

United States Public Health Service

# New Officer's Guide



*Developed by the*

**Junior Officer Advisory Group (JOAG)**

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## **Welcome!**

Welcome to the U.S. Public Health Service (USPHS) Commissioned Corps! We hope that you will find the following information useful as you start your new assignment and for future reference.

### **I. ORGANIZATION OF THE USPHS COMMISSIONED CORPS**

The USPHS is an essential component of the United States Department of Health and Human Services (HHS), which employs both civil servants and Commissioned Corps officers. In addition to being assigned within the various Operating Divisions/Agencies of the Department, Commissioned Corps officers can be assigned/detailed to non-HHS Federal Agencies and programs that also offer professional opportunities in the areas of disease control and prevention; environmental and public health; biomedical research; regulation of food, drugs, and medical devices; mental health and drug abuse; health care delivery; and international health.

*For more information on HHS and non-HHS offices and agencies in which Commissioned Corps officers serve, visit <http://www.usphs.gov/aboutus/agencies/>.*

The following information is meant to give a high level overview of the organizational structure of the USPHS, within HHS.

#### **A. The U.S. Department of Health and Human Services (HHS)**

Headed by the HHS Secretary, the Department of Health and Human Services is the principal agency for protecting the health of all Americans. Commissioned Corps officers are assigned throughout HHS and certain non-HHS Federal Agencies and programs. HHS is comprised of the Office of the Secretary (OS), which contains 18 Staff Divisions and 11 Operating Divisions/Agencies. These agencies perform a wide variety of tasks and services, including: research, public health, food and drug safety, grants and other funding, health insurance, and many others.

*For more information on HHS and its Operating Divisions and Staff Divisions, visit <http://www.hhs.gov/about/>.*

*DHHS Organizational Chart, <http://www.hhs.gov/about/orgchart/>.*

#### **B. Office of the Assistant Secretary for Health (OASH)**

Headed by the Assistant Secretary for Health (ASH), OASH is a Staff Division underneath the OS within HHS. The OASH is comprised of 14 core public health offices including the Office of the Surgeon General (OSG).

*For more information, visit <http://www.hhs.gov/ash>.*

### C. Office of the Surgeon General (OSG)

Under the direction of the Surgeon General (SG), the OSG oversees the operations of the Commissioned Corps and provides support for the SG. The SG is a political appointee and reports to the OASH. The SG may or may not be a previous PHS officer. Once commissioned, the SG assumes the rank of Vice Admiral (VADM, O-9). The SG is tasked with protecting and advancing the health of the nation. The SG serves as America's Doctor and is responsible for providing the best scientific information available on how to improve health and reduce the risk of illness and injury.

OSG is comprised of the following Divisions:

- Division of Science and Communications (DSC): Advises the SG on public health issues and priorities and prepares speeches and communications for the SG.
- Division of Civilian Medical Reserve Corps (MRC): For more information on the Medical Reserve Corps, please visit <http://www.surgeongeneral.gov/mrc/index.html>.
- Division of Systems Integration (DSI): Oversees the various IT systems used by the OSG.
- Division of Commissioned Corps Personnel and Readiness (DCCPR): for more information see Section I (D).

For more information, visit <http://www.surgeongeneral.gov/>.

### D. Division of Commissioned Corps Personnel and Readiness (DCCPR)

DCCPR is a division of OSG. DCCPR is responsible for developing policies and carrying out the day-to-day management of Commissioned Corps operational functions.

DCCPR combines the offices previously known as the Office of Commissioned Corps Force Management (OCCFM), Office of Commissioned Corps Operations (OCCO), Office of Force Readiness and Deployment (OFRD) and the Office of Reserve Affairs (ORA).

See **Appendix A** for organizational charts and visit

<https://www.federalregister.gov/articles/2012/05/21/2012-12173/office-of-the-assistant-secretary-for-health-statement-of-organization-functions-and-delegations-of> for more information.

#### **DCCPR is made up of the following branches:**

- **Immediate Office of the Director**
  - Provides overall management of Commissioned Corps personnel including active duty Regular Corps, Ready Reservists and of those issues and PHS processes pertinent to retired Corps officers
  - Develops, issues, implements and maintains all personnel policy issuances and directives related to Corps operations, personnel, training, readiness, assignment,

- deployment, promotion, and retirement (including publication of such policy in the electronic Commissioned Corps Issuance System (eCCIS))
- Manages the process for disciplinary actions and decisions involving Corps officers
  - Ensures the appropriate exercise of delegated Commissioned Corps authorities and responsibilities
  - Establishes precepts for appointment, promotion, assimilation, retirement, fitness for duty, awards and commendations, discipline, grievance, and other such matters
  - With respect to Board of Inquiry (BOI) disciplinary proceedings, ensures documentation of board proceedings, preparation of correspondence to applicants and officers, timely and accurate advice and assistance to Board members and other support as required
  - Conducts force planning, including working with agencies, and advises OSG and ASH on Commissioned Corps strategic long-term readiness planning
  - Maintains liaison with all other relevant Federal Services as appropriate, including with components of the Departments of Defense and Veterans Affairs
  - Coordinates as appropriate to seek Departmental legal advice, assistance, and legislative support
  - Advises the OSG on mission nature, size, duration and usage of Regular Corps and Ready Reserve officers
  - Serves as a central point of contact and prepares necessary communications for all Corps Agency Liaison Offices
  - Oversees the determination of fitness-for-duty and disability evaluations; administers the Servicemembers' Group Life Insurance and Traumatic Serviceman's Group Life Insurance Programs; and oversees Line of Duty determinations of the evaluation and issuance of medical waivers
  - Serve as the principal advisor to the SG on activities and policy related to preparedness, Corps activation, training, deployment operations and total force fitness of the Corps
  - Manages the Corps readiness and response activities to include establishing, maintaining and ensuring compliance with force readiness standards; ensuring that members of the Corps are trained, equipped and otherwise prepared to fulfill their public health and emergency response roles; and managing the timely, effective and appropriate response to urgent or emergency public health care needs
  - Conducts after action assessments and evaluations for the SG and ASH pertaining to the use of the Corps for deployment and other non-routine use of officers
- **Ready Reserve Affairs Branch**
    - Advises the SG on activities related to the preparedness and activation of the Corps' Ready Reserve personnel assets
    - Develops and maintains Ready Reserve components or assets, except for officers assigned for extended active duty periods

- Conducts force management planning of all elements of the Ready Reserve assets and recommends personnel policy issuance to support the mission and goals of the Corps' Ready Reserve

*For more information on the Ready Reserve Corps, visit <http://www.usphs.gov/AboutUs/readyreserve.aspx>.*

- **Recruitment Branch (RB):**
  - Implements programs to recruit new health professionals to the Regular and Ready Reserve Corps components, including the management of an Associate Recruiter Program
  - Develops recruitment strategies, programs, materials, and other resource to market and/or promote the use of the Corps for specific programs.
- **Assignments & Career Management Branch**
  - Addresses short- and long-term force management of Corps officers by assessing placement requirements in conventional and emergency response assignments, including the issuance of personnel orders
  - Provides force management by identifying and categorizing types of assignments for which Regular and Ready Reserve Corps officers are required
  - Develops, evaluates and grades personnel billets using the Commissioned Corps Billet Management System to assure that assignments match officer profiles to the requirements identified in the position billet
  - Implements, manages, and monitors approved blanket personnel agreements and individual details to non-HHS governmental and non-governmental organizations
  - Implements and administers Corps officer training, leadership, and career development programs and provides individual career counseling, pre-retirement, death benefit, and survivor benefit counseling
  - Coordinates the Commissioned Officers Student Training Extern Program (COSTEP)
  - Establishes and monitors Commissioned Corps officer training and education requirements to ensures compliance
  - Develops career development guidelines and materials to Regular and Ready Reserve Corps officers
  - Ensures compliance and periodic evaluation of professional credentialing, licensing, and other regulatory compliance of Regular and Ready Reserve Corps officers
  - Conducts periodic officer personnel reviews and performance evaluations to assure that Corps standards are maintained
  - Maintains the official Officer Personnel Folders (OPFs) and records for Regular and Ready Reserve Corps, excluding health (medical/dental/mental health) records

## **II. USPHS COMMISSIONED CORPS LEADERSHIP**

For more information, visit <http://www.usphs.gov/aboutus/leadership.aspx>.

