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ARNG-CSG

13 December 2023

MEMORANDUM FOR Officer Personnel Managers of All States, Puerto Rico, Guam, the Virgin Islands, and District of Columbia

SUBJECT: Army Medical Department Officer Personnel Management Guidance (PPOM 23-048)

1. This policy supersedes PPOM 22-016 AMEDD Officer Personnel Management Guidance.
2. References. See Enclosure 1.
3. Purpose. To provide guidance to the State Officer Personnel Managers (OPMs) regarding Army Medical Department (AMEDD) officer personnel management.
4. Accessions. Latest accession guidance and criteria across all AMEDD branches
 - a. Officers transferring from one Area of Concentration (AOC) to another within the same AMEDD branch and Medical Functional Area are completed as a re-classification action and are subject to the requirements listed in Department of the Army Pamphlet (DA PAM) 611-21. They also require Army National Guard Office of the Chief Surgeon (ARNG-CSG) approval. Note: AOC change from 66H to 66P currently requires Direct Commission and Accession (DCA) boarding.
 - b. All appointments and reappointments to an AMEDD branch require boarding action. State AMEDD recruiters will complete and submit the DCA packet to United States Army Recruiting Command (USAREC) for approval. Applicants pending board results from USAREC may be screened by a State Federal Recognition Board (FRB) prior to publication of the USAREC board results. A conditional Statement "pending USAREC selection board" will be added to the comments on the NGB Form 89. The individuals will not receive their Oath of Office prior to publication of the USAREC board results. Individuals not requiring USAREC Board: initial AMEDD appointments through ROTC and US Military Academy, current AMEDD officers coming from active component, USAR, and IRR without a break in service.
 - c. Officer Candidates (OC) are not authorized to commission AMEDD without prior USAREC approval. Officer Candidates will be boarded through DCA and delay their commission until OCS graduation.

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d. Basic branch officers that previously held an appointment as an AMEDD officer and are requesting re-appointment as an AMEDD officer are required to submit DCA packet for boarding action by USAREC. Entry Grade credit is calculated IAW DoDI 6000.13. Officers could lose rank and/or time in grade in accordance with the current fiscal year phase-in point's memorandum following calculation. Exception to this policy is AV/15 series officers that board MS/67J; these officers receive day for day credit awarded by USAREC during the DCA process. USAREC holds the authority for day for day credit.

e. Direct appointment AMEDD officers who did not commission through OCS, ROTC, or US Military Academy are ineligible to reappoint as a basic branch officer. Specialty branch officers with a commissioning source who desire assignment to the basic branches must apply for branch transfer under the provisions of National Guard Regulation (NGR) 600-100.

f. Medical and dental students do not require an additional DCA Packet after graduation. Reappointments from a medical/dental student to Medical/Dental Corps requires a State FRB, and FEDREC packet submitted through eTracker. Please refer to the Enclosure 2.

g. Interservice Physician Assistant Program (IPAP) and University of Kentucky Master of Social Work (UK MSW) appointments/reappointments.

(1) IPAP students do not require a DCA packet for reappointment. Reappointment requires State FRB, and FEDREC packet submitted through eTracker. Please refer to Enclosure 2.

(2) UK MSW students will require DCA packet and USAREC approval upon acceptance and reappointment to Medical Service Corps (MS). Once graduated, UK MSW students will require a change of AOC memorandum requesting AOC change through the ARNG-CSG, AMEDD Personnel Program Manager. Please see Enclosure 3.

h. Constructive Credit Calculations. Preliminary DA5074s will be completed during the DCA process and verified by USAREC. During the process States, Territories, and Districts are able to adjust date of rank and rank awarded with the approved DA5074 prior to FEDREC being published. Note: Approved DA5074s should be uploaded in iPerms as a source document. States can pull the DA5074 from HRP eTracker once approved. Please reach out to the AMEDD Personnel Program Manager if you have a question regarding deduction or promotion in rank prior to making the adjustment.

