DEPARTMENT OF THE ARMY
ASSISTANT SECRETARY OF THE ARMY
MANPOWER AND RESERVE AFFAIRS
111 ARMY PENTAGON
WASHINGTON DC 20310-0111

SAMR

8 MAY 2019

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army Medical Department (AMEDD) Reserve Component (RC) 180-Day Boots-on-the-Ground (BOG) Rotation Policy

1. References

a. Memorandum, ASA M&RA, 4 April 07, Subject: Reserve Components Veterinary Corps 180-Day Rotation Policy.

b. Title 10, United States Code, Section 12302.

c. Title 10, United States Code, Section 12304.

2. This 180-Day Boots-on-the-Ground (BOG) Rotation Policy for AMEDD RC Veterinary Corps, Physician Assistant, Nurse Practitioner/Behavioral Health Nurse Practitioner, and Clinical Psychologists/Social Workers replaces the previous policy (reference 1). This policy is effective as of the date of signature and applies to all mobilization orders issued from this date forward. It is not retroactive to orders issued prior to the signature date.

3. Under the provisions of a Presidential Reserve Call-Up or a Partial Mobilization, RC Veterinary Corps Officers (Area of Concentrations (AOCs) 64 A-F), Physician Assistants (AOC 65D), Nurse Practitioners (AOCs 66P/66R) and Clinical Psychologists/Social Workers (AOCs 73B/73A) will deploy for a period not to exceed 180 days BOG in an overseas theater or at a Continental United States (CONUS) duty station. The Army will make every effort to expedite pre- and post-deployment processing such that the total duration of mobilization will not exceed 210 days. Officers in the key leadership positions of Commander, Deputy Commander for Clinical Services (or equivalent), Officer-in-Charge of a Forward Surgical Team/Forward Resuscitative Surgical Team, and those in Command Surgeon or Command Staff Veterinarian positions at the Brigade level and above (including Special Operations Command equivalent), are excluded from this policy and may remain for the duration of the mobilization. The Army will make every effort to manage AMEDD mobilizations such that the period between mobilizations will be at least 36 months (1095 days) to the maximum extent possible, but in mission critical circumstances compressed to not less than 24 months (730 days) between deployments.

4. The National Guard Bureau (NGB) and the United States Army Reserve Command (USARC) will ensure timely by-name identification of rotators and timely alert and processing to meet the timelines established above.

5. This policy does not preclude RC Veterinary Corps, Physician Assistants, Nurse Practitioners, Clinical Psychologists or Social Workers from volunteering to extend beyond the 180-days or for rotations that are more frequent. Such requests for extension will be encouraged in order to provide continuity and to minimize turbulence and replacement pool requirements.

6. Continued support to ongoing operations may require periodic revisions to this policy. Annual reviews to this policy will occur to ascertain impacts on operational continuity, readiness, and effect on subsequent recruiting and retention.

7. Implementation guidance will be published separately. Exceptions to this policy and the implementation guidance will not be made unless approved by the undersigned.

8. The Secretariat and DCS G-1 points of contact for this memorandum are COL Scott Frazier at (703) 695-4402 or scott.t.frazier.mil@mail.mil and COL Kimberley DeJesus at (703) 695-7874 or kimberley.d.dejesus.mil@mail.mil.

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SUBJECT: Army Medical Department (AMEDD) Reserve Component (RC) 180-Day Rotation Policy

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9 MAY 2019

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Implementation Guidance for the Army Medical Department (AMEDD) Reserve Component (RC) 180-Day "Boots-on-the-Ground" (BOG) Rotation Policy

1. References

   a. Army Medical Department (AMEDD) Reserve Component (RC) 180-Day Boots-on-the-Ground (BOG) Rotation Policy

   b. Title 10, United States Code, Section 12302.

   c. Title 10, United States Code, Section 12304.

2. Purpose. To provide specific implementation guidance for the AMEDD RC 180-Day BOG Rotation Policy.

3. Background: On 08 May 2019, the Assistant Secretary of the Army (Manpower and Reserve Affairs) (ASA (M&RA)) approved the AMEDD RC 180-Day BOG Rotation Policy. This policy supports retaining RC providers during periods below full scale conflict. On 09 June 2010, the National Guard Bureau (NGB) implemented a 180-Day BOG policy for deployment of Physician Assistants (PA) (65D) and those with an authorized specialty assigned to a 65D position in order to avoid provider shortfalls.

