

Program Authorization: Appointment of physicians in residencies and fellowships in the medical corps (MC) of the U.S. Navy Reserve for inactive duty, designator 2105, and concurrent enrollment in the financial assistance program (FAP) leading to active duty in the MC, U.S. Navy. Medical Department and Nurse Corps Officer Community Manager (BUPERS-315) is the active component (AC) MC officer community manager (OCM). Reserve Officer Community Manager (BUPERS-351) is the reserve component (RC) MC OCM.

1. Program Authority: Title 10 U.S. Code sections 2120 through 2128, Accession and Retention Policies, Programs, and Incentives for Military Health Professions Officers (HPOS), DoD Instruction 6000.13 of 30 December 2015.

2. Cancellation: Program Authorization 130B, March 1995.

3. Quota: The number of residencies/fellowships will be determined by the Assistant Secretary of Defense for Health Affairs (ASD (HA)) after consultation with the military departments. The annual goal for Commander, Navy Recruiting Command (CNRC) will be published by Deputy Chief of Naval Operations (Manpower, Personnel, Training and Education) (DCNO N1).

4. Qualifications

a. Citizenship: Applicants must be United States citizens.

b. Age: Applicants must be commissioned before their 42nd birthday. Waivers will be considered on a case by case basis as in line with paragraph 5.

c. Education

(1) Physician (Doctor of Medicine). Graduate of a medical school in the U.S. or Puerto Rico approved by the Liaison Committee on Medical Education of the American Medical Association and licensed to practice medicine or surgery in a State, territory, commonwealth, or possession of the U.S. or the District of Columbia.

(2) Physician (Doctor of Osteopathy). Graduate of a college of osteopathy approved by the American Osteopathic Association and be licensed to practice medicine, surgery, or osteopathy in a State, territory, commonwealth, or possession of the U.S. or the District of Columbia.

d. Physical: In line with the Manual of the Medical Department, Chapter 15 and as detailed in Medical Standards for Appointment, Enlistment, Or Induction in the Military Services, DoD Instruction 6130.03 of 6 May 2018.

e. Duty Preference: Not applicable.

f. Program Specific Requirements

(1) Professional Experience

(a) Be accepted for, or enrolled in a Graduate Medical Education (GME) program. The program must be approved by either the American Medical Association or American Osteopathic Association leading to certification in the specialties designated by the Secretary of the Navy.

(b) Be in good standing and authorized to provide medical care in the GME institution to which attached.

(c) Must have, at a minimum, an educational license to practice medicine, surgery or osteopathy in the state or the District of Columbia where undergoing training.

(2) Training: Officers enrolled in the FAP shall serve on active duty for training, with full pay and allowances in their appointed grade, for a period of 14 days annually, at a location to be designated by program sponsor.

5. Waivers: In cases where the applicant does not meet the age requirement, but otherwise has an exceptional record or proven skillset required by the Navy, a waiver may be authorized in limited numbers. When considering an age waiver request, strong emphasis will be place on undermanned specialties and those with a pattern of missed recruitment goals. If a waiver is requested, then follow the steps below prior to the convening of the selection board.

a. Applicants between the ages of 42 and 57.

(1) Application Contents: The member should formally request a waiver via personal letter and provide justification.

(2) Routing: Age waiver requests will be routed to CNRC. Waivers cannot be sub-delegated below the flag officer level and CNRC will maintain on file written justification for each waiver granted. Additionally, CNRC will coordinate with the appropriate AC or RC MC OCM on each request received.

(3) Approval Authority: CNRC.

(4) Notifying the Applicant: CNRC will notify the applicant of waiver status.

## 6. Accession Source

a. Civilians.

b. Enlisted personnel of any branch of the armed forces (Active or Reserve) provided an appropriate conditional release is authorized. Prior Navy enlisted personnel are required to submit a copy of their enlisted performance summary record in addition to the most recent 3 years of evaluations.

c. Commissioned personnel of any branch of the armed forces (Active or Reserve) who are not otherwise eligible for inter-service transfer or superseding appointment, provided conditional

release (other services only) or contingent release (USN/USNR only) is approved by the member's service component.