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Soldier may incur a debt if rank is awarded erroneously. Reappointing may require the Soldier to have a deduction in rank. Please see Enclosure 4 for reference.

5. Personnel Reporting. The AMEDD is required to provide an annual report to Congress on the status of its medical force/structure by specialty. While DA PAM 611-21 provides guidance in the personnel accounting for the Army, the variations for the special branches are spread throughout the regulation. AMEDD reporting requirements are identified below:

a. All AMEDD officers will have their primary AOC shown in Integrated Personnel and Pay System-Army (IPPS-A) IAW the medical specialty training they have received (for example residency training). Officers who are entering through the USAREC boarding process are found qualified for their AOCs by that board and their AOC will be loaded in IPPS-A upon accession, regardless of Basic Officer Leaders Course (BOLC) completion.

(1) Reference the IPPS-A ARNG Supplemental User Manual, 24 October 2023 for proper IPPS-A coding.

(2) No AMEDD officer will carry a primary AOC of 00A, 00D, 01A, 05A, 42B/H, 62B, 65X, 67A, 67B, 67C, 67D, or 90A.

(3) No AMEDD AOCs are awarded for "on-the-job training" or solely by assignments.

b. AMEDD officers will carry AOCs consistent with their branch. AMEDD officers are not authorized to carry multiple branches or AOCs (except MS officers who may dual track 90A). For example, a former Aviation/15A (AV) officer who has been re-appointed as an MS/67J officer cannot carry AV as an additional branch, nor can they carry their former 15 series AOC as a secondary.

c. Medical Corps (MC), Dental Corps (DC), Army Medical Specialist Corps (SP) and Veterinary Corps (VC) officers awarded AOCs will reflect medical training received and in which they maintain certification, regardless of position requirements. Residency contracts/completions must be loaded in IPERMS.

d. Army Nurse Corps (AN). All AN officers awarded 66 series AOCs will reflect the training they have received and in which they maintain certification. States will validate accuracy of current AOCs. This is accomplished by verification of military education, civilian education, and licensure/certification.

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e. IPAP and UK MSW participants. ARNG-CSG will publish yearly IPAP and UK MSW announcements and subsequent selection/assignment notifications. See the State Specialty Branch recruiter for additional information.

(1) IPAP students will carry the primary AOC of 00E65/Branch MS and will be assigned to a temporary TDA position for the duration of their program. These positions will be authorized by ARNG-HRH and will be carried in IPPS-A IAW NGR 600-100.

(2) UK MSW students will carry the primary AOC of 00E73/Branch MS and will be assigned to a temporary TDA position for the duration of their program. These positions will be authorized by ARNG-HRH and will be carried in IPPS-A IAW NGR 600-100

f. Medical Service Corps.

(1) MS officers will not carry AOCs of 67A-D as these are duty position AOCs only. MS officers may occupy a 67A-D position based on their competitive categories as follows:

(a) 67A – 70 series MS officer

(b) 67C – 72 series MS officer

(c) 67D – 73 series MS officer

(2) Award of secondary AOC 90A

(a) IAW DA PAM 611-21, DA PAM 600-4, and NGR 600-100 completion of Logistics CCC (LOGC3) and/or the Support Operations Course enable secondary award of 90A. Submit 90A Secondary AOC award request to ARNG G1 Personnel Policy Division (HRH-O) through IPPS-A utilizing HRH-O Logistics Checklist (Enclosure 5). HRH-O will coordinate with ARNG-CSG and the Logistics (LG) Personnel Developers for final disposition of secondary AOC award.

(3) AMEDD personnel will not carry a primary AOC of 90A, nor does that count as a functional area for promotion to MAJ.

