

**BY ORDER OF THE
SECRETARY OF THE AIR FORCE**

**HEADQUARTERS AIR FORCE
MISSION DIRECTIVE 1-48**

21 FEBRUARY 2023



THE AIR FORCE SURGEON GENERAL

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This publication has been revised to account for new and cancelled Department of Defense issuances with delegated authority to the Air Force Surgeon General's Office (AF/SG), the establishment of the United States Space Force, and clarification of responsibilities of AF/SG as it relates to recent changes in the military health system administration and management.

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1. Mission. The Air Force Surgeon General (AF/SG), pursuant to Title 10 United States Code Section 9036, as documented by [paragraph 4.3](#) of Air Force Mission Directive (AFMD) 1, *Headquarters Air Force (HAF)*, assists the Secretary of the Air Force, other Secretariat offices, the Chief of Staff of the Air Force and the Chief of Space Operations in carrying out the development of policies, plans, and programs, establishing requirements, and providing resources to the Air Force Medical Service (AFMS). The Secretary of the Air Force retains ultimate responsibility for all policies related to the Department of the Air Force. Within his/her areas of responsibility, the AF/SG prepares policies for Department of the Air Force approval and issues official guidance/procedures to ensure implementation of those policies. The AF/SG also assists the Chief of Staff of the Air Force and the Chief of Space Operations in their roles, pursuant to 10 U.S.C. § 151, as members of the Joint Chiefs of Staff.

2. Organizational Relationships. The Secretary of the Air Force is responsible for, and has all legal authority necessary to conduct, the affairs of the Department of the Air Force. The Secretariat, the Chief of Staff of the Air Force, the Chief of Space Operations, the Air Staff, the Office of the Chief of Space Operations staff and their respective offices, perform their Department of the Air Force functions subject to the authority, direction and control of the Secretary of the Air Force. The Office of the Chief of Space Operations is informally referred to as the Space Staff.

2.1. The AF/SG reports directly to the Chief of Staff of the Air Force, but provides support to the Secretary of the Air Force, the Under Secretary of the Air Force, other Secretariat offices, the Chief of Space Operations, and other Air Staff and Space Staff offices. The Secretary of the Air Force may re-delegate authority/responsibility to the AF/SG, but the Secretary of the Air Force, through the Chief of Staff of the Air Force and, as appropriate, Assistant Secretaries of the Air Force, retains ultimate responsibility for all matters listed in [Attachment 1](#) of this publication to include the development of policies, plans, and programs, establishing requirements, and providing resources to the AFMS.

2.2. The AF/SG is part of the Air Staff and as such works closely with other Headquarters Air and Space Force offices to assist the Secretary of the Air Force, the Chief of Staff of the Air Force, and the Chief of Space Operations in carrying out their responsibilities. The AF/SG works in cooperation with the Assistant Secretary of the Air Force for Energy, Installations, and Environment (SAF/IE), the Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR), the other Headquarters Air and Space Staff two-letter/digit officials, and their respective offices, which are responsible, pursuant to 10 USC §§ 9013-9024, §§ 9031-9038, and §§ 9081-9084, for assisting the Secretary of the Air Force, the Chief of Staff of the Air Force, and the Chief of Space Operations in carrying out their responsibilities.

2.3. Pursuant to Headquarters Operating Instruction (HOI) 90-1, *Headquarters Air Force Mission Directives and Department of Defense Issuances Program*, two or more two-letter organizations, Field Operating Agencies, or Direct Reporting Units with responsibilities in the same functional area are encouraged to develop standard operating procedures (SOPs) that set forth procedures enabling covered organizations to fulfill and carry out their respective missions, roles, and responsibilities. Therefore, SOPs between AF/SG and SAF/IE, and between AF/SG and SAF/MR are included at Attachments [3](#) and [4](#) of this publication.

2.4. Reporting to the AF/SG is one Field Operating Agency: the Air Force Medical Readiness Agency.

3. Responsibilities. The AF/SG is specifically responsible for:

- 3.1. Guidance, direction, and oversight for all matters pertaining to the formulation, review, and execution of plans, policies, programs, and budgets related to carrying out the mission of the AFMS;
- 3.2. Recommendations as the medical staff advisor to the Secretary of the Air Force, the Chief of Staff of the Air Force and the Chief of Space Operations;
- 3.3. Supports the Defense Health Agency and Assistant Secretary of Defense (Health Affairs) on healthcare delivery for the Department of the Air Force in accordance with National Defense Authorization Act guidance;
- 3.4. Medical readiness for Department of the Air Force personnel as the Air Staff and Space Staff office of primary responsibility and;
- 3.5. Guidance to Major Command Surgeon Generals and Equivalents for the United States Space Force;

4. Delegations of Authority/Assignment of Responsibility. [Attachment 1](#) in the publication lists delegated authorities and assigned responsibilities to the AF/SG. The authorities delegated/responsibilities assigned to the AF/SG by this publication may generally be re-delegated to other Department of the Air Force officials unless re-delegation is expressly prohibited by the attached delegation or superseding law, regulation, or Department of Defense issuance. While the authorities are delegated and responsibilities are assigned to the AF/SG, the exercise of the authorities/responsibilities remains subject to the oversight and control of the Secretary of the Air Force, any Assistant Secretary of the Air Force having oversight, the Chief of Staff of the Air Force and the Chief of Space Operations. Any re-delegations of authority/assignments of responsibility made shall not be effective unless it is in writing. Any person re-delegating authorities in accordance with this directive may further restrict or condition the authority/responsibility being re-delegated/reassigned.