7. Indoctrination: Selectees will attend military orientation training at the Officer Development School in Newport, RI.

8. Enlistment: Not applicable.

9. Constructive Entry Credit

a. Entry grade credit will be awarded in line with Accession and Retention Policies, Programs, and Incentives for Military Health Professions Officers (HPOS), DoD Instruction 6000.13 of 30 December 2015 and Appointment of Regular and Reserve Officers in the Medical Corps of the Navy, OPNAVINST 1120.4C, prior to commissioning.

b. Inter-service Transfers: Inter-Service Transfer of Commissioned Officers, DoD Instruction 1300.04, will determine entry grade and date of rank of medical officers transferred from other uniformed services into the MC of the U. S. Navy.

10. Appointment

a. Appointment in the MC, U. S. Navy Reserve, designator 2105, in line with regulations in OPNAVINST 1120.4C.

b. Upon appointment, members will be assigned to the Navy Medicine Accessions Department and Total Force Directorate (BUMED (M1)) for administrative purposes and ordered to the commanding officer of the nearest appropriate naval unit for active duty for training periods only.

11. Service Obligation

a. Eight-year minimum service obligation (MSO). Any portion of the 8-year MSO not served on active duty will be served as a member of the Individual Ready Reserve (IRR). At the discretion of the program sponsor, IRR obligation may be served in the Selected Reserve. Previous residual IRR obligation will be served concurrently with newly incurred IRR obligation.

b. Member shall incur a minimum active-duty obligation of 2 years for the first 1 year, or portion thereof, of program participation. Participation for periods in excess of 1 year incurs an additional obligation of 1/2 year of active obligated service for each 1/2 year, or portion thereof, of program participation.

c. Active-service obligation incurred under this program is in addition to other unfulfilled active-service obligation.

d. Navy MC officers deferred for graduate training before or during an initial active-duty obligation resulting from Armed Forces Health Professional Scholarship Program (AFHPSP) shall incur only the additional active-duty obligation for FAP participation, as calculated in subparagraph 11a above.

e. FAP participation time is not creditable for retirement or pay purposes (longevity).

f. Time in residency training shall not be applied against the 8-year MSO.

g. FAP participants are eligible for consideration for promotion by inactive reserve MC selection boards.

h. All program participants are required to sign a contract which contains the following clause: "I agree to serve any active duty obligation incurred or to reimburse the government for all costs incurred as a result of participation in the program if I fail to complete my obligation under this contract because of action not initiated by the government. This does not relieve me from any obligation to reimburse the government should the action initiated by the government be the result of my own misconduct. The Secretary of the Navy may waive this requirement if it is determined to be in the best interests of the government."

## 12. Pay and Allowances

a. Members shall be entitled to an annual grant, the amount of which is established annually by ASD(HA), to be prorated for any projected partial year of participation.

b. Members will be entitled to a monthly stipend at a rate equal to that established annually by the ASD (HA) for members of the AFHPSP for each month in the program except during periods of active duty for training.

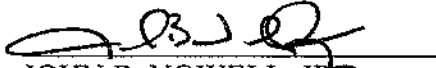
c. Stipend payment will start effective on the date of execution of the oath of office, the date of execution of the FAP contract, or the date of commencement of specialized training, whichever is latest.

d. Acceptance of the aforementioned stipend and grant does not preclude acceptance by the member of payment by the civilian training institution.

e. FAP participants will be assigned to the IRR.

f. Payment of educational expenses incurred by the member is authorized. Such payments shall be limited to educational expenses normally incurred by physicians who are pursuing the same specialized training at the same institution and who are not members of the FAP.

Approved:



JOHN B. NOWELL, JR.  
Rear Admiral, U.S. Navy  
Director, Military Personnel Plans and Policy (N13)

Date:

5/16/19