(4) Medical/Dental Student Participants. Medical students will carry the primary AOC of 00E62/Branch MS. Dental students will carry the primary AOC of 00E63/Branch MS. 00E62 and 00E63 will be assigned to a temporary TDA position for the duration of

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their program. These positions will be authorized by ARNG-HRH and carried in in IPPS-A IAW NGR 600-100.

(5) Area of Concentration (AOC).

(a) 70B is limited to company grade officers.

(b) 70 series officers cannot be promoted to the rank of MAJ without completion of an ATRRS approved AOC producing course. Once an AOC producing course is complete all awards of 70B will be withdrawn. State OPMs will award the appropriate 70 series AOC for which the officer qualifies.

g. Medical Corps (MC) – States will validate residency completion (or in progress) status of all MC officers and ensure that the appropriate primary AOCs, Skill Identifiers, and 9-Series Proficiency Designators are loaded into IPPS-A and Centralized Credentials Quality Assurance System (CCQAS). Refer to Enclosure 6 for AOC listing.

(1) 60A – AOC is a duty position only and will not be listed as primary, secondary, or tertiary AOC of the officer.

(2) 62B - is a duty position only. Physicians are not authorized to be coded 62B, all MC Providers should have their AOC coded in IPPS-A based on their residency contract.

(3) F8 - Attendees of the six-week Fort Novosel course will be awarded the F8 Additional Skill Identifier (ASI). For those serving in 62BF8 duty positions, F8 should be listed as their primary Skill Identifier (SI). All other MC Providers should use the 9 series proficiency designators as their primary SI.

(4) All MC officers MUST have a 9A-9E Medical Proficiency Designator loaded in IPPS-A IAW DA Pam 611-21. These are critical as they indicate both the proficiency level as well as the deployability of the officer. 9A-9E series designators will take precedence over any other SI the officer may be authorized to carry.

(a) 9E - In the first year of a Graduate Medical Education (GME) program, which upon successful completion will result in the MPD 9D. Non-mobilization asset.

(b) 9D - Includes all personnel in specialty/AOC training, following completion of first year of graduate medical education (FYGME). Not an involuntary mobilization asset.

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(c) 9C - Completion of formal training to meet the American Specialty Board requirements of approved residency or fellowship in a recognized teaching center in the professional field mobilization asset.

(d) 9B - Certification by the American Specialty Board in a particular specialty. Mobilization Asset.

(e) 9A – This designation recognizes the highest level of professional accomplishment within the Army Medical Department (AMEDD). Yearly MILPER messages solicit applications across all components. Those results are determined by the Surgeon General's Classification Board on an individual basis.

6. Officer Evaluation Reports (OERs) - Newly commissioned AMEDD officers begin their military careers with the necessary skill sets to perform their assigned duties even before successfully completing the Officer Basic Leaders Course. These officers are entitled to receive mandatory and optional OERs as detailed in chapter 3 of AR 623-3. All OERs for “students” should read “Specialty Branch Officer” for the duty title and make minimal reference to student status to prevent HRC kick back. To receive an OER, the rated officer must have been assigned under a rater for 120 calendar days. For more information on “mandatory and optional” reports, refer to Section IX and X of AR 623-3.

7. Important policies and guidance.

a. Manning Strategy for Army National Guard (ARNG), Army Medical Department (AMEDD) Personnel in Support of Contingency Operations and Preplanned Missions (PPOM 20-018). Revises the manning process for Healthcare Providers (HCPs) sourcing for requirements above the Modified Table of Organization and Equipment (MTOE) strength of the sourced units. This process only applies to sourcing of HCPs to fill 90/180 day Boots on the Ground (BOG) rotations that exceed the MTOE strength of the unit. ARNG-CSG will analyze mission requirements and recommend a sourcing solution to the ARNG G3 to ensure that all AMEDD 90/180-day rotations will be filled. ARNG-CSG BOG Program Manager can be contacted at ng.ncr.ngb-arng.mbx.csg-medops@army.mil. Please see the MILSUITE Link for Personnel Policy Memorandums (PPOM) Library: [Group: ARNG Personnel Policy Division \(ARNG-HRH\) |milBook Home \(milsuite.mil\)](#)

b. Mandatory Removal Date (MRD) Extension Requests (PPOM 23-014). MRD Handbook, outlines all processes and procedures for requesting an extension beyond MRD for age or years of commissioned service. Currently serving MC and DC officers may be extended beyond age 68 with Assistant Secretary of the Army Manpower and