## **A. Secretary**

The Secretary leads the U.S. Department of Health and Human Services (HHS).

Current Secretary: Kathleen Sebelius  
<http://www.hhs.gov/open/contacts/secretary.html>

## **B. Assistant Secretary for Health (ASH)**

The Assistant Secretary for Health (ASH) oversees the USPHS Commissioned Corps, providing strategic and policy direction. The ASH is a political appointee and may be appointed as a civil servant or as a USPHS Commissioned Corps officer. As an officer, this individual assumes the rank of Admiral (O-10). The ASH may or may not have been a prior Commissioned Corps officer.

Under the supervision of the ASH, the Surgeon General of the USPHS provides operational command of the Commissioned Corps. The ASH serves as the primary advisor to the Secretary of HHS on matters involving the Nation's public health and science. The ASH runs the Office of Public Health and Science and helps coordinate the activities of the USPHS agencies on behalf of the Secretary. The ASH serves as the primary advisor to the Secretary of HHS on matters involving the nation's public health.

Current ASH: Howard Koh, M.D., M.P.H.  
<http://www.hhs.gov/open/contacts/ophs.html>

## **C. Surgeon General (SG)**

The Surgeon General, through the OSG, oversees the 6,500-plus members of the USPHS Commissioned Corps. The Surgeon General is America's chief health educator, responsible for giving Americans the best scientific information available on how to improve their health and reduce the risk of illness and injury. The Surgeon General is appointed by the President of the United States, with the advice and consent of the United States Senate for a 4-year term of office.

Current SG: Vice Admiral Regina M. Benjamin, M.D., M.B.A.  
<http://www.surgeongeneral.gov/about/biographies/biosg.html>

## **D. Deputy Surgeon General**

The Deputy Surgeon General of the United States serves as the principal assistant and advisor to the Surgeon General regarding the development and implementation of programs, priorities, and initiatives.

The Deputy Surgeon General maintains effective relationships and collaborations with

executive leadership within the Federal Government and serves as Chief Executive Officer of the 6,500-plus members of the USPHS Commissioned Corps.

Current Deputy Surgeon General: Rear Admiral Boris D. Lushniak, M.D., M.P.H.  
<http://www.surgeongeneral.gov/about/biographies/biodeputy.html>

## **E. Chief of Staff**

The Chief of Staff to the Surgeon General is responsible for the direction and management of the OSG, including Science and Communications, Readiness and Response, Commissioned Corps Operations, and Reserve Affairs.

The Chief of Staff implements and evaluates management operations of the OSG to ensure that program objectives are met, and provides advice and recommendations on Commissioned Corps policy and operations to the Surgeon General, the Deputy Surgeon General and the Assistant Secretary for Health. In addition, the Chief of Staff represents the Surgeon General and Deputy Surgeon General at regional, national, and international health and professional meetings and collaborates and communicates on matters regarding OSG activities with federal agencies.

Current Chief of Staff: Captain Robert DeMartino, M.D.  
<http://www.usphs.gov/newsroom/features/chiefstaff.aspx>

## **F. Chief Professional Officer (CPO)**

Each of the 11 professional categories within the Commissioned Corps is represented by a CPO. These officers provide leadership and coordination of their professional category for the OSG and HHS. CPOs offer guidance and advice to the Surgeon General and administrative committees on matters such as recruitment, retention, and career development of officers within their professions.

*See Appendix B for links to additional information and biographies on each CPO.*

## **G. Professional Advisory Committee (PAC)**

USPHS officers belong to one of 11 professional categories. Officers are placed in a professional category based on their educational degree. Each professional category has a PAC. The PAC provides advice on professional and personnel matters to the SG, CPO, and officers within the category. To access a category-specific PAC, go to <http://dcp.psc.gov/CCMIS/LinksofInterest.aspx#pacs>.

Several PACs contain subgroups within the committee that are dedicated to a specific profession, known as a Professional Advisory Group (PAG). PAGs elect officers and conduct meetings independent of the PAC.

*See Appendix C for a list of PACs and PAC specific websites.*

## H. Commissioned Corps Liaisons

Agencies that employ Commissioned Officers have Commissioned Corps Liaisons that serve as the primary contact for operational Commissioned Corps matters. Liaisons provide assistance and information to officers assigned to their respective Agency. Agency liaisons may be civil servants or USPHS Commissioned Corps Officers. Your liaison is an important source of information when you have questions about the Commissioned Corps.

*For information on Commission Corps Liaisons, visit <http://dcp.psc.gov>, click on “About Us”, then click on “SG PAC and Commissioned Corps Agency Liaison Listing” from the left navigational bar.*

## III. IMPORTANT WEBSITES

*For the appropriate Point of Contacts related to any of the topics listed below, visit <http://dcp.psc.gov> and click on “Contact Us” from the left vertical navigational bar.*

*For more information on the various Commissioned Corps Help Desk(s), visit <http://ccmis.usphs.gov/ccmis/CCHELP.aspx>.*

### A. Commissioned Corps Management Information System (CCMIS)

CCMIS, <http://dcp.psc.gov>, is the primary information website for the Commissioned Corps. It contains links to policies on topics ranging from awards to promotions to uniform wear. There is a public domain portion and a secured portion to the website. You will need to obtain a log-on ID and password to enter the secure areas of the site. To obtain an ID and password, e-mail [cchelpdesk@psc.gov](mailto:cchelpdesk@psc.gov) or call 301-594-0961.

Officers are highly encouraged to sign up for the CCMIS Listserv to keep abreast of important updates, visit: <https://public.govdelivery.com/accounts/USOPHSCC/subscriber/new?> and enter your contact information. .

Check the CCMIS website regularly as the “What’s New” section on the main page is frequently updated with new items relevant to Commissioned Corps officers (policies, issuances, etc.). The following is a list of topics/secure sites/portals you can access from the CCMIS site (this is not an exhaustive list):

- **Secure Area:** Provides you access to your secured electronic Official Personnel Folder (eOPF), Commissioned Officer Leave-Tracking System (COLTS), and Direct Access. It is important to check your eOPF and COLTS information on a regular basis to make additions, changes, or corrections.

- *Note: Your eOPF and COLTs can be accessed by clicking on “Officer, Liaison, and Leave Maintenance Clerk Activities” from the “Secure” menu on the homepage.*
- **Jobs:** Allows you to subscribe to the Commissioned Corps Job Vacancy Listserv.
- **Services:** Provides information such as FAQs on various topics including promotions, billets, awards, and travel. Additionally, under “Official Forms” you can find almost all official USPHS forms you may need (e.g., leave slips, insurance, payroll, etc.).
- **Policies:** This section provides access to the Commissioned Corps Issuance System (electronic manual of Commissioned Corps policies), and information on Equal Opportunity and Disciplinary Actions.
- **Payroll Resources:** Provides information on various topics related to payroll.
- **Publications:** Gives you access to official PHS publications, PHS Military Specifications (Mil Specs), Commissioned Corps Bulletin, and various Commissioned Corps Graphics.
- Other helpful information on the website: Telephone Directory under the “About Us” menu and links to all Professional Advisory Committee websites under “Links” menu.

## **B. DCCPR Readiness & Response Program**

*NOTE: Formerly the Office of Force Readiness and Deployment (OFRD)*

*For more information, visit <http://dcp.psc.gov/ccmis/ofrd>.*

The OFRD website is the primary information site for current readiness standards. It is a publicly available website that contains a secure area to view your individual readiness status, personal contact information, and roster assignment. Officers can obtain information on training modules, physical training requirements, and necessary forms from the website. Information about the various deployment teams and instructions on how to join a deployment team can also be found on the website. Officers can check their readiness status on the Direct Access website: [http://dcp.psc.gov/CCMIS/DA\\_resources.aspx](http://dcp.psc.gov/CCMIS/DA_resources.aspx).