4. Scope.

   a. The 180-Day BOG Rotation Policy is applicable to the Army National Guard (ARNG), the Army Reserve (USAR), and RC United States Army Special Operations Command (USASOC) officers in the following specialty skills: Veterinary Corps (64A-F), Physician Assistant (65D), Nurse Practitioner (66P), Behavioral Health Nurse Practitioner (66R), Clinical Psychologist (73B), and Social Worker (73A). Officers who possess the aforementioned AOCs and are in the key leadership positions of Commander, Deputy Commander for Clinical Services (or equivalent), Officer-in-Charge of a Forward Surgical Team/Forward Resuscitative Surgical Team, and those in Command Surgeon or Command Staff Veterinarian positions at the Corps, Division and Brigade level (including Special Operations Command equivalent), are excluded from this policy.

b. The US Army will make every effort to minimize the mobilization process time for 180-Day BOG rotators.

c. Individual orders should be processed for a 365-day period and will be annotated with remarks that the total mobilization period will not exceed 210 days door-to-door and 180 days BOG. This includes the necessary pre- and post-deployment processing and "right seat ride" or transfer of authority (TOA) in theater. All 180-Day BOG rotations for Outside Continental United States (OCONUS) assignments start the initial day of arrival in theater from CONUS and end on the day of departure from theater. Deployment and redeployment airflow will be managed to keep the total length of mobilization to a maximum of 210 days. All involuntary extensions beyond 210 days require ASA (M&RA) approval. However, voluntary extensions do not require ASA (M&RA) notification and will be processed expeditiously according to individual component policy. All 180-Day BOG rotations for CONUS assignments start the day after completion of Soldier Readiness Processing (SRP) and end on the day of departure from assigned duty station. Reassignment to another or alternate duty location does not affect the start of the 180-Day BOG.

d. The pre- and post-mobilization periods must be minimized to allow personnel to take accrued leave without exceeding the total 210 days door-to-door. Soldiers will be given every opportunity to take accrued leave within the 210 days of mobilization. The 210 day limit may be voluntarily extended for the purpose of using leave, to include ordinary and Post Deployment Mobilization Respite Absence (PDMRA) leave when the failure to utilize leave would result in the loss of days earned. If the Soldier chooses not to take leave, he/she will have the option to cash-in leave.

e. The 210-day total duration of mobilization is a maximum. Every effort should be made to reduce this total mobilization time.

f. The Army will make every effort to manage AMEDD mobilizations such that the period between mobilizations will be at least 36 months (1095 days) to the maximum extent possible, but in mission critical circumstances compressed to not less than 24 months (730 days) between deployments. The NGB and Office of the Chief, Army Reserve (OCAR) must initiate requests through the Office of The Surgeon General (OTSG) for approval by ASA (M&RA) to deviate from the 180-Day BOG rotation policy to utilize certain providers earlier than the stated minimum stabilization period.

5. Responsibilities.

a. In a joint meeting ARNG, OCAR, OTSG and Forces Command (FORSCOM) agreed that the United States Army Medical Command (USAMEDCOM) would be the executive agent for management of the AMEDD RC 180-Day BOG rotation process.

b. The Theater Combatant Commander will notify FORSCOM and USAMEDCOM of any changing (or new) requirements no less than 270 days prior to the date when requirements are due in theater. For CONUS support, the installation Commander will notify USAMEDCOM of changing requirements. Requirements will be given to NGB/USARC no less than 210 days prior to the Mobilization Station Arrival Date (MOBSAD).

c. Regional Health Commands (RHCs) must notify USAMEDCOM (through chain of command) of any projected voluntary extension of a 180-Day BOG rotator to ensure effective management future rotations and preclude redundant fill of requirements.

d. All veterinarians and clinicians identified for 180-Day BOG rotation must be pre-certified for deployment. NGB, USARC and Human Resources Command (HRC) must ensure that each individual is medically deployable, credentialed, has appropriate security clearance, completed Basic Officer Leader Course requirements (or equivalent), and is otherwise deemed fully deployable before providing the name to USAMEDCOM.

e. One hundred and twenty (120) days prior to a Soldier arriving at the mobilization station, the follow-on BOG rotator will be identified by NGB, USARC, or HRC in accordance with (IAW) FORSCOM mobilization requirements guidance.

f. FORSCOM will ensure optimum pre-mobilization processing through the CONUS Replacement Center (CRC) is conducted as expeditiously as possible to avoid unnecessary delays.

