



CCI 633.06
EFFECTIVE DATE: 3 December 2024

By Order of the Assistant Secretary for Health:

ADM Rachel M. Levine, M.D.

SUBJECT: Assignment Duty Pay

1. PURPOSE: This Instruction establishes the conditions and circumstances under which officers in the of the U.S. Public Health Service (USPHS) Commissioned Corps who are assigned to designated positions may be authorized to receive Assignment Pay (AP). It also sets forth the rates and the mechanism (lump sum or monthly payments) by which AP is paid.
2. APPLICABILITY: This Instruction applies to all Regular Corps Officers on active duty. This Instruction also applies to Ready Reserve Corps officers for any period that the officer is entitled to basic pay.
3. AUTHORITY:
 - 3-1. [37 U.S.C. § 352](#), "Assignment pay or special duty pay"
 - 3-2. [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"
 - 3-3. Commissioned Corps Directive (CCD) [151.06](#), "Assignment Pay"
4. PROPONENT: The proponent of this Instruction is the Assistant Secretary for Health (ASH). The Surgeon General (SG) is responsible for providing supervision of activities relating to the day-to-day operations of the USPHS Commissioned Corps. The Director, Commissioned Corps Headquarters (CCHQ), provides overall management of USPHS Commissioned Corps personnel operations and processes.
5. SUMMARY OF REVISIONS AND UPDATES: This is the second issuance of this Instruction in the electronic Commissioned Corps Issuance System (eCCIS). It replaces the version dated 13 January 2021.
 - 5-1 Removes the Indian Health Service from this policy.

6. POLICY: In order to ensure that the USPHS Commissioned Corps continues to meet its ongoing mission to protect, promote, and advance the health and safety of the Nation, the USPHS Commissioned Corps is authorized to pay AP to officers who are assigned to specific duty locations in designated positions in order to maintain continuity of services at these locations.

6-1. General Policy.

- a. AP is paid on a monthly basis and is pro-rated for partial months. The USPHS Commissioned Corps may also pay AP in annual lump sum payments, as determined by the SG.
- b. AP is in addition to any other pay and allowance for which an officer is eligible.
- c. Concurrent Receipt of AP and Concurrent Active Duty Obligations (ADO).
 - (1) An officer may receive AP and an Accession Bonus (AB), Critical Wartime Skills Accession Bonus (CWS-AB), Incentive Pay (IP), Retention Bonus (RB), and/or Board Certification Incentive Pay (BCIP) for the same period of obligated service (i.e., any resulting ADOs are served concurrently) (see Commissioned Corps Instruction (CCI) [633.01](#), "Special Pays").
 - (2) Training ADO.
 - (a) An officer may receive AP for the same period of any training ADO or commitment except when prohibited in this Subsection (see Section 6-1.c.(2)(b) and (c)).
 - (b) An officer may not receive AP while serving a period of obligated service as a result of participation in the Senior Commissioned Officer Student Training and Extern Program (COSTEP) (see [CCI 371.03](#), "Senior Commissioned Officer Student Training and Extern Program (Senior COSTEP)").
 - (c) An officer who is a graduate of the Uniformed Services University of the Health Sciences (USUHS) medical school may receive AP after successful completion of his/her initial residency.
- d. Commissioned Corps Headquarters (CCHQ) will not pay AP while an officer is in an absence without leave (AWOL) status. An ADO may not be fulfilled during any period that an officer is AWOL and CCHQ will extend the officer's ADO for an equal period of time as the AWOL.
- e. Temporary Duty Assignments (TDY) and Deployments. CCHQ will continue to pay AP to an officer who is on a TDY assignment, or is deployed by the USPHS Commissioned Corps, that is away from the position and/or location for which AP is approved provided that the TDY assignment or deployment does not exceed six months.
- f. Retirement. The Director, CCHQ, cannot approve the voluntary retirement of an officer with an ADO (see [CCI 384.03](#), "Mandatory, Voluntary, and Involuntary Retirement").
- g. For purposes of this Instruction:
 - (1) A position that directly supports the clinical health care mission of the USPHS Commissioned Corps is defined as a position that is in direct support of patient care or has an impact on the health care mission of the USPHS Commissioned Corps.