- **Login:** Active Duty officers automatically have site access. Click the “Login” button at the top of the page. Your PHS number is your user name. Your password is the first initial of your first name, the first initial of your last name, and the last 4 digits of your SSN (e.g., lc4435). After the initial log in you will be prompted to change your password. Be sure to keep your contact information current. It is recommended you

*check your readiness status at least quarterly* to make sure you maintain a Basic readiness rating. A lapse of readiness may impact your career advancement.

- **Direct Access:** Be sure to keep your information is accurate and up-to-date in Direct Access. See Section III (C) below for more information about Direct Access.
- **Basic Readiness:** Click on “Essentials”, then “Readiness Checklist” to keep track of information you need to obtain and maintain your basic readiness.
- **Deployment Roles:** In order to meet Basic readiness standards and be placed on a Ready Roster, officers must be current in their professional role. Officers must practice a minimum of 80 hours per year to deploy in a particular clinical role. There are currently 12 deployment roles. View the “Readiness Essentials” section.
- **Frequently Asked Questions (FAQ):** The FAQ link provides information on how to prepare for deployment.
- **Deployment Teams:** Information on the different types of deployment teams, the teams’ functions and instructions on how to join a team can be found under “Current Teams.”
- **Training Modules:** Access readiness modules and Field Medical Readiness Badge (FMRB) modules by going to Responder e-Learn (<https://www.respondere-learn.com>), the electronic training platform.

*For more information, see section V. Basic Readiness.*

## **C. Direct Access**

Direct Access Self-Service allows you to view and/or update various information including your personal contact information, supervisor’s contact information, awards, education, licenses, and certifications security clearance documents, readiness status, immunizations, Annual Physical Fitness Test (APFT) results, deployment roles, and curriculum vitae (CV). It is imperative that you keep this information up-to-date. This information is used to generate travel orders for deployments.

All PHS officers have site access. You will be provided with Direct Access login information when you enter the CCMIS Secure Area (<https://dcp.psc.gov/cclogin/ccmislogin.aspx>).

## **D. Professional Advisory Committees (PACs)**

PACs provide mentoring, professional advice (how to write your CV, category specific promotion benchmarks, career development) and advice on personnel matters specific to your category. Category-related concerns should be brought to the attention of the PAC. The PAC may forward the concern to the CPO if necessary.

For more information, go to [www.usphs.gov/profession/](http://www.usphs.gov/profession/) and click on the link for your category's website.

See Appendix C for PAC Specific websites

#### **IV. UNIFORMS**

As one of America's seven uniformed services, PHS requires all Commissioned Corps officers to wear the prescribed uniform of the day. The prescribed uniform of the day is set by the Surgeon General, who serves as the Uniform Authority. For some duty stations/locations (e.g. Alaska) the SG designates an officer to serve as the Local Uniform Authority (LUA).

To assist junior officers with proper wear of the uniform, JOAG has prepared a presentation titled, "*JOAG's Proper Uniform Wear Slides.*" These slides can be accessed from the Junior Officer Resource section of the JOAG website, at:

<http://www.usphs.gov/corpslinks/JOAG/resources.aspx>.

All officers are required to maintain the service dress blue (SDB) and summer white uniform.

Although not a required uniform, officers are encouraged to maintain at least 1-2 sets of the service khaki uniforms, as these are most commonly worn in the office.

For uniform allowance information, contact the Compensation Branch (CB) at 301-427-3280. You will need to fill out the uniform allowance memorandum, which can be downloaded at [http://dcp.psc.gov/PDF\\_docs/uniform\\_allowance.pdf](http://dcp.psc.gov/PDF_docs/uniform_allowance.pdf).

*Note: The Battle Dress Uniform (BDU) will no longer be an authorized Commissioned Corps uniform. The Commissioned Corps will begin wearing the untucked NOAA version of the Operational Dress Uniform (ODU). For more information, visit [http://dcp.psc.gov/ccbulletin/articles/Uniforms\\_03\\_2012.aspx](http://dcp.psc.gov/ccbulletin/articles/Uniforms_03_2012.aspx)*

##### **A. Uniform Policies**

Information on the latest Uniform of the Day Issuance can be found on CCMIS website (<http://dcp.psc.gov>), under "Issuance Updates". Officers should contact their Agency Commissioned Corps Liaison with questions concerning the uniform of the day.

For uniform protocol, please refer to Book 4 in the eCommissioned Corps Issuance System (eCCIS), which is available online at: <http://dcp.psc.gov/eccis/CCISToc.aspx?ShowTOC=N>.

For information about the proper placement of ribbons and medals, please refer to: [http://dcp.psc.gov/eccis/documents/CCPM26\\_3\\_3.pdf](http://dcp.psc.gov/eccis/documents/CCPM26_3_3.pdf).

##### **B. Purchasing Uniforms**

Uniforms may be purchased via several routes:

- At your local installation's military clothing store
- By calling the Navy Exchange at 800-368-4088
- Online at <http://www.navy-nex.com>

*Note:* A Personnel Operations Memorandum (POM) explaining how and where to obtain the Operational Dress Uniform (ODU) is available on the Commissioned Corps Management Information System (CCMIS). Visit: [http://dcp.psc.gov/eccis/documents/POM12\\_009.pdf](http://dcp.psc.gov/eccis/documents/POM12_009.pdf) and [http://dcp.psc.gov/eccis/documents/PPM12\\_002.pdf](http://dcp.psc.gov/eccis/documents/PPM12_002.pdf) for information.

You must order your own name tags. You can purchase one specific to your OPDIV, if available, (i.e. BOP, FDA, IHS) and one all-purpose USPHS name tag. You can order the name tags and other PHS devices and accessories online at the PHS Officer's Device Supply Center:

[http://bphc.hrsa.gov/nhdp/PHS\\_Officers\\_Device\\_Supply\\_Center\\_Main\\_Page.htm](http://bphc.hrsa.gov/nhdp/PHS_Officers_Device_Supply_Center_Main_Page.htm)

Prior military awards and other non-PHS awards may be worn on the uniform after authorization for wear by the Awards Coordinator. To obtain authorization, submit a memorandum requesting the authorization and appropriate documentation (DD-214) to the PHS Awards Coordinator.

Officers deploying to Navy vessels may procure the PHS Corps Device for the Navy Coveralls, Stock Number 3642509, from the National Navy Medical Uniform Shop, Bethesda, MD – 301-295-1489.

## **V. BASIC READINESS**

Maintaining basic readiness is a requirement for all PHS officers. Non-compliance may affect officers for promotion, special assignments, awards, and retention.

The most updated information on readiness guidelines and attaining basic readiness can be found on the OFRD website (<http://dcp.psc.gov/ccmis/ofrd>). Additionally, this website contains information on required training, physical fitness requirements, immunizations, clinical service hours, and deployment roles.

A “Basic Readiness Checklist” has been developed to assist officers with basic readiness. This checklist outlines all requirements and appropriate steps an officer must take to maintain basic readiness. Officers should review the checklist at least bi-annually and follow all appropriate steps to attain basic readiness. Access the checklist by going to the Readiness Guidelines section of the OFRD website: [http://dcp.psc.gov/ccmis/ofrd/readiness\\_guides.htm](http://dcp.psc.gov/ccmis/ofrd/readiness_guides.htm).

Officers have one year from the date of commissioning to become Basic Ready and must continuously maintain basic readiness. Those officers failing to meet and maintain standards and who are not in probationary status will be referred to a Retention Review Board for a recommendation on retention, termination, and/or other appropriate action.

*NOTE:* OFRD conducts quarterly assessments of officer readiness status on March 31, June 30, September 30, and December 31. Your readiness status will only be updated when OFRD conducts these assessments (e.g., if you have completed all requirements on March 12, your displayed status will not be updated until the March 31 OFRD readiness assessment).

