



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS READINESS AND INTEGRATION ORGANIZATION

14 September 2020

MEMORANDUM FOR IR MEMBERS TO HAND CARRY TO MTFs/FACs

FROM: HQ RIO/CC  
18420 E. Silver Creek Avenue  
Buckley AFB CO 80011

SUBJECT: Individual Reservist Access to MTFs/FACs for Annual Readiness Requirements

1. Individual Medical Readiness (IMR) is a Total Force priority and essential to the successful execution of Air Force missions. For the purposes of IMR related items (dental, immunizations, labs, Physical Health Assessments (PHA), flight physicals) Air Reserve Component members including Individual Ready (IR) Reservists can be seen at any active component Military Treatment Facility (MTF). Sister Service Active MTFs may also be used for immunizations and labs only.
2. The guidance in DoDI 6000.19 Section 3.1 (2) states, "Prioritized services are: Health readiness assessment and authorized medical readiness services for members of the Reserve Components." Additionally, per DHA-PI 6010.01 Enclosure 3, MTFs must support non-activated Reserve Component Service Members based on DoD individual medical/dental readiness policy. Guidance is attached for review.
3. Members do not have to be in status at the time of making the appointment, but they must be in status at the time of the appointment. This can include Inactive Duty Training (IDT), Annual Tour (AT), Reserve Personnel Appropriation (RPA)/Military Personnel Appropriation (MPA) orders or Points Only status. This can be verified by the active component MTF by requesting to see the member's AF Form 40A, *Record of Individual Inactive Duty Training*, or a copy of the member's orders.
4. Physical Fitness Assessments are also a key component of readiness. Members must ensure they are in an approved military status to take their physical fitness assessment. This can include IDT, AT, RPA/MPA orders, or Points Only status. Appropriate duty status is outlined IAW AFMAN36-2136. Members can perform their Physical Fitness Assessment at any local Fitness Assessment Center (FAC).
5. Please do not turn away an IR member when presenting for annual military requirement exams, immunizations, or deployment-related exams. If you have questions, contact HQ RIO/IRM NCOIC TSgt Matthew Stoner at 720-847-3616, Medical Readiness OIC Capt Andrea Morgan at 720-847-3188, or me at 720-847-3696.

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AMY J. BOEHLE, Colonel, USAF  
Commander

4 Attachments:

1. Defense Health Agency: Procedural Instruction, Number 6010.01, 14 January 2020
2. DoDI 6000.19, Section 3: Procedures, 7 February 2020
3. AFMAN 41-210 Tricare Operations and Patient Administration, 10 September 2019
4. AFI36-2905 Fitness Program, 21 October 2013

# ATTACHMENT 1

*DHA-PI 6010.01  
January 14, 2020*

## ENCLOSURE 3

### PROCEDURES

1. HEALTHCARE ENTITLEMENTS AND PROVISION OF SERVICES. The DoD administers the TRICARE Managed Care Health Plan according to Reference (g). Additionally, the MILDEPs are directed to administer healthcare benefits in accordance with Reference (f). The Secretary of Defense administers healthcare benefits for members, retirees, and family members of the uniformed services pursuant to Reference (g).

a. MTFs must provide care without regard to the sponsor's or beneficiary's Service affiliation, rank or grade, in accordance with Reference (h), and in accordance with the patient rights and responsibilities outlined in Reference (i).

b. **MTFs must support non-activated Reserve Component Service Members (RCSMs) based on DoD individual medical/dental readiness policy and Geographic Combatant Command theater-specific deployment requirements/force health protection guidance in accordance with References (j) through (p).**

c. Enrollment in TRICARE Prime at an MTF or TRICARE Prime Remote location with a civilian Primary Care Manager (PCM) is mandatory for all Active Duty Service Members

*DHA-PI 6010.01  
January 14, 2020*

## ENCLOSURE 1

### REFERENCES

- (a) DoD Directive 5136.01, "Assistant Secretary of Defense for Health Affairs (ASD(HA))," September 30, 2013, as amended
- (b) DoD Directive 5136.13, "Defense Health Agency (DHA)," September 30, 2013
- (c) DHA-Procedural Instruction 5025.01, "Publication System," August 24, 2018
- (d) DoD Instruction 6040.45, "DoD Health Record Life Cycle Management," November 16, 2015, as amended
- (e) DoD Directive 6010.04, "Healthcare for Uniformed Services Members and Beneficiaries," August 17, 2015, as amended
- (f) Code of Federal Regulations, Title 32, Part 199
- (g) United States Code, Title 10, Section 1073c
- (h) United States Code, Title 10, Section 1074
- (i) DoD Instruction 6000.14, "DoD Patient Bill of Rights and Responsibilities in the Military Health System (MHS)," September 26, 2011, as amended
- (j) **DoD Instruction 6025.19, "Individual Medical Readiness (IMR)," June 9, 2014**
- (k) **DoD Instruction 6490.03, "Deployment Health," June 19, 2019**
- (l) **DoD Instruction 1241.01, "Reserve Component (RC) Line of Duty Determination for Medical and Dental Treatments and Incapacitation Pay Entitlements," April 19, 2016**
- (m) **DoD Instruction 6200.06, "Periodic Health Assessment (PHA)," September 8, 2016**
- (n) **DoD Instruction 1332.18, "Disability Evaluation System (DES)," August 5, 2014, as amended**
- (o) **DoD Instruction 6040.46, "The Separation History and Physical Examination (SHPE) for the DoD Separation Health Assessment (SHA) Program," April 14, 2016**
- (p) **DoD Instruction 6490.04, "Mental Health Evaluations of Members of the Military Services," March 4, 2013**
- (q) Health Affairs Policy 11-005, "TRICARE Policy for Access to Care," February 23, 2011