- (2) A position that can be filled by officers from more than one category and that oversees, manages, or advises on the administration of the agency's health care mission is defined as a Leadership/Multidisciplinary Position.

6-2. Officer Eligibility Requirements.

- a. In order to receive AP a Regular Corps officer must meet each of the following criteria:
 - (1) Be assigned to the Bureau of Prisons (BOP) or Immigration Health Services Corps (IHSC) and assigned to a position and location that requires a specified category/profession/specialty, or assigned to a Leadership/Multidisciplinary Position and location, that is listed in a Personnel Operations Memorandum (POM) issued by the SG.
 - (2) Be in pay grade O-6 or below and assigned to a position that provides direct hands-on clinical patient care, oversees the provision of direct hands-on patient care, directly supports the clinical health care mission of the USPHS Commissioned Corps, or is a Leadership/Multidisciplinary Position.
 - (3) Agree to:
 - (a) Remain on active duty for a two, three, or four-year period in the position assignment that provides direct hands-on clinical patient care, oversees the provision of direct hands-on patient care, directly supports the clinical health care mission of the USPHS Commissioned Corps, or is a Leadership/Multidisciplinary Position; and
 - (b) Not seek a reassignment to another position for the duration of the agreement.
 - (4) Maintain compliance with [CCD 111.03](#), "Conditions of Service," (i.e., meet and maintain license requirements, deployment readiness, security and suitability, health, and weight standards).
 - (5) Receive a satisfactory performance rating on the most recent annual Commissioned Officers' Effectiveness Reports (COER) as required by [CCI 351.01](#), "Commissioned Officers' Effectiveness Report." An officer who is required to have the most recent annual COER and who does not have the COER on file in CCHQ on the date determined by the SG does not meet this criterion.
 - (6) Must not be under investigation for allegations of unacceptable performance or misconduct, and must not have any current (e.g., AWOL within last 12 months, Letter of Reprimand) or pending administrative and/or disciplinary actions.
 - (7) Eligible to remain on active duty for the period specified in the agreement:
 - (a) An officer is not authorized to enter an agreement that will result in an ADO that exceeds the first day of the month following the date the officer reaches 30 years of creditable service for retirement or that will result in an ADO that exceeds an approved period of retention on active duty.

- (b) An officer who is undergoing a Fitness for Duty Determination (FFD) may not enter an AP agreement until he/she is found fit for duty. However, an officer may initiate an agreement if the officer is able to continue working on a half-time or more basis and the Health and Human Services (HHS) Operating Division (OPDIV) or non-HHS organization to which the officer is assigned recommends payment. CCHQ will pay the monthly and/or annual payments of an existing AP agreement when the payments are due to an officer who is undergoing a FFD provided that the officer continues to meet the other criteria in this Section.
- (8) The OPDIV or non-HHS organization to which the officer is assigned recommends payment of AP. An OPDIV/STAFFDIV/non-HHS organization may not recommend against payment of AP except in the following circumstances:
 - (a) Actions have been or will be initiated which would deny the officer further practice, specialty designation, or continued service on active duty;
 - (b) There are other eligible officers, but the OPDIV/non-HHS organization is not recommending AP for any of the officers because of budgetary restraints or lack of need for the officers' category, profession, or specialty at the location; or
 - (c) The OPDIV/non-HHS organization possesses information or data that demonstrates that within the next three months the category, profession, or specialty will lose its eligibility for AP at that location (e.g., changes in authorized positions or recent hires into vacant positions that will affect the average two-year vacancy rate, pending hire(s) that will fill vacant positions). In such cases, the OPDIV/non-HHS organization must provide documentation to CCHQ that reflects the information or data.
 - (9) Duty Status. An officer who is in a non-duty status is not eligible for AP in the following circumstances:
 - (a) An officer who has used an excessive amount of sick leave, other than maternity leave. Excessive sick leave is defined as 60 or more consecutive days or 60 nonconsecutive days in a 6-month period. Such an officer shall have his/her medical records reviewed by Medical Affairs Branch, CCHQ. CCHQ may pay AP if a determination is made that according to accepted medical principles, the officer does not have a medical condition which may be disabling or otherwise places him/her or others in jeopardy if he/she were to continue on active duty (see [CCI 393.01](#), "Medical Review Board").
 - (b) An officer who is in a non-duty with pay status in accordance with [CCI 611.03](#), "Nonduty With Pay Status."
- b. In order to receive AP a Ready Reserve Corps officer must be entitled to basic pay and meet all of the criteria in Section 6-2.a.
 - (1) An agreement for such officers and the conditions outlined in Sections 6-2.a.(3) and (7) do not apply if the officer is voluntarily called to active duty for a period of less than 2 years or if the officer is involuntarily called to active duty.