*For questions related to basic readiness, a list of contacts can be found at:*  
<http://dcp.psc.gov/ccmis/ofrd/contact.htm>

*For a helpful list of Readiness FAQs, please access the following link:*  
[http://dcp.psc.gov/ccmis/ofrd/Readiness\\_FAQs.htm](http://dcp.psc.gov/ccmis/ofrd/Readiness_FAQs.htm)

Other helpful websites with information related to officer basic readiness include:

- Important Forms: [http://dcp.psc.gov/CCMIS/cc\\_forms.aspx](http://dcp.psc.gov/CCMIS/cc_forms.aspx)
- Basic Readiness Level Training Requirements:  
[http://dcp.psc.gov/ccmis/ofrd/Training\\_Page\\_Roll\\_Out.htm](http://dcp.psc.gov/ccmis/ofrd/Training_Page_Roll_Out.htm)
- Deployment Roles: [http://dcp.psc.gov/ccmis/ofrd/deployment\\_roles.htm](http://dcp.psc.gov/ccmis/ofrd/deployment_roles.htm)
- Basic Life Support (BLS): [http://dcp.psc.gov/ccmis/ofrd/bls\\_training.htm](http://dcp.psc.gov/ccmis/ofrd/bls_training.htm)
- Annual Physical Fitness Test (APFT): <http://ccrf.hhs.gov/ccrf/physical.htm>
- National Incident Management System (NIMS) online training:  
[http://dcp.psc.gov/ccmis/ofrd/NIMS\\_training.htm](http://dcp.psc.gov/ccmis/ofrd/NIMS_training.htm)
- Responder Learning Management System (Responder e-Learn) online training:  
<http://www.respondere-learn.com/>
  - It is an integrated medical, public health, preparedness and response educational curriculum sponsored by HHS. It is designed to enhance the knowledge, skills, and abilities of Federal responders to prepare for and provide a unified response to disasters, incidents, and special missions.
  - To obtain your username/password, go to the link provided above and click the green LOGIN Instructions caption at the top right hand corner of the main page, which will direct you accordingly

## **VI. PROMOTION & CAREER DEVELOPMENT**

***Who is responsible for your career progression? YOU!***

***When should you start preparing for promotion? NOW!***

General Information: Information on promotion can be found under “Promotion Information” from the “Services” menu bar of the CCMIS webpage (<http://dcp.psc.gov/>).

*For up-to-date promotion related information, including information listed in this section, visit*  
<http://dcp.psc.gov/CCMIS/promotions/promotions.aspx>

## **A. Eligibility**

Current-year promotion eligibility can be found on the main page of your eOPF (See Section III, Important Websites). You may also calculate the year you will be eligible based on Time in Grade, Time in Service, and Training and Experience Credit. Use temporary and permanent promotion eligibility criteria guidelines to determine your eligibility, so you can begin your promotion preparations in a timely manner. More information can be found in the Promotion Information section of the CCMIS website (see above).

## **B. Policies**

From the CCMIS webpage, select “Publication”, then “Official Publications, then “CCPM” (which is the link to Electronic Commissioned Corps Issuance System), then “Table of Contents” on the far right side, then “Book 3: Personnel Management (CCI 300 Series), then Chapter 3: Promotions and Reductions. Select temporary or permanent grade promotions to access electronic copies of the policies, which provide useful information regarding promotions.

## **C. Promotion Criteria & Requirements**

A Promotion Checklist with instructions and important due dates can be accessed from the Promotion Information website.

## **D. Category Benchmarks/Precepts**

Each professional category has established benchmarks for each rank, providing guidelines for career progression (see note above). Officers should also refer to their individual Professional Advisory Committee (PAC) webpage (listed previously) to find additional information. It may be useful to check out information on other PACs for general promotion hints that your category may not have posted.

***Curriculum Vitae (CV) and Cover Page:*** Submit a current CV and CV cover page (if applicable) to your eOPF. Guidelines and requirements for format and content for the CV and CV cover page **varies by professional category** and can be found on the PAC websites. Officers are recommended to frequently update their CVs. Updated CVs and Cover Page should be faxed to your eOPF.

## **E. Officer Statement (OS) & Reviewing Official Statement (ROS)**

Complete an OS on a current-year form and fax it to your eOPF. Information on these documents can be found in the “Promotion Information” webpage.

Obtain examples of an OS from your mentor and fellow officers prior to creating your own. Ensure that an ROS on a current-year form was completed and submitted for you. It may be helpful to have a list or summary of your accomplishments and activities ready

to share with your reviewing official, if they request it. You can also provide your reviewing official with a sample or draft ROS to assist them in developing a final version for you.

## **F. Basic Readiness**

All officers are required to maintain basic readiness status to be eligible for promotion. Refer to the OFRD website for details (<http://dcp.psc.gov/ccmis/ofrd>).

## **VII. MANAGE YOUR CAREER**

Create a personnel “maintenance schedule” to help manage your career.

The following is a list of scheduled tasks an officer can perform to help manage their career (each officer’s schedule will be unique):

- *Weekly*: Activities & Job Duties Log (to be used to complete CV, COER, award nominations, officer statement, etc.)
- *Monthly*: Check OFRD website & CCMIS website for New Information Updates & Readiness Status.
- *Quarterly/Semi-Annually*: Update your CV & CV Cover Page/Summary Sheet (Follow your category’s guidelines). Review the OFRD website to make sure you are still basic readiness qualified before each quarterly check.
- *Annually*: Professional Licensure, Basic Life Support (BLS)/Advanced Cardiovascular Life Support (ACLS) Renewals, Immunizations, Report of Medical History, Annual Physical Fitness Test (APFT) and/or Presidential Fitness Challenge

## **VIII. OFFICERSHIP: GET INVOLVED**

Why should you get involved in activities that support the Commissioned Corps? Getting involved will assist the PHS Commissioned Corps in fulfilling its mission and enhance your career development. In addition, professional contributions and services to the Commissioned Corps (officership) is an important promotion benchmark. Here are a few ways to get involved:

### **A. Junior Officer Advisory Group (JOAG)**

JOAG is a vibrant and knowledgeable group of PHS junior officers (rank of LCDR/04 and below) who seek to enhance their professional experience by getting involved in group activities that further the JOAG mission. JOAG’s mission is to “provide advice and consultation to the Surgeon General and other Corps and non-Corps entities on interests and concerns specific to junior officers in the United States Public Health Service Commissioned Corps.”

JOAG members belong to various professional categories throughout PHS agencies and non-PHS programs. JOAG is governed by voting members who serve as the leadership of the organization. JOAG serves as the voice for junior officers in the

Commissioned Corps, and is responsible for advising the Surgeon General on matters that affect junior officers.

Junior officers who participate in bi-monthly JOAG General Membership meetings are automatically considered a general member. In addition to general participation, junior officers are encouraged to actively participate by joining a committee or workgroup.

All junior officers are encouraged to get involved. *Everyone is welcome to join!*

For more information, visit <http://www.usphs.gov/corpslinks/joag/>

## **B. Professional Advisory Committees (PACs)**

*Get involved with your PAC.* PACs provide information that is critical to your success in the Commissioned Corps and provide many opportunities to get involved. Visit your category's PAC website for more information (see Appendix C).

## **C. Minority Officers Liaison Council (MOLC)**

The MOLC serves in a resource and advisory capacity to assist in the development, coordination, and evaluation of activities related to ethnic minority officers in the PHS. The MOLC is comprised of the four Core Minority Advisory Groups (CMAGs):

- American Indian/Alaska Native Commissioned Officers Advisory Committee (AI/ANCOAC)
- Asian Pacific American Officers Committee (APAOC)
- Black Commissioned Officers Advisory Committee (BCOAG)
- Hispanic Officers Advisory Committee (HOAC)

For more information on MOLC and individual CMAGs, visit <http://www.usphs.gov/corpslinks/molc/>

## **D. Commissioned Officers Association (COA)**

COA strives to improve and protect the public health of the United States by advocating for the Commissioned Corps and its officers. Members include active and retired commissioned officers. COA has 97 local branches throughout the United States and two international branches. Local chapters may be involved in various community service and public health awareness projects.

For more information on COA and opportunities to get involved locally or nationally, visit <http://www.coausphs.org>

*Note: COA is a lobbying group for the USPHS and is not considered an official government entity. Involvement in this organization must be done on ones own time and requires dues.*

## **IX. BENEFITS**

As an officer in the USPHS, you are entitled to a wide range of benefits afforded to other uniform services. Please note that the information listed below can change, therefore, officers should be following up with the appropriate office/contact.