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Reserve Affairs (ASA (M&RA)) approval. Please see the MILSUITE Link for Personnel Policy Memorandums (PPOM) Library: [Group: ARNG Personnel Policy Division \(ARNG-HRH\) |milBook Home \(milsuite.mil\)](#)

c. Flexible Training for Army National Guard Clinical Professional Officers (PPOM 16-045). Authorizes alternate training events that enable the medical professional to receive credit for drill, as well as delineating the minimum attendance required of medical professionals. Program is subject to Commander's approval. Please see the MILSUITE Link for Personnel Policy Memorandums (PPOM) Library: [Group: ARNG Personnel Policy Division \(ARNG-HRH\) |milBook Home \(milsuite.mil\)](#)

d. Continued Medical Education Program Management and Execution (PPOM 18-006). Authorizes licensed providers to attend civilian training sessions to meet their licensing requirements. Please see the MILSUITE Link for Personnel Policy Memorandums (PPOM) Library: [Group: ARNG Personnel Policy Division \(ARNG-HRH\) |milBook Home \(milsuite.mil\)](#)

e. PPOM 17-004 Army National Guard Specialty Branch Commissioned Officer Over-Grade Policy and PPOM 17-005 ARNG Over-strength Policy. Please see the MILSUITE Link for Personnel Policy Memorandums (PPOM) Library: [Group: ARNG Personnel Policy Division \(ARNG-HRH\) |milBook Home \(milsuite.mil\)](#)

f. Health Professions Officer Special and Incentive Pay Plan, 31 Jul 23. Clinical officers on AGR, ADOS, and FTNG-OS are encouraged to contact the ARNG-CSG AMEDD Personnel Manager directly to receive the most up to date information on eligibility and initiation of active-duty special pay. AGR officers are no longer eligible for Reserve Component (RC) special pays to include bonuses and contracts. AGR officers are to ensure Reserve Component (RC) special pay contracts are terminated. Failure to terminate could result in recoupment.

g. NGR 600-100 dated 22 Nov 22 outlines all Temp TDA (TTDA) requirements. Per guidance, all temporary position requests for the following AMEDD officers will be sent directly to ARNG- HRH. Upon receipt of the request, ARNG-HRH will staff with the ARNG-CSG to determine templet position authorization.

	Para/Line	AOC/Branch
(1) Medical Students	998O-01	00E62/MS
(2) Dental Students	998O-01	00E63/MS
(3) IPAP Students	998O-01	00E65/MS

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(4) MSW Students 998O-01 00E73/MS

8. Promotions.

a. All AMEDD promotion packets will be reviewed by ARNG-CSG and processed by ARNG-HRP for federal recognition.

b. Civilian Education

(1) All AOCs must meet the civilian requirements in DA PAM 611-21.

(2) Promotions to 1LT have no civilian education requirements beyond those necessary for appointment.

c. Military Education. Reference DA PAM 600-4 to help determine initial Professional Military Education (PME) requirements.

(1) Direct Commission AMEDD officers who did not complete Army ROTC, Army OCS, or the US Military Academy who are appointed on or after 1 October 2017 must attend the Direct Commission Course (DCC) and BOLC-B. Those that commissioned prior to 1 October 2017 are grandfathered into previous requirements. Contact ARNG Student Advisor, Medical Center of Excellence (MEDCoE), for the most current guidance.

(2) There are two versions of AMEDD BOLC-B at Ft. Sam Houston, resident long course (6-8-C20B) and resident short course (6-8-C20B (RC)).