- (2) For the purposes of Sections 6-2.a.(8), the Director, CCHQ, will make the recommendation regarding payment of AP using the criteria outlined in Subsection (8).
- 6-3. AP Designation Eligibility Requirements. Designation of AP is approved in location and category, profession, specialty, and/or Leadership/Multidisciplinary position combinations.
 - a. Isolated/Hardship Award (ISOHAR) Status.
 - (1) The location must be designated as an ISOHAR site in [CCI 511.01](#), "Awards Program," and have a two-year vacancy rate that is above 15 percent for a critical need category, profession, specialty, and/or Leadership/Multidisciplinary Position; or
 - (2) The location must have a two-year average vacancy rate that is above 30 percent for a critical need category, profession, specialty, and/or Leadership/Multidisciplinary Position.
 - b. Vacancy Status. By 31 July each year, the Human Resources Director, or his or her designee for BOP and IHSC must submit a vacancy report to the Director, CCHQ, or his or her designee, of categories, professions, specialties, and/or Leadership/Multidisciplinary Positions that are critical to meeting the agency's clinical and health care missions.
 - (1) The report must contain the vacancy data for the current fiscal year for those categories, professions, specialties, and/or Leadership/Multidisciplinary Positions for which the agency is experiencing critical shortages.
 - (2) The Director, CCHQ, may require more frequent reports if necessary. The agencies may also submit more frequent reports with approval of the Director, CCHQ.
 - (3) The Director, CCHQ, or his/her designee, will establish the format and data elements required for the reports.
 - (4) A failure to submit a report as required in this Subsection may result in the elimination of a location and/or category, profession, specialty, and/or Leadership/Multidisciplinary position from the approved list, as determined by the Surgeon General or his or her designee.
 - (5) Until CCHQ has two years of vacancy reports, the average of the data that CCHQ has for the previous two years for BOP and IHSC is used as a substitute for the two-year average.
- 6-4. Rate Establishment and Changes.
 - a. Rate Establishment.
 - (1) For locations in a non-ISOHAR site that have specified positions with a vacancy rate of 30 percent or more, the rate for AP is as follows:
 - (a) For positions that require a Medical officer, Dental officer, or Certified Registered Nurse Anesthetists (CRNA), AP is \$1,000.00, \$1,400.00, and \$2,000.00 for each month of a two, three, and four-year agreement, respectively (\$12,000.00, \$16,800.00, and \$24,000.00 per year, respectively).