### **A. Compensation**

The uniformed service pay scale is used for determining base salaries for Commissioned Corps officers. There are three types of pay that all USPHS officers receive:

- **Basic Pay:** Basic Pay is the fundamental component of an officer's pay. All officers receive it and typically it is the largest component of your pay. Rank and years of service determines the amount of basic pay received.
- **Basic Allowance for Housing (BAH):** BAH depends upon your location, pay grade and whether you have dependents. BAH rates are set each year and are determined by surveying the cost of rental properties in each geographic region. Therefore, BAH rates in high-cost areas will be much greater than those in low-cost areas.
- **Basic Allowance for Subsistence (BAS):** This allowance is based in the historic origins of the military in which the military provided room and board (or rations) as part of a member's pay. Although BAS was originally meant to offset costs related to meals, this allowance is not intended to offset the costs of meals for family members.

Additionally, some officers may be eligible for a special pay depending on their profession. To discuss your earning statements and special pay, officers should contact the Commissioned Corps Compensation Branch.

*For information on the Compensation Branch, visit*  
<http://ccmis.usphs.gov/ccmis/CB.ASPX>.

*For a detailed list of pay scales (Basic, BAH and BAS), visit*  
<http://militarypay.defense.gov/>.

*For the DoD salary calculator, visit*  
<http://www.defenselink.mil/militarypay/pay/calc/index.html>.

*Note: The above pay scales and salary calculator do not include information for special pays for which an officer may qualify.*

### **B. Life Insurance**

Service-members Group Life Insurance (SGLI) is term life insurance available to active duty officers and their spouses. Contact the Compensation Branch at 301-427-3280 to enroll.

*For more information on SGLI, visit: <http://www.insurance.va.gov>.*

## C. Leave

Commissioned Corps Officers are subject to duty 24 hours each day, every day of the year. Furthermore, an officer on leave, including station, sick, and annual leave, is subject to recall to duty any time. Because an officer is subject to duty 24 hours a day, an officer is not entitled to overtime pay or compensatory time when he or she works longer than 8 hours a day or more than 40 hours a week. An officer must be either on duty or on approved leave at all times. Except in cases of an emergency, leave taken by the officer MUST be approved in advance by the officer's leave granting authority. Form PHS-1345, Request and Authority for Leave of Absence, is used to request leave.

*For more information about the different types of leave - annual, sick, station, court, and administrative leave, as well as leave without pay details and absent without leave (AWOL) - visit <http://dcp.psc.gov/eccis/documents/CC361.01.pdf>.*

Corps officers are eligible for the following types of leave:

- **Annual Leave:** Any period of one workday or more during which an officer is relieved from his/her scheduled working hours (other than sick, administrative, or court leave) including all non-workdays within such period.
  - May only be taken in full-day increments.
  - Accrues at a rate of 2.5 days per month or 30 days per year.
  - Officers may carry over 60 days of leave per year.
  - “**Bookends**” days occurs when an officer takes annual leave right before and right after a weekend and/or holiday. When this occurs, the weekend and or holiday counts as annual leave. (e.g., if officer takes leave on both Friday and Monday, Saturday and Sunday count as leave, and thus 4 full days of annual leave is deducted).
  - Leave for funerals or bereavement is typically considered annual leave. However, officers are highly encouraged to check with their Agency's liaison regarding the bereavement policy for officers at their particular duty station.
  
- **Sick Leave:** Leave granted when an officer is in need of medical services or is incapacitated for the performance of duties by sickness, injury, or pregnancy and recovery after delivery.
  - Does not accrue.
  - Is granted as needed to cover a period of illness
  - Includes maternity leave (6 weeks for a routine delivery or 8 weeks for c-section delivery).

- A supervisor may request a medical statement when an illness is longer than 3 days or abuse is suspected.
- **Paternity Leave:** Ten consecutive days of non-chargeable leave is available within 45 days after the birth of a child and may be used in conjunction with annual leave.
- **Station Leave:** Station leave is any absence from duty for a period of less than 1 full workday. When an officer is not scheduled for duty (i.e., weekends, holidays, days off, etc.), they are technically in station leave.
  - It must be approved in advance by the leave granting authority.
  - Station leave is **NOT** a right; it is a privilege which will be granted **prudently and only for legitimate reasons.**
  - Station leave during scheduled work hours should be approved only when such leave is necessary to permit an officer to carry out activities that would be difficult or impossible, to conduct during non-work hours, such as: emergency repairs to plumbing. It should **never** be granted to reduce the work hours of an officer.
- **Administrative Leave:** Any absence for a full workday or more is normally charged to annual leave. However, there may be situations in which an officer may be excused from duty for a full workday or more without charge to annual leave. Such absence may be authorized as "administrative leave" under circumstances which are in the interest of HHS as well as the officer, as determined by the leave-granting authority.
  - Does not accrue.
  - Is granted on a discretionary basis up to 5 days per year.
  - Is typically used for professional training and examination.

*For more information on leave policies*, visit <http://dcp.psc.gov/>, and click on FAQs located at the top of the webpage.

#### **D. Healthcare: Preparing You and Your Family**

The following section contains information on DEERS, TRICARE (Medical Insurance Program), and dental care.

*Note: Please check the sites listed below for the most up-to-date information, as some of the details listed could have changed.*

#### **Defense Enrollment Eligibility Reporting System (DEERS)**

DEERS is a database that maintains information for active duty service members, retirees of the seven uniformed services, their family members, and any others who are eligible to receive military benefits. To register a family member, visit a uniformed services ID card-issuing facility.

An Application for Department of Defense Common Access Card and DEERS Enrollment (DD Form 1172) must be completed along with submission of appropriate documentation such as marriage or birth certificates.

For an ID card-issuing facility near you, visit the RAPIDS site locator:

<http://www.dmdc.osd.mil/rsl/>.

For information on enrollment, including forms, eligibility requirements, and updating personal information, visit

<http://www.tricare.mil/mybenefit/home/overview/Eligibility/DEERS> or call 1-800-538-9552 Monday thru Friday, 6 a.m. to 3:30 p.m. PT, except federal holidays.

For questions regarding your DEERS ID card and dependent enrollment information, send an email to [phsdeers@hhs.gov](mailto:phsdeers@hhs.gov) or call 1-877-INFO-DCP.

### **Medical Insurance Program - TRICARE**

TRICARE is the medical insurance program for the uniformed services. You and each of your dependents must be registered in DEERS and have a valid uniformed services identification card for TRICARE eligibility, including the TRICARE Dental Program. If any of your information is incorrect or outdated, coverage may be denied. Remember, registered family members can update personal information such as addresses and phone numbers, but only the sponsor (active duty service member) can add or delete family members in DEERS.

- Your primary source of healthcare is TRICARE, the military's health plan.
- Active duty service members must enroll in one of the four TRICARE Prime options: TRICARE Prime, TRICARE Prime Remote, TRICARE Prime Overseas, or TRICARE Global Remote Overseas.
- You must fill out a TRICARE Prime enrollment application form based on the region where you are located, which may be downloaded at: <http://www.tricare.mil/tpr/enrollment.cfm>. For assistance in completing the form, call 1-877-874-2273 (North Region), 1-800-444-5445 (South Region), and 1-888-874-9378 (West Region).
- If you are stationed near a military hospital/clinic you are required to use that facility, under the TRICARE Prime health plan. If your duty station is more than 50 miles from an installation, you may be eligible for the TRICARE Prime Remote program and see TRICARE health care providers in your area.

For more information about TRICARE benefits, visit <http://www.tricare.mil>.

For more information on TRICARE medical plans available to you and your family member(s), visit <http://www.tricare.mil/mybenefit/home/Medical>.

### **Dental Care**

Active duty service members receive dental care through the Active Duty Dental Program (ADDP) which is administered by United Concordia. ***For more information about active duty dental benefits***, visit <https://secure.addp-ucci.com/ddpddw/adsm/adsm.xhtml>.

Active duty family members receive dental care through the TRICARE Dental Program (TDP) which is a voluntary, premium-based dental insurance plan administered by MetLife. ***For more information*** on eligibility, premium cost, or to obtain more information, visit <https://employeedental.metlife.com/dental/public/EmpEntry.do> or call customer service at 1-855-638-8371 for the CONUS service area, and 1-855-638-8372 for the OCONUS service area.