(a) The resident long course is required for all 67J officers, 70 series officers, ROTC AN graduates, and ARNG 72 series officers.

(b) All other specialties will attend the BOLC-B short (RC) course.

(3) All AMEDD officers must be BOLC-A (DCC, Army ROTC, Army OCS, U.S. Military Academy) and BOLC-B qualified. Prior enlisted and pre-commissioned officers from sister services and non-AMEDD officers transferring into AMEDD must attend AMEDD BOLC or be awarded equivalent/constructive credit by Department of the Army G3/5/7. For DCC, BOLC-B, and CCC constructive or equivalent credit, refer to Enclosure 7 for eligibility and packet requirements.

(4) All officers have common training requirements that specify the Knowledge, Skills, and Behaviors (KSB) required of every officer. KSBs are outlined in AR 350-1

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and are imperative to the lifelong learning and self-development that prepares all officers for success. To maintain these KSBs it is highly recommended that all AMEDD officers continue their military education from BOLC to ILE complete. Per DA PAM 600-4, MILED requirements for promotion state, "With the exception of MS officers within MFA 70 or AOC 67J, completing a BOLC appropriate to their AOC satisfies the minimum military education requirements for promotion to any grade for all AMEDD officers. However, to remain competitive at DA Selection Boards for promotion to the next higher grade and continued professional development, all AMEDD officers are strongly encouraged to continue with military education beyond BOLC." To remain competitive extends to all promotion boards an AMEDD officer may be eligible.

(5) MFA 70 series and AOC 67J officers are considered MEL 4/JPME I complete at the conclusion of the Command and General Staff College Intermediate Level Education Common Core (CGSC-ILE CC). The CGSC Advanced Operations Course (AOC), while encouraged to remain competitive for DA mandatory boards, is not a requirement for MFA 70 series and AOC 67J officers. Outlined below is how to code AMEDD officers to code completion of PME in IPPS-A.

(a) An Officer that just has ILE-CC the code is either: "D2" ILE-CC for Resident (4 month TNG) or "D3" ILE-CC correspondence (generally 3 phases).

(b) An Officer that has ILE and AOC the code is either: "DD" ILE 12 month Resident; "DE" ILE-CC & AOC (ATRRS course: "1-250-C3B (DL).

(c) An officer who has completed ILE-CC the code is: "DF" ILE Functional Area Qualification (this gives them credit for ILE & AOC).

(d) An officer who decides to go to AOC, they are first coded as "DF" and then when they finish AOC the G1 should add another record under the same line and mark it as completed with mil code "DE".

(6) All AMEDD officers must be qualified in their current duty position to be unit vacancy promoted to CPT unless selected by a DA mandatory board. All 70 series officers must hold the AOC corresponding to their position for promotion to MAJ, regardless of DA selection.

(a) 67J officers must complete the AMEDD Captains Career Short Course (67J/90A) and AV Captains Career Course prior to being eligible for promotion to MAJ. 67J officers must meet all other AOC professional requirements in DA PAM 600-4. Refer to DA PAM 600-4 and Enclosure 8.

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(b) 72 series officers must complete the Principles of Military Preventative Medicine Course prior to being eligible for promotion to MAJ. They must meet all other AOC professional requirements in DA PAM 600-4, with exception to licensing and certification requirements.

(7) AMEDD officers may be promoted in a position that has excess personnel assigned against it provided they are the primary slot-holder.

(8) Only MC and DC officers selected for promotion by a DA mandatory board may be extended Federal Recognition in the higher grade up to the rank of COL in any AOC appropriate position regardless of the grade of the position. Title 10 U.S. Code Section 12005 (3) allows medical and dental officers in the rank of LT- COL not to be counted for the purposes of Strength in Grade reporting. However, AMEDD officers assigned to and serving in non-AMEDD duty positions will count for the purposes of Strength in Grade reporting.