- (b) For positions that require a Nurse Practitioner (NP) or Nurse Midwife (NMW), an officer in the Scientist category who is commissioned as a Psychologist, or an officer in the Health Service Officer (HSO) category who is commissioned as a Physician Assistant (PA), Optometrist, Psychologist, or Social Worker (MSW), AP is \$600.00, \$800.00, and \$1,200.00 for each month of a two, three, and four year agreement, respectively (\$7,200.00, \$9,600.00, and \$14,400.00 per year, respectively).
 - (c) For positions that require other categories/professions/specialties, as well as Leadership/Multidisciplinary Positions, AP is \$350.00, \$475.00, and \$700.00 for each month of a two, three, and four-year agreement, respectively (\$4,200.00, \$5,700.00, and \$8,400.00 per year, respectively).
- (2) For locations in an ISOHAR site that have specified positions with a vacancy rate of 15 percent or more and less than 30 percent, the rate for AP is as follows:
- (a) For positions that require a Medical officer, Dental officer, or CRNA, AP is \$1,500.00, \$2,000.00, and \$3,000.00 for each month of a two, three, and four-year agreement, respectively (\$18,000.00, \$24,000.00, and \$36,000.00 per year, respectively).
 - (b) For positions that require a NP or NMW, an officer in the Scientist category who is commissioned as a Psychologist, or an officer in the HSO category who is commissioned as a PA, Optometrist, Psychologist, or MSW, AP is \$900.00, \$1,200.00, and \$1,800.00 for each month of a two, three, and four year agreement, respectively (\$10,800.00, \$14,400.00, and \$21,600.00 per year, respectively).
 - (c) For positions that require other categories/professions/specialties, as well as Leadership/Multidisciplinary Positions, AP is \$500.00, \$700.00, and \$1,000.00 for each month of a two, three, and four-year agreement, respectively (\$6,000.00, \$8,400.00, and \$12,000.00 per year, respectively).
- (3) For locations in an ISOHAR site that have specified positions with a vacancy rate of 30 percent or more, the rate for AP is as follows:
- (a) For positions that require a Medical officer, Dental officer, or CRNA, AP is \$2,000.00, \$2,700.00, and \$4,000.00 for each month of a two, three, and four-year agreement, respectively (\$24,000.00, \$32,400.00, and \$48,000.00 per year, respectively).
 - (b) For positions that require a NP or NMW, an officer in the Scientist category who is commissioned as a Psychologist, or an officer in the HSO category who is commissioned as a PA, Optometrist, Psychologist, or MSW, AP is \$1,300.00, \$1,700.00, and \$2,600.00 for each month of a two, three, and four-year agreement, respectively (\$15,600, \$20,400.00, and \$31,200.00 per year, respectively).
 - (c) For positions that require other categories/professions/specialties, as well as Leadership/Multidisciplinary Positions, AP is \$750.00, \$1,000.00, and \$1,500.00 for each month of a two, three, and four-year agreement, respectively (\$9,000.00, \$12,000.00, and \$18,000.00 per year, respectively).

b. Rate Changes.

- (1) If a non-ISOHAR site reaches an average two-year vacancy rate that drops below a 30 percent vacancy rate for a category, profession, specialty, or Leadership/Multidisciplinary position, an officer may not enter into a new AP agreement.
- (2) If an ISOHAR site reaches an average two-year vacancy rate that drops below a 15 percent vacancy rate for a category, profession, specialty, or Leadership/Multidisciplinary position, an officer may not enter into a new AP agreement.
- (3) If an ISOHAR site reaches an average two-year vacancy rate that drops below a 30 percent vacancy rate for a category, profession, specialty, or Leadership/Multidisciplinary position, an officer may not enter into a new AP agreement at the 30 percent rate. However, if the vacancy rate is above 15 percent, then an officer may enter an agreement at the 15 percent rate.
- (4) If the agency provides sufficient documentation and/or justification that warrants changes to the approved AP rate for a specific category, profession, specialty, or Leadership/Multidisciplinary position at a specific ISOHAR location (e.g., MSW and/or Psychologists needed to address suicide clusters, nurses and/or Leadership/Multidisciplinary Positions to ameliorate a risk to accreditation status, etc.), the SG, without further delegation, may:
 - (a) Increase AP up to three times the amount for a specific category, profession, specialty, or Leadership/Multidisciplinary position at a specific ISOHAR location authorized in Section 6-4.a. However, in no case may the total amount of AP paid to an officer exceed the limitations specified in 37 U.S.C. § 352, as amended.
 - (b) Authorize a specific category, profession, specialty, or Leadership/Multidisciplinary position at a specific ISOHAR site to enter a new AP agreement at a previously approved rate when new agreements are not authorized under the conditions outlined in Sections 6-4.b.(2) or (3).
- (5) In all cases, if the ability to enter into a new AP agreement ends or the rate changes for a specific category, profession, specialty, or Leadership/Multidisciplinary position at a location, the USPHS Commissioned Corps will continue to pay AP for the remaining obligation period of an existing agreement.