## **E. Educational and Training Opportunities**

USPHS officers are eligible for a variety of educational benefit programs administered by the Department of Veterans Affairs (VA). New call-to-active duty (CAD) officers will receive information on these programs, the Post 9/11 GI Bill and the Montgomery GI Bill (MGIB), during the Officers Basic Course (OBC). After which point, officers will need to select the program they intend to enroll in.

Officers called to active duty prior to the establishment of the Post 9/11 GI Bill and enrolled in the Montgomery GI Bill, are eligible to switch to the Post 9/11 GI Bill. Additionally, officers who did not enroll in the Montgomery GI Bill during their initial CAD, are also eligible to sign up for the Post 9/11 GI Bill.

*For the most up-to-date information on the GI Bill programs, visit <http://www.gibill.va.gov> or contact 1-888-GIBILL-1.*

### **Post 9/11 GI Bill**

The Post 9/11 GI Bill became effective on August 1, 2009 and provides financial support for education and housing. Benefits under this program are free, unlike MGIB which cost \$1,200 to enroll. Additionally, the Post 9/11 GI Bill also offers some service members the opportunity to transfer their GI Bill to dependents.

### **Montgomery GI Bill (MGIB)**

In addition to the Post 9/11 GI Bill, officers are also eligible to sign up for the Montgomery GI Bill (MGIB).

Additional resources on GI Bill Programs:

Benefit Resources (Rate Tables, Benefit Comparison Tools/Chart):

[http://gibill.va.gov/resources/benefits\\_resources/index.html](http://gibill.va.gov/resources/benefits_resources/index.html)

Educational Resources (Education Programs, Choosing a School, Tillman Scholarships, Verifying Attendance, Student handouts, brochures, and regulations):

[http://gibill.va.gov/resources/education\\_resources/index.html](http://gibill.va.gov/resources/education_resources/index.html)

### **Uniformed Services University of the Health Sciences (USU)**

USU has a worldwide reputation as a center of excellence for military and public health professions education and research. Programs offered at USU are unique, related directly to force health protection, tropical diseases, disaster medicine, military and public health medical readiness and adaptation to extreme environments. USU prepares outstanding scientists and health care practitioners for careers in service to the nation. USU provides training to active duty health professionals.

*For more information about description of programs, policies, staff and faculty, and student information, visit: <http://www.usuhs.mil>.*

### **F. VA Home Loan Program**

As an active duty officer, you may be eligible to apply for and receive a VA Home Loan. A VA loan is a mortgage loan available to members of the uniform services/military that is guaranteed by the U.S. Department of Veterans Affairs (VA) and may be issued by qualified lenders.

Additional information on the VA Home Loans:

- No down payment is required in most cases.
- Loan maximum may be up to 100 percent of the VA-established reasonable value of the property. Due to secondary market requirements, however, loans generally may not exceed \$417,000 (\$625,500 for loans in Hawaii, Alaska, Guam and U.S. Virgin Islands). This figure is subject to change each year
- No monthly mortgage insurance premium to pay. The VA funding fee is what the VA charges to process the loan. The funding fee can range from 0.5 percent for Interest Rate Reduction Refinancing Loans (IRRRLs) to 3.3 percent. Rate is dependent on frequency of use of the VA home loan program

***Note:** The information listed above is meant as a brief overview of the VA Home Loan program. Additionally, this information could have changed.*

*For the most up-to-date information on VA Loan programs, visit*

<http://www.benefits.va.gov/homeloans/>.

## **G. Military Space-Available (Space-A) Travel**

Space-Available flights, better known as **Space-A** or “military hops,” are a unique privilege afforded to service members, retirees, and their families. Under this program, unused seats on board U.S. military aircraft are made available to eligible passengers on a space-available basis. Unused seats on DoD-owned or controlled aircraft are made available once all the space-required (duty) passengers and cargo have been accommodated.

- Space-A travelers must be on Leave before signing up for Space-A travel and may sign up for travel 60-days in advance of the desired travel date.
- Passengers are categorized by priority of travel and are processed in priority order by their sign-in time. (Official duty passengers have priority over Space-A travelers.)
- At times, there will be a minimal or no charge for personnel traveling in government owned aircraft. However, if a Space-A flight is made on a commercial contract carrier, a fee will be assessed (approximately \$15-30) depending on the port. There is also a fee for meals served aboard military aircraft.
- You are not guaranteed a seat, even when a flight is scheduled. Space-A is a privilege not an entitlement. Those using Space-A should remain flexible and plan ahead for changes in departure dates/times.

*For more Space-A travel information, visit:*

<http://www.amc.af.mil/amctravel/index.asp>, or contact the nearest military passenger terminal where you plan to depart from.

## **H. Retirement**

Commissioned officers are vested and eligible for retirement after 20 years of service. They may request voluntary retirement once they’ve reached that length of service. Voluntary retirements require HHS OPDIV and Commissioned Corps approval. The Commissioned Corps grants most voluntary requests for retirement. The mandatory retirement for Commissioned Corps officers is 30 years, although the Commissioned Corps may grant an extension on a case-by-case basis. After 20 years you may receive 50% of your highest monthly basic pay (usually your current basic pay) and after 30 years you may receive 75% of your highest pay.

*For more information on retirement, visit [http://dcp.psc.gov/PDF\\_docs/24.pdf](http://dcp.psc.gov/PDF_docs/24.pdf).*

## **I. Other Core Benefits**

- Paid Federal holidays
- Thrift Savings Plan (TSP); retirement savings and investment plan similar to a 401(k)
- Paid moving expenses

- Access to military base lodging and recreational facilities
- Shopping privileges at military base grocery and department stores
- Veterans Affairs benefits, such as survivor and disability benefits and burial allowances
- Ease of transfer to other federal jobs

*For more information on benefits, visit*

<http://www.usphs.gov/questionsanswers/compensation.aspx>.

## **X. APPENDICES**

Appendix A. Organizational Structures

Appendix B. Chief Professional Officers of the USPHS

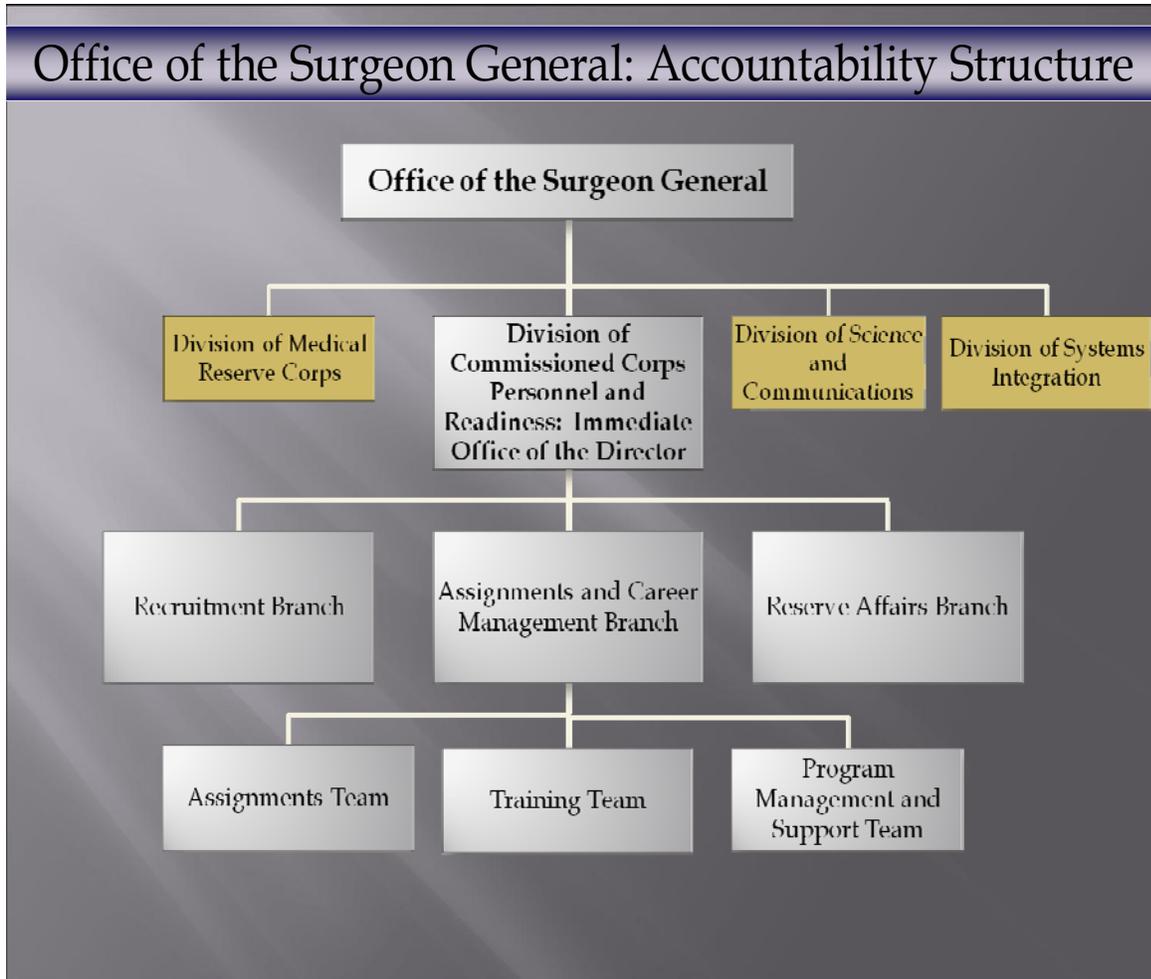
Appendix C. Professional Advisory Committees (PACs)