(9) Promotions are not authorized for officers assigned to temporary positions, except for valid 00E62, 00E63, 00E65, and 00E73 (AMEDD) students who meet all requirements for DA mandatory board promotion, to include completion of BOLC. Students who are promoted could be subject to grade reduction at time of graduation due to DA 5074, Constructive Credit calculation IAW DoDI 6000.13.

(10) Any SP, AN, VC, or 71-73 series MS officer selected for promotion by a DA mandatory board may be promoted in a position two grades over, up to LTC/O-5. Over-grade promotions must remain IAW with PPOM 17-004 Army National Guard Specialty Branch Commissioned Officer Over-Grade Policy.

(11) 67J/70 series officers may not be promoted over grade with one exception. Civil Support Team 70H qualified officers may promote to MAJ in the Medical Operations position.

9. Assignments.

a. Non-AMEDD officers (basic and other special branch officers, warrant officers, and enlisted Soldiers) will not be assigned or attached to AMEDD positions.

b. Simultaneous Membership Program (SMP) cadets may be assigned as excess against MS officer positions but must not perform medical duties and may not directly supervise medical operations.

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c. AMEDD officers will only be assigned to positions for which they are qualified by their AOC with the following exceptions:

(1) Current ARNG force structure directly supports Role I and Role II level of care. This distinction requires that only those specialties substitutable with the 62B duty position IAW AR 601-142 are qualified for assignment.

(2) Any AMEDD officer is eligible for assignment to 05A positions.

(3) Assignment to 01A positions for AMEDD officers other than 70 series MS officers is discouraged for extended periods. The officer must also be qualified to perform the mission that the position requires and should be returned to an appropriate AMEDD position at the earliest possible opportunity.

(4) AMEDD officers may not hold non-AMEDD AOCs or be assigned to non-AMEDD positions except for 70 series MS officers. 70 series MS officers can be assigned to 01A, 90A, and 42B/H positions.

(5) 62B positions - The AMEDD's intent is for primary care physicians to be assigned to these positions. Substitutions are authorized as stated above and published in the yearly substitutability list. See Enclosure 9. It is vital that the ARNG recruits for the needs of deployment in the Role I/Role II battlefield, not Inactive Duty Training duties, such as performing physicals and Periodic Health Assessments.

10. Licensure / Certification – All ARNG licensed/privileged providers are required to provide any updated credentials information to the ARNG's agency for centralized credentialing at their earliest opportunity. The agency will then update the Department of Defense Joint Centralized Credentials Quality Assurance System (JCCQAS).

a. The State Surgeon must ensure that all providers are properly privileged prior to performing physical and dental examinations during Inactive Duty Training and Annual Training or being awarded incentive pay or board certification pays.

b. All providers are required to maintain current and unrestricted licensure and are responsible for payment of fees, continuing education, and other requirements of the licensing authority (Chapter 4, AR 40-68). Failure to maintain a current, unrestricted license puts the provider and State at risk of liability. Officers who do not maintain a current license, are not able to be privileged, and are not deployable assets may have their accession/retention bonus affected and subject to recoupment. Actions will be taken to reclassify these officers to another branch, or to remove the officer from service, in accordance with AR 600-8-24 and/or AR 135-175.

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11. The point of contact for this memorandum is CPT Cheyenne T. Carden, AMEDD Personnel Program Manager, Office of the Chief Surgeon, 703-607-8453 or cheyenne.t.carden.mil@army.mil.

9 Encls

1. References
2. FedRec Required Document Slide
3. Request for AOC Change Template
4. Constructive Credit DA5074 Process
5. HRH-O Logistics Checklist
6. AMEDD AOCs MOSs SIs ASIs FY24
7. MOI for BOLC_CCC Equivalent and Constructive Credit
8. 67J PME Comparison Slide
9. FY24 Substitutability List_20231005

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