt of this letter to submit a written rebuttal.**
- 3. Acknowledge receipt of the letter by signing the attached and returning your acknowledgment to me within 3 calendar days. Also, indicate whether or not you plan to submit a written rebuttal.**

(Signature block)

Attachments:

(Document substantiating the withholding/terminating action)

OFFICER'S ACKNOWLEDGMENT OF ACTION

(date)

MEMORANDUM FOR (officer's commander)

FROM: (officer)

**SUBJECT: Acknowledgement of Notification of Recommendation for Withholding,
Terminating and/or Recouping Medical Special Pays**

**I acknowledge receipt of notification of recommendation for (withholding)(terminating)
(recouping) my (type of special pay). I (will)(will not) submit a written rebuttal.**

(signature)

(name, rank, title)

GLOSSARYPART I. ABBREVIATIONS AND ACRONYMS

AB	accession bonus
AD	active duty
ADHPLRP	Active Duty Health Professions Loan Repayment Program
ADO	active duty obligation
ADSC	active duty service commitment
ADT	active duty for training
AEGD-1	Advanced Education in General Dentistry Program
AF	United States Air Force
AF/REM	Air Force Air Force Reserve Medical Directorate
AF/SG	Air Force Surgeon General
AF/SG1/8	Air Force Surgeon General's Office of Manpower, Personnel, and Resources
AFHPSP	F. Edward Hebert Armed Forces Health Professions Scholarship Program
AFIT/CIM	Air Force Institute of Technology Civilian Institution Medical
AFOM	Air Force Operational Medicine
AFPC/DP2N	Air Force Personnel Center, Non-Line Officer Management Branch
AFPC/DP2SSM	Air Force Personnel Center, Special Programs Branch
AFPC/JA	Air Force Personnel Center, Judge Advocate
AFROTC	Air Force Reserve Officer Training Corps
AFRS	Air Force Recruiting Service
AFRS/RSOC	Air Force Recruiting Service, Recruiting Special Operations Command
AFSC	Air Force Specialty Code
ANG	Air National Guard
ARPC/DPAM	Air Reserve Personnel Center, Medical Incentives Branch
ASD(HA)	Assistant Secretary for Defense for Health Affairs
ASD(M&RA)	Assistant Secretary for Defense for Manpower and Reserve Affairs
ATRAS	Automated Travel Reporting and Accounting System
BCP	board certified pay
BSC	Biomedical Sciences Corps
CC	Commander
CSP	consolidated special pays
D.D.S.	doctor of dental surgery
D.M.D.	doctor of dental medicine
D.O.	doctor of osteopathic medicine
D.V.M.	doctor of veterinary medicine
DC	Dental Corps
DE	Developmental Education
DEERS	Defense Enrollment Eligibility Reporting System

DFAS	Defense Finance and Accounting Service
DJMS-RC	Defense Joint Military System - Reserve Component
DMDC	Defense Manpower Data Center
DoDD	DoD Directive
DoDI	DoD Instruction
DOS	date of separation
DSG	Deputy Surgeon General
DTS	Defense Travel System
EAD	Extended Active Duty
ESAs	Education Service Agreements
FAP	Financial Assistance Program
FY	Fiscal Year
GME	Graduate Medical Education
GPE	graduate professional education
HCP	health care provider
HMPDS	Health Manpower and Personnel Data System
HPLRP	health professions loan repayment programs
HPO	health professions officer
HPS&I	health professions special and incentive
IP	incentive pay
IRR	Individual Ready Reserve
M.D.	doctor of medicine
MC	Medical Corps
MGIB	Montgomery GI Bill
MilPDS	Military Personnel Data System
MPF	Military Personnel Flight
MRD	mandatory retirement or removal date
MSC	Medical Service Corps
MSO	military service obligation
MTAS	minimum term of active service
MTF	Military Treatment Facility
NC	Nurse Corps
OCONUS	outside the continental United States
OTS	Officer Training School
OPR	Officer Performance Report
PRDA	personnel records display application
Pre-HPP	Pre-Health Professions Program

RB	retention bonus
RC	Reserve Component
RCHPLRP	Reserve Component Health Professions Loan Repayment Program
RegAF	Active Duty Air Force
RPA	Reserve Personnel Appropriations
RSO	Reserve Service Obligation
RTS	Reserve Travel System
SAF/MR	Secretary of the Air Force Office of Manpower and Reserve
SAMMC	San Antonio Military Medical Center
SECAF	Secretary of the Air Force
SELRES	Selected Reserve
SO	service obligation(s)
TRQI	Training Quota Identifier
U.S.C.	United States Code
UCMJ	Uniform Code of Military Justice
USAFA	United States Air Force Academy
USAFR	United States Air Force Reserve
USAFSAM	United States Air Force School of Aerospace Medicine
USD(P&R)	Under Secretary of Defense for Personnel and Readiness
USU	Uniformed Services University
USUHS	Uniformed Services University of the Health Sciences
V.M.D.	Veterinariae Medicinae Doctoris

PART II. DEFINITIONS

Unless otherwise noted, these terms and their definitions are for the purposes of this instruction.

authorized endorsers. A member with official approval to attest the member's eligibility for special pay

accredited educational institution. An educational institution accredited by an agency that is on the list of nationally recognized accrediting agencies published by the Secretary of Education. A list of accredited institutions is maintained by the Department of Education at: <http://ope.ed.gov/accreditation/>.

commercial loans. Loans made by banks, credit unions, savings and loan associations, insurance companies, schools, and other financial or credit institutions that are subject to examination and supervision in their capacity as lenders by an agency of the United States or by the State in which the lender has its principal place of business.

fully qualified health professional. A fully-trained or licensed, registered, or certified health professional (non-HCP) who meets the Secretary concerned requirements for accession or retention on AD.

government loans. Loans made by federal, State, county, or city agencies authorized by law to make such loans.

GPE. The education that begins after completion of the basic professional degree and is comprised of internships, residencies, and fellowships completed by physicians, dentists, veterinarians, or other health care specialists in their respective professional fields.

HCP. A Service member providing direct patient care who has been granted privileges to diagnose, initiate, alter, or terminate health care treatment regimens within the scope of the member's license, certification, or registration.

HPO. Officers designated as a medical officer, dental officer, veterinary officer, medical service officer or biomedical sciences officer, medical specialist, or a nurse.

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 for 26 weeks or more, including education or training received in preparation for commissioning as an HPO.

personally identifiable information. Defined in Reference (j).

personnel records display application. Database that stores airmen's personnel records.

reasonable educational expenses. The costs of education that are considered by a participant's school to be required by the school's degree program. Such expenses may include tuition, fees, books, supplies, educational equipment and materials, clinical travel, and other expenses that are part of the estimated standard student budget of the school in which the participant was enrolled and are commensurate with educational expenses authorized by the AFHPSP or the FAP.

reasonable living expenses. The room and board, transportation and commuting, and other costs incurred during an individual's attendance at a college, university, or health professions school, as estimated each year by the school as part of the school's standard student budget.

specialty qualification. A status that is granted when advanced training is completed at an accredited institution in a health profession specialty beyond the basic education required for appointment as an HPO.

training quota identifier. Member who determines number of required slots for training