6. Pre-Deployment and Training.

a. Pre-deployment processing will make optimal use of home station to ensure the deploying provider is prepared for processing by the CRC. Soldiers must be screened at home station upon being identified/alerted. This must include medical, dental, credentialing, security clearances, and finance review. HRC is responsible for screening Individual Mobilization Augmentee (IMA), Inactive National Guard (ING), Individual Ready Reserve (IRR), and Retired Reserve personnel. All screening deficiencies must be addressed and corrected prior to reporting to the CRC.

b. USAMEDCOM in conjunction with HRC must ensure effective communication and processing of ING, IRR, IMA, and Retired Reserve personnel.

c. 180-Day BOG rotators will complete all online training, security, credentialing and travel requirements prior to arrival at the CRC so that the 210-day door-to-door mandate will be achieved without affecting the BOG period.

d. AMEDD RC 180-Day BOG rotators will review current clinical practice guidelines.

e. Units will leverage all avenues and training opportunities to complete mandatory training prior to a Soldier being issued a mobilization (MOB) order.

7. CONUS Replacement Center (CRC).

a. CRC personnel will process 180-Day BOG rotators as quickly as possible, pre- and post-deployment, in order to decrease the time spent at the CRC and avoid unnecessary delays. The 180-Day BOG rotator will follow the CRC pre-deployment and post-deployment schedule. All 180-Day BOG rotators are required to complete a pre-deployment health assessment and all demobilization health requirements, to include the post deployment health assessment, a Separation History and Physical Exam (SHPE), and ensure medical readiness deficits (PHA, Dental Exam) are remediated prior to release from active duty (REFRAD).

b. All Soldiers reporting to the CRC must be fully deployable. Soldiers found medically non-deployable will be processed IAW appropriate medical and disability guidance. If a Soldier, reporting for active duty, fails to meet deployment medical standards within 25 days (due to a pre-existing medical condition), the Solider may be released from active duty and returned to their prior Reserve status and home of record. Upon resolution of the disqualifying medical condition, the Soldier may be eligible for a subsequent deployment order. If a Soldier, reporting for active duty, meets medical deployment standards, they will continue on active duty for a period not to exceed 210 days. If a Soldier incurs a line-of-duty injury (LOD), the pertinent medical/disability policies will be followed to determine appropriate disposition of the Soldier.

c. All individual replacements mobilizing to OCONUS locations will report to the Ft. Bliss CRC, unless Department of the Army (DA) further modifies this requirement. All CONUS replacements will report directly to the installation of assignment or to a designated Mobilization Force Generation Installation (MFGI) location as directed per the mobilization order.

8. Transportation.

a. The First Army Deputy Chief of Staff, G4, through United States Transportation Command (USTRANSCOM), will ensure expeditious travel from mobilization station through CRC to mission location and return. CRC reservations must be scheduled in coordination with routine channel flights to eliminate unnecessary time between training completion and subsequent departure. This may require liberal use of commercial air in lieu of USTRANSCOM provided military air.

b. First Army will provide transportation in order to minimize mobilization (MOB) and demobilization (DEMOB) time.

c. Privately owned vehicle use will be authorized IAW Joint Travel Regulation, paragraph 3310 for CONUS mobilizations only.

d. Gaining commanders will coordinate timely travel from mission location to CRC through USTRANSCOM.

9. Exceptions.

a. A waiver, through OTSG to ASA (M&RA), will be required if a mobilization period involuntarily exceeds 210 days. However, voluntary extensions do not require ASA (M&RA) notification and will be processed expeditiously according to individual component policy.

b. A gaining Commanders who determine their mission is significantly degraded by following the 180-Day BOG Rotation policy must submit a request for exception (clearly justifying why they need to deviate from the established policy) for approval by the ASA (M&RA).

10. Tracking.

a. Medical Protection System (MEDPROS) will be used to document all Individual Medical Readiness (IMR) and Dental Readiness.

b. The 180-Day BOG Rotator Module of the Medical Operations Data System (MODS) will be used to track 180-Day rotations. USAMEDCOM will monitor data input and build Professional Filler System (PROFIS) requirements. NGB and USARC 180-Day BOG program managers will build FORSCOM requirements and input resources for fill and management of all 180-Day BOG AOCs.

c. USAMEDCOM is the executive agent for all 180-Day BOG rotations. The NGB, USARC, or HRC designated 180-Day BOG Program Manager will track the rotations of 180-day BOG personnel and coordinate any necessary personnel backfill through USAMEDCOM.

11. The Secretariat and DCS G-1 points of contact for this memorandum are COL Scott Frazier at (703) 695-4402 or scott.t.frazier.mil@mail.mil and COL Kimberley DeJesus at (703) 695-7874 or kimberley.d.dejesus.mil@mail.mil.

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