6-5. Reassignments. While serving the ADO associated with an AP agreement, an officer must remain in the clinical position or the position that oversees the provision of direct hands-on patient care or the position that directly supports the clinical health care mission of the USPHS Commissioned Corps or the Leadership/Multidisciplinary Position, and the officer may not seek a reassignment. The reassignment of the officer is not permitted except when specifically requested by the OPDIV/non-HHS organization (i.e., BOP or IHSC) to which the officer is assigned for the purposes of furthering the agency's clinical and health care missions. Such a reassignment may be approved as follows:

a. The Director, CCHQ, may approve a reassignment:

- (1) At the location for which payment of AP was approved provided that the new position is the same type of assignment for which AP was originally

approved (e.g., reassignment from a clinical position that provides direct hands-on patient care to another clinical position that provides direct hands-on patient care).

- (2) To another location provided that the new position is the same type of assignment for which AP was originally approved (e.g., reassignment from a clinical position that provides direct hands-on patient care to another clinical position that provides direct hands-on patient care), and the officer's category, profession, specialty, or Leadership/Multidisciplinary position is approved for AP at the location at the same or higher rate for which the officer's current AP agreement is approved. In such cases, the officer's current agreement is terminated on the effective date of the reassignment and he/she must enter a new agreement with an obligation period that is as long as the previous AP agreement's length or longer.
 - (3) To Long Term Training (see CCI 325.01, "Extramural Training") that will enhance or advance the officer's ability to meet the agency's health care mission at the location for which AP is paid. In such cases the current AP agreement is terminated on the effective date of the officer's transfer into training and upon completing the training the officer must return to the location at which AP was paid and remain at that location for the duration of his/her training ADO unless assignment to another location is approved by the ASH.
- b. The SG, without further delegation, may approve a reassignment to another position and/or location provided that the new position is a clinical position that provides direct hands-on patient care, is a position that oversees the provision of direct hands-on patient care, or is a position that directly supports the clinical health care mission of the USPHS Commissioned Corps or is a Leadership/Multidisciplinary Position, and the officer's category, profession, specialty, or Leadership/Multidisciplinary position is approved for AP at the location at the same rate or a lower rate for which the officer's current AP agreement is approved. In such cases, the officer's current agreement is terminated on the date of the reassignment and he/she must enter a new agreement with an obligation period that is as long as the previous AP agreement's length or longer.
 - c. In rare circumstances the ASH may approve a reassignment to a position for which AP is not approved if the ASH determines that the reassignment is in the best interests of the Government. If the ASH approves such a reassignment, the AP agreement is terminated on the date the ASH approves the reassignment and repayment of the unearned portion of the agreement by the officer is required as outlined in Section 6-7.
- 6-6. Termination of an AP Agreement. In addition to the circumstances outlined in Section 6-5., an AP agreement and AP payments are terminated in the following circumstances:
- a. Promotion. AP is terminated on the effective date of the promotion of an officer to the O-7 grade or higher.
 - b. Release from Active Duty at the Officer's Request. An AP agreement is terminated on the date the officer signs his/her request for separation from active duty. The officer will have his/her commission terminated, and the USPHS Commissioned Corps will divest him/her of travel and transportation of household goods (HHG) and deny the transfer of, use of, and payment for unused annual leave.