Appendix D. Acronyms

Appendix E. Promotion Calculation

## Appendix A: Organizational Structures

Figure 1. Office of the Surgeon General: Accountability Structure



## **Appendix B: Chief Professional Officers of the USPHS**

Chief Dental Officer: <http://www.usphs.gov/profession/dentist/cpo.aspx>

Chief Dietitian Officer: <http://www.usphs.gov/profession/dietitian/cpo.aspx>

Chief Engineer Officer: <http://www.usphs.gov/profession/engineer/cpo.aspx>

Chief Environmental Health Officer:  
<http://www.usphs.gov/profession/environmental/cpo.aspx>

Chief Health Services Officer:  
<http://www.usphs.gov/profession/healthservices/healthinformation/cpo.aspx>

Chief Medical Officer: <http://www.usphs.gov/profession/physician/cpo.aspx>

Chief Nurse Officer: <http://www.usphs.gov/profession/nurse/cpo.aspx>

Chief Pharmacy Officer: <http://www.usphs.gov/profession/pharmacist/cpo.aspx>

Chief Scientist Officer: <http://www.usphs.gov/profession/scientist/cpo.aspx>

Chief Therapist Officer: <http://www.usphs.gov/profession/therapist/cpo.aspx>

Chief Veterinarian Officer: <http://www.usphs.gov/profession/veterinarian/cpo.aspx>

## **Appendix C: Professional Advisory Committees (PACs)**

Dental: <http://www.phs-dental.org/depac/newfile.html>

Dietitian: <http://www.usphs.gov/corpslinks/dietitian/>

Engineer: <http://www.usphsengineers.org/>

Environmental Health Officer (EHO): <http://ehopac.org/>

Health Services Officer (HSO): <http://usphs-hso.org/>

Nurse: <http://phs-nurse.org/>

Pharmacy: <http://www.usphs.gov/corpslinks/pharmacy/>

Physician: <http://usphs-ppac.net/>

Scientist: <http://usphs-scientist.org/>

Therapist: <http://usphs.gov/corpslinks/therapist-current/tpac.htm>

Veterinarian: <http://www.usphs.gov/corpslinks/veterinarian/>

## **Appendix D: Acronyms**

ACLS: Advanced Cardiac Life Support

APFT: Annual Physical Fitness Test

ASH: Assistant Secretary for Health

BAH: Basic Allowance for Housing

BAS: Basic Allowance for Subsistence

BLS: Basic Life Support

BOTC: Basic Officer Training Course (course replaced by Officer Basic Course)

CB: Compensation Branch

CCMIS: Commissioned Corp Management Information System

eCCIS: electronic Commissioned Corp Issuance System

COA: Commissioned Officers Association

COER: Commissioned Officer Effectiveness Report

COLTS: Commissioned Officer Leave Tracking System

COTA: Commissioned Officer Training Academy

CPO: Chief Professional Officer

DCCOS: Division of Commissioned Corps Officer Support

DCCPR: Division of Commissioned Corps Personnel and Readiness

DEERS: Defense Enrollment Eligibility Reporting System

DHHS: Department of Health and Human Services

DoD: Department of Defense

EMI: Emergency Management Institute

FEMA: Federal Emergency Management Agency

FMRB: Field Medical Readiness Badge

IOTC: Independent Officer Training Course

JOAG: Junior Officer Advisory Group

LMS: Learning Management System

MAB: Medical Affairs Branch

MGIB: Montgomery GI Bill

NIMS: National Incident Management System

OASH: Office of the Assistant Secretary for Health

OBC: Officer Basic Course

OCCFM: Office of Commissioned Corps Force Management

OCCO: Office of Commissioned Corps Operations

OCCSS: Office of Commissioned Corps Support Services (includes Compensation Branch and Medical Affairs Branch)

OPHS: Office of Public Health and Science

OPDIV: Operating Division

OFRD: Office of Force Readiness and Deployment

ORA: Office of Reserve Affairs

OS: Officer Statement

OSC: Office of Science Communications

OSG: Office of the Surgeon General

eOPF: electronic Official Personnel Folder

PAC: Professional Advisory Committee

PAG: Professional Advisory Group

PHS: Public Health Service

PIR: Promotion Information Report

ROS: Reviewing Official Statement

SG: Surgeon General

SGPAC: Surgeon General Policy Advisory Council

SGLI: Servicemembers' Group Life Insurance

TDY: Temporary Duty Assignment

USUHS: Uniformed Services University of the Health Sciences

VA: Veterans Affairs

VGLI: Veterans' Group Life Insurance

## Appendix E: Promotion Calculation

### Temporary Promotion Eligibility Criteria

(Applies to all officers including new CADs, recalls to extended active duty and inter-service transfers.)

Eligible Grade	T&E Credit Required	Time in service requirement	Time in grade requirement during current PHS tour
O-2	4 years	None	None
O-3	8 years	None	None
O-4	12 years	6 months on <b>current tour</b> as officer in the PHS Commissioned Corps (as of <b>March 1<sup>st</sup></b> of the year reviewed by prom board)	None
O-5	17 years	5 years (2 years must be as officer in the PHS Commissioned Corps)	2 years as O-4
O-6	24 years	9 years (3 years must be as officer in the PHS Commissioned Corps)	3 years as O-5

*T & E Date and Time in Service are located on the officer's PIR. Bolded dates provided are for Promotion Year 2012 (PY12). Promotion Boards meet in Spring 2012 to consider officers eligible for promotion from 7/1/12 - 6/1/13.*

1. Time In Service (TIS):

- a. At the O-4 grade TIS must be during current tour and must be met by 3/1 of the year reviewed by the promotion board (3/1/12). In other words, for officers to meet the TIS criteria, they must be called to active duty no later than 9/1 of the prior year (9/1/11).
- b. At the O-5 and O-6 grades, TIS can be a combination of current and previous tours in the PHS Commissioned Corps and must be met on or before 6/1/13.
- c. All officers may use prior active duty military time towards TIS at the O-5 and O-6 grades (up to 3 years and up to 6 years respectively) as noted in the table.

2. Time In Grade (TIG):

Time in grade must be during current tour and must be met during the promotion year with an effective date of promotion on or before 6/1/13.

3. Temporary Promotion Effective date:

The effective date of the promotion will be July 1 of the promotion year or the first day of the month following the officer's date of eligibility, whichever is later (meets all T&E, TIS, and TIG requirements) with the following exception. If the officer's eligible date is the first day of the month, then his/her effective date will be the same (first day of the month) as the eligible date.