## ATTACHMENT 2

*DoDI 6000.19, February 7, 2020*

### SECTION 3: PROCEDURES

#### 3.1. PRIORITIZING MEDICAL SERVICES AT MTFS.

a. The direct care system will provide the medical services listed in Paragraphs 3.1.a (1)-3.1.a (5). Services not in one of these categories may be provided only when additional capacity exists, and when provision of such services will not interfere with delivery of prioritized services. Prioritized services are:

(1) Evaluation and treatment of active component service members to maintain and restore readiness.

(2) Health readiness assessment and authorized medical readiness services for members of the Reserve Components.

(3) Evaluation and treatment of eligible beneficiaries, including family members and retirees, by military health care providers to maintain the operational medical skills of those providers.

(4) Primary care services to non-military patients by civilian or contractor personnel if:

(a) The primary care services support is necessary to maintain DoD graduate medical education or other DoD medical education and training programs; or

(b) The purchased care component of TRICARE is unable to meet patient primary care needs.

ATTACHMENT 3

**2.2. RC Members.** MTFs will administer health benefits to RC service members on AD tours, on AD orders, and under circumstances directed in Department of Defense Instruction (DoDI) 1241.01, *Reserve Component (RC) Line of Duty Determination for Medical and Dental Treatments and Incapacitation Pay Entitlements* and AFI 36-2910. (T-0).

2.2.1. When not in an Extended Active Duty military status (orders for greater than 30 days), TRICARE Early Mobilization or Transitional Assistance Management Program status; RC member military healthcare is limited. Refer to DoDI 1241.01 for entitlements.

2.2.2. RC service members placed on orders for more than 30 days for non-contingency related operations are authorized TRICARE benefits equal to the AD component. Additionally, TRICARE benefits are extended to the RC service member's authorized family members during the same period.

2.2.2.1. Officer direct accessions: Members commissioned as reserve officers in the uniformed services may be entitled to full medical and dental benefits prior to commencing AD service on Extended AD orders when: Extended AD orders will be issued but have not been issued yet, or the orders have been issued but the member has not yet entered AD; and the member does not have healthcare insurance and is not covered by any other health plan. Reference 10 USC § 1074.

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2.2.3. RC service members ordered to Federal AD for more than 30 days in support of contingency operations are also authorized full TRICARE benefits. Healthcare coverage is also extended to each of the RC service member's authorized family members. Additionally, if the RC service member is issued delayed-effective-date AD orders for more than 30 days in support of a contingency operation, the member and sponsored family members are eligible for early TRICARE medical and dental benefits beginning on the latter of either: (a) the date orders were issued or (b) 180 days before the member reports for duty or is activated to AD.

2.2.4. Air Reserve Component (ARC) members do not have to be in a duty status to make an appointment. However, the member must show they are on duty status (active, inactive or points only) at the time of any treatment/care (i.e. any annual military requirement exam, immunization, or deployment-related exam). (T-1). MTFs verify ARC members are in a duty status (active, inactive, or points only) for annual military requirements such as Periodic Health Assessment, flight physicals and immunizations with the AF Form 40A, *Record of Individual Inactive Duty Training*, or a copy of the member's orders.

**2.3. Foreign Forces and Their Dependents.** MTFs will provide healthcare to foreign forces, and their eligible dependents when applicable, in accordance with DoDI 6025.23, *Health Care Eligibility Under the Secretarial Designee (SECDES) Program and Related Special Authorities*, DoDI 6015.23, *Foreign Military Personnel Care and Uniform Business Offices in Military Treatment Facilities (MTFs)*; DoDI 1000.13, *Identification (ID) Cards for Members of the Uniformed Services, their Dependents, and other Eligible Individuals*. (T-0).

## ATTACHMENT 4

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7.3.3.1. IRs who perform duty at a location outside their commuting area may perform their FA with an AF unit at or near their home, with RegAF commander's approval. The Airman's RegAF UFPM will coordinate a test date/time with the FAC at the AF unit that will be conducting the FA. (T-1). The FAC conducting the FA will forward or input the test results into AFFMS II and forward a copy to the owning FAC and UFPM. (T-1).

7.3.4. Members must be in a military duty status during assessment IAW paragraph 2.31.8.

7.3.5. ARC members may not apply personal physical fitness activities for the purpose of obtaining participation credit for AT, UTA, IDT, or additional training periods.

7.3.6. All Participating Individual Ready Reserve (PIRR) members in the Civil Air Patrol United States Air Force (CAP-USAF) and Air Liaison Officer (ALO) programs are authorized to perform the FA only once per year