- c. Separation from Active Duty.
- (1) Disability Separation or Disability Retirement. The agreement is terminated on the date the officer is separated from active duty (see [CCI 393.01](#), "Medical Review Board").
 - (2) Death. The agreement is terminated on the date of the officer's death.
 - (3) Termination of Commission. The agreement is terminated on the date a recommendation to separate the officer from active duty is approved pursuant to [CCD 111.02](#), "Disciplinary Action," or [CCD 123.01](#), "Involuntary Separation;" or on the date a decision to separate the officer from active duty is approved pursuant to [CCI 331.01](#), "Permanent Promotions."
 - (4) Involuntary Retirement (other than for a disability). The agreement is terminated on the date a recommendation to retire the officer is approved (see [CCI 384.03](#), "Mandatory, Voluntary, and Involuntary Retirement," and [CCI 331.01](#), "Permanent Promotions") or on the date a decision to separate the officer from active duty is approved (see [CCI 331.01](#), "Permanent Promotions").
 - (5) Separation/Retirement for Convenience of the Government. If an officer is released from active duty or retired because of a reduction in strength, numbers limitation, or other reasons for the convenience of the Government, while serving under a written agreement, the agreement is terminated on the date of the officer's separation or retirement. The SG makes the determination whether a separation or retirement is for the convenience of the Government.
- d. Board Recommendation. The agreement is terminated upon the approval of a recommendation to terminate the agreement made by an Involuntary Retirement Board (IRB), Involuntary Termination Board (ITB), Board of Inquiry (BOI), or other administrative board (see [CCI 384.03](#), "Mandatory, Voluntary, and Involuntary Retirement," [CCD 123.01](#), "Involuntary Separation," and [CCD 111.02](#), "Disciplinary Action").
- e. Failure to be Recommended for Promotion. If a promotion board recommends against a permanent promotion, the agreement is terminated on the date the ASH approves the promotion list (see [CCI 331.01](#), "Permanent Promotions").
- f. Failure to maintain the USPHS Commissioned Corps' conditions of service requirements (see [CCD 111.03](#), "Conditions of Service") will result in the termination of the agreement as follows:
- (1) License, Deployment Readiness, and Weight Standards. On the date an officer is issued a Letter of Reprimand (LOR) as outlined in [POM 821.75](#), "Readiness Compliance;"
 - (2) Security and Suitability. On the date specified by the Director, CCHQ.
 - (3) Health Standards. Except for a disability separation or disability retirement, on the date the approving official approves a board's recommendation to terminate the agreement and/or separate an officer from active duty.
- g. Misconduct.
- (1) The agreement is terminated on the date an officer is found guilty of one or more criminal offenses by a civil authority, tribal authority, or military tribunal

or administrative board; or the date an officer is disciplined under applicable USPHS Commissioned Corps regulations (e.g., effective date of: a Letter of Reprimand; reduction in grade; AWOL; or discipline that is an outcome of a BOI, ITB, or other administrative board process).

(2) The Director, CCHQ, may suspend payments of AP when an officer is being investigated for misconduct (including investigation by a BOI, ITB, or other administrative board process). Upon completion of the investigation the Director, CCHQ, will resume payment of AP if the officer is exonerated or terminate the agreement if misconduct is established.

h. Deterioration of Performance. The agreement is terminated on the date the Reviewing Official signs a COER that has a rating of less than satisfactory.

i. Duty Status. The agreement is terminated on the date an officer's non-duty with pay status exceeds 120 consecutive days.

6-7. Indebtedness and Collection.

a. Repayment of the unearned portion of an AP agreement is not required when payment is terminated pursuant to Section 6-6.c.(5) and is not required when payment is terminated pursuant to Section 6-6.c.(1) or (2), provided that the disability or death is not the result of misconduct or willful neglect and was not incurred during a period of unauthorized absence.

b. An officer whose agreement is terminated pursuant to Sections 6-5. or 6-6. (except as noted in Section 6-7.a.) is required to repay the unearned portion and is indebted to the federal government in accordance with 37 U.S.C. §373, and may be subject to the collection of the indebtedness under the procedures in [45 C.F.R. Part 30](#). An officer separating from active duty is subject to the collection and repayment procedures in [CCI 654.02](#), "Collection of Commissioned Officer's Indebtedness Upon Separation."