- Examples:
- 1) Meets all requirements 9/15/12, promotion effective date will be 10/1/12.
  - 2) Meets all requirements 10/1/12, promotion effective date will be 10/1/12.
  - 3) Meets all requirements 1/1/12, promotion effective date will be 7/1/12.

4. Inter-service transfers must serve at least 6 months in PHS prior to any promotion, in addition to meeting specified Time in Service requirements.

5. Administrative requirements for temporary promotion:

- a. A current, satisfactory COER (overall C or better);
- b. All required annual COERS on file.
- c. Valid license, if required, on file in the eOPF;
- d. No current or pending adverse or disciplinary actions; and
- e. Meet and maintain basic level of readiness;

*This reference is provided for informational purposes only; it is not an official policy document. Consult CCI 331.01 & 332.01 (old CCPM, Subchapter CC23.4, INSTRUCTIONS 1 & 2), for official policy guidance.*

### **Permanent Promotion Eligibility Criteria**

(Applies to all officers including new CADs, recalls to extended active duty and inter-service transfers.)

Eligible Grade	Credit Required for Regular Corps Officers
O-2	7 years T&E
O-3	3 years Promotion Credit
O-4	10 years Promotion Credit
O-5 Restricted	7 years Seniority Credit
O-5 Non-Restricted	17 years Promotion Credit
O-6	4 years Seniority Credit

*T & E, Promotion and Seniority Credit dates are located on the officer's PIR. Promotion Year 2012 (PY12). Promotion Boards meet in Spring 2012 to consider officers eligible for promotion from 7/1/12 - 6/30/13.*

1. **Restricted** = Nurse, EHO, Pharm, Diet, Ther, HSO
2. **Non-Restricted** = Med, Dent, Eng, Sci, Vet
3. **Seniority Credit Date - Regular Corps:** The later date of a) permanent grade credit date established at the time of appointment to the Regular Corps or b) last permanent grade promotion following Regular Corps appointment.
4. **Promotion Credit Date establishes eligibility to P-O3 and P-O4 for all categories and P-O5 for Non-Restricted categories.** Promotion Credit Date = Seniority Credit Date minus years of constructive credit related to P Grade held when originally appointed to the Regular Corps (P1 = 0; P2 = 0; P3 = 3 years; P4 = 10 years; P5 = 17 years).

**Example:** An officer's last permanent promotion was to P-O3 effective 9/3/2008. She was appointed to the Regular Corps on 3/23/2010. 9/3/2008 is the Seniority Credit Date  
**Promotion Credit Date = 9/3/2008 minus 3 years constructive credit = 9/3/2005**

5. Inter-service transfers must serve at least 6 months in PHS prior to any promotion (CCI 374.01, [Old CCPM 23.3, INST 5], "Inter-Service Transfer of Commissioned Officers," Section G.2.c., found in Book: 3, Chapter: 7, Section: 4, Instruction: 01 of the eCCIS).
6. **Permanent promotion Effective date:** The effective date of the promotion will be July 1 of the promotion year or the officer's date of eligibility, whichever is later.
7. **Administrative requirements for permanent promotion:**
  - a. A current, satisfactory COER (overall C or better);
  - b. Annual COERS on file, as applicable;
  - c. Valid license, if required, on file in the eOPF;
  - d. No current or pending adverse or disciplinary actions;
  - e. Meet and maintain basic level of readiness;
  - f. Current 5 year physical on file with MAB; and
  - g. Current 1 year Report of Medical History with signed Disclosure Statement on file with MAB;

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## Non-Competitive Promotions

### 1. Who is Eligible for a Non-Competitive Promotion?

All Officers eligible for Temporary O-2 or O-3, and Medical and Dental Officers eligible for Temporary O-4 do not go to a promotion board, but are promoted through an administrative review (non-competitive) process.

### 2. Requirements for promotion:

- a. A current, satisfactory COER (overall C or better);,
- b. Valid license, if required, on file in the eOPF
- c. No current or pending adverse or disciplinary actions,
- d. Meet the basic level of readiness;
- e. For permanent promotions: Current 5-year physical and 1-year Report of Medical History (DD-2807-1) with signed Disclosure Statement on file with MAB;
- f. For medical and dental officers eligible for temporary O-4, a letter of recommendation to the Surgeon General from the Agency must be submitted when a current COER is not on file.

### 3. Unsatisfactory COERs or other Administrative Issues

Officers with unsatisfactory COERs (overall Unsatisfactory) are reviewed by the annual promotion boards. Also, officers with other identified reasons to submit the record to the board (e.g., past, present, or pending adverse action) will be reviewed by the annual promotion boards.

### 4. Effective Date of Promotion

Effective date of a non-competitive promotion is the first day of the month on or following the date of eligibility contingent upon all required administrative documentation being received in OCCO by the 15<sup>th</sup> of the month prior to the effective date.

Examples: 1) Meets all requirements prior to 11/15/12, promotion effective date will be 12/1/12  
2) Meets all requirements 11/16/12-12/15/12, promotion effective date will be 1/1/13.

### 5. Notification of Non-Competitive Promotion

It is the officer's responsibility to ensure that all administrative requirements are met before the date of eligibility. When all requirements are met and all necessary documentation is received in OCCO, officers will be notified of the promotion via a personnel order (P.O.) A copy will be scanned and indexed into the Personnel Orders section of the eOPF. When the P.O. is placed into the eOPF, the officer will receive an automated e-mail informing him/her of that action. This is the officer's only notification of a non-competitive promotion. Non-competitive promotions are not posted on the CCMIS website.

*Questions may be directed to the Non-Competitive Promotions Coordinator,  
LCDR Whitney Gadsby, at [Whitney.Gadsby@hhs.gov](mailto:Whitney.Gadsby@hhs.gov).*

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### **Exceptional Proficiency Promotions**

**(Must meet TIG; can meet TED or TIS, but not BOTH)**

Eligible Grade	TED Credit Required	Time in service requirement	Time in grade requirement during current PHS tour
O-2	4 years	None	1 year as O-1 (as of 3/1)
O-3	8 years	None	1 year as O-2 (as of 3/1)
O-4	12 years	6 months on <b>current tour</b> as officer in the PHS Commissioned Corps (as of <b>March 1<sup>st</sup></b> of the year reviewed by prom board)	1 year as O-3 (as of 3/1)
O-5	17 years	5 years (2 years must be as officer in the PHS Commissioned Corps)	1 year as O-4 (as of 3/1) <b>and</b> a total of 2 years as O-4 during the promotion year
O-6	24 years	9 years (3 years must be as officer in the PHS Commissioned Corps)	3 years as O-5 during the PY

*T & E Date and Time in Service are located on the officer's PIR. Bolded dates provided are for Promotion Year 2012 (PY12). Promotion Boards meet in Spring 2012 to consider officers eligible for promotion from 7/1/12 - 6/1/13.*

1. Eligibility Requirements:
  - a. Not eligible in their own right during the promotion year (6/1/13).
  - b. Has held their current Temporary grade for at least 1 year as of 3/1 of the year reviewed by the promotion board (3/1/12). Important note: current means current tour.
  - c. Is in a billet grade at or above the grade of the proposed promotion.
  - d. Meets TIG requirements outlined in the promotion eligibility criteria table.
  - e. Has a valid license if required, satisfactory COER, no current or pending adverse actions, and meets applicable basic readiness standard.
  - f. Has not been reviewed by a promotion board for an EPP to the same temporary grade previously. Officers only receive one opportunity for EPP review per grade. (Considerations for Exceptional Capability Promotion prior to 2004 do not count towards this requirement).
  
2. Quotas - agencies are limited to not more than 5% of the total number of officers eligible for EPPs in their agency. Nominations may be submitted for any category and/or temporary grade. All agencies will be allowed to nominate at least one officer regardless of agency size, assuming they have at least one officer who is eligible for the EPP.
 

**Officers who transfer from the nominating agency before the promotion results are finalized will be removed from the promotion list if the receiving agency does not support the EPP nomination or has reached its quota.**
  
3. Promotion Effective date: Officers are promoted on either the date established by the ASH or the date the officer meets the TIG requirement, whichever is later. All promotions are effective on the 1<sup>st</sup> day of the month.

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