7. RESPONSIBILITIES:

7-1. The ASH is responsible for establishing policies related to AP.

7-2. The SG is responsible for providing supervision of activities relating to the day-to-day operations of the USPHS Commissioned Corps and:

a. Will issue a Personnel Operations Memorandum (POM) that establishes and/or updates the approved locations and rates based on the criteria in Sections 6-3. and 6-4. and an OPDIV/non-HHS organization's two-year average vacancy rate.

b. May issue any other POM as necessary to implement this Instruction.

c. Will determine the documentation necessary to establish an officer's eligibility and determine eligibility for AP.

7-3. The Director, CCHQ, is responsible for the overall administration and management of all the personnel processes listed in this Instruction and any operational guidelines established by the SG.

a. The Director, CCHQ, or his or her designee, may approve an officer's AP agreement.

b. CCHQ will notify the officer through a personnel order of the approval of AP and the corresponding active duty obligation, and is responsible for monitoring and enforcing the terms of AP agreements.

- 7-4. The OPDIV/non-HHS organization to which an officer is assigned is responsible for:
- a. Submitting vacancy reports to CCHQ as outlined in this guidance. The OPDIV/non-HHS organization should maintain a copy of the reports for their records.
 - b. Transmitting an officer's AP agreement in accordance with this guidance.
 - c. Notifying CCHQ in a timely fashion of any issue(s) that may make an officer ineligible for AP.
- 7-5. Each officer is responsible for adhering to the guidelines established in this Instruction and any operational guidelines established by the SG and Director, CCHQ, or their designees.
- a. It is the officer's responsibility to be familiar with the published policies that apply to all USPHS Commissioned Corps officers and maintain an ongoing awareness of updates and changes to USPHS Commissioned Corps policies, including any periodic changes to the AP policy, pay rates, and/or eligibility requirements.
 - b. An officer must maintain current and updated contact information (e.g., e-mail, phone, address) in CCHQ in order to facilitate the USPHS Commissioned Corps' communication of information to the officer.
 - c. It is the officer's responsibility to initiate and/or renew an agreement when appropriate and to ensure data is correct to support his/her eligibility for AP. An officer should retain copies of her/his agreement and other documentation.
 - d. An officer is required to notify CCHQ/Financial Services Branch (FSB) within 7 days if he/she fails to remain eligible for an AP. All payments made while not eligible will be recouped once identified in accordance with Section 6-7. An officer must also immediately notify CCHQ/FSB of any overpayment, underpayment, discrepancy, or error in his/her pay.
8. PROCEDURES:
- 8-1. Signing and Submitting Agreements.
- a. Signatures. AP agreements are digitally signed using the officer's DoD issued Common Access Card (CAC) or a Personal Identity Verification (PIV) card that is issued by the OPDIV/non-HHS organization to which the officer is assigned. Supervisors and other officials also sign the agreement using either their CAC or PIV card. In lieu of a digital signature, CCHQ may accept a hand-written signature.
 - b. Submission. An AP agreement must be submitted in accordance with guidance established by the Director, CCHQ, or his/her designee.
- 8-2. Payment of AP will normally commence within 90 days after CCHQ receives the completed agreement (including any necessary supporting documentation) and CCHQ assigns the officer to an assignment that qualifies for AP. Agreements that are missing documentation are not considered complete.
- 8-3. Effective Date of an AP Agreement. In no case may the effective date of an agreement be earlier than:
- a. The date of the officer's call to active duty;
 - b. The date the officer attains eligibility for AP; or

- c. The date determined by procedures set forth by the SG in a POM.
- 9. HISTORY: This is the second issuance of this Instruction within the eCCIS.
 - 9-1. CCI 633.06, "Assignment Duty Pay," dated 13 January 2021.