5. Continuation of Prior Re-Delegations of Authority/Assignment of Responsibility . Re-delegations of authority/assignment of responsibility made prior to the date of issuance of this mission directive remain effective in so far as such re-delegations are not inconsistent with the terms of this Headquarters Air Force Mission Directive, unless superseded by new issuances. Attachments: 1. Delegations of Secretary of the Air Force Authority/Assignments of Responsibility of the Air Force Surgeon General 2. The Air Force Surgeon General Organizational Structure 3. Standard Operating Procedures for AF/SG and SAF/IE 4. Standard Operating Procedures for AF/SG and SAF/MR

Frank Kendall
Secretary of the Air Force

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

*References***DELEGATIONS OF SECRETARY OF THE AIR FORCE
AUTHORITY/ASSIGNMENTS OF RESPONSIBILITY TO THE AIR FORCE
SURGEON GENERAL**

A1.1. Authority relating to drug abuse urinalysis programs for military personnel as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1010.01, *Military Personnel Drug Abuse Testing Program (MPDATP)*.

A1.2. Authority relating to enforcement of policies and implementation of programs established by the Department of Defense Coordinator for Drug Enforcement Policy and/or the Assistant Secretary of Defense (Health Affairs) as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1010.04, *Problematic Substance Use by DoD Personnel*.

A1.3. Authority relating to the Department of Defense Civilian Employee Drug Abuse Testing Program as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1010.09, *Department of Defense Civilian Employee Drug-Free Workplace Program*.

A1.4. Authority relating to health promotion and disease and injury prevention as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1010.10, *Health Promotion and Disease Prevention*.

A1.5. Authority relating to ensuring testing programs meet requirements of Military Personnel Drug Abuse Testing Program and that all personnel involved in the testing process receive proper training as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1010.16, *Technical Procedures for the Military Personnel Drug Abuse Testing Program*.

A1.6. Authority relating to the Exceptional Family Member Program, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1315.19, *The Exceptional Family Member Program (EFMP)*.

A1.7. Authority relating to developing and sustaining comprehensive systems medical readiness training as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1322.24, *Medical Readiness Training (MRT)*.

A1.8. Authority relating to providing medically-related services for eligible children with disabilities and monitoring the provision of medically-related services to handicapped children in Department of Defense dependent schools as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 1342.12, *Provision of Early Intervention and Special Education Services to Eligible DoD Dependents*.

A1.9. Authority relating to medical program support for detainee operations as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 2310.08, *Medical Program Support for Detainee Operations*.

A1.10. Authority relating to using animals within Department of Defense laboratories involved in Department of supported or conducted research as delegated to the Secretary of the Air Force

pursuant to Department of Defense Instruction 3216.01, *Use of Animals in DoD Conducted and Supported Research and Training*.

A1.11. Authority relating to forwarding the Department of the Air Force approved combat feeding research and engineering requirements and engineering support to the Department of Defense Executive Agent, appointing a representative to the Combat Feeding Research and Engineering Board and the Department of Defense Nutrition Committee, and assigning a Joint Technical Staff Officer to Army Combat Feeding Research and Engineering Agencies or installations as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 3235.02E, *DoD Combat Feeding Research and Engineering Program*.

A1.12. Authority relating to providing the force structure to operate Class VIII support as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 5101.15, *DoD Medical Materiel Executive Agent (MMEA) Implementation Guidance*.

A1.13. Authority relating to coordinating with the Assistant Secretary of Defense for Health Affairs as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 5136.01, *Assistant Secretary of Defense for Health Affairs (ASD/HA)*.

A1.14. Authority relating to coordinating with the Defense Health Agency and supporting the Military Health System (MHS) as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 5136.13, *Defense Health Agency (DHA)*.

A1.15. Authority relating to the management of the personal service contracts program and establishing a methodology, including audit procedures, to ensure that all personal service contracts entered into are cost effective and/or neutral, when compared to other means of delivering needed healthcare as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.5, *Personal Services Contracts (PSCs) for Health Care Providers (HCPs)*.

A1.16. Authority relating to establishing Clinical Investigation Programs and ensuring compliance as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6000.08, *Defense Health Program Research and Clinical Investigation Programs*.

A1.17. Authority relating to the responsibilities as delegated to the Secretary of the Air Force to meet the needs of Department of the Air Force members and their families, pursuant to Department of Defense Instruction 6490.09, *DoD Directors of Psychological Health*.

A1.18. Authority relating to the responsibilities as delegated to the Secretary of the Air Force pursuant to Department of the Defense Directive 6200.04, *Force Health Protection (FHP)*.

A1.19. Authority relating to the responsibilities as delegated to the Secretary of the Air Force pursuant to Department of the Defense Instruction 6200.06, *Periodic Health Assessment (PHA) Program*.

A1.20. Authority relating to the National Disaster Medical System as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6010.22, *National Disaster Medical System (NDMS)*.

A1.21. Authority relating to ensuring compliance with the instruction and international reciprocal healthcare agreements as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6015.23, *Foreign Military Personnel Care and Uniform Business Offices in Military Treatment Facilities (MTFs)*.

A1.22. Authority relating to establishing Graduate Medical Education (GME) requirements, selecting trainees, supporting GME requirements, providing staffing/resources and compliance with applicable instructions, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6015.24, *DoD Graduate Medical Education Program*.

A1.23. Authority relating to implementing procedures, including, but not limited to, standard-of-care determinations by the Military Surgeons General and the reporting of those determinations as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.13, *Medical Quality Assurance (MQA) and Clinical Quality Management in the Military Health System (MHS)*.

A1.24. Authority relating to reporting Individual Medical Readiness metrics according to requirements established by the Assistant Secretary of Defense (Health Affairs) as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.19, *Individual Medical Readiness (IMR)*.

A1.25. Authority relating to forwarding approved blast injury medical research requirements to the Department of Defense Executive Agent for consideration and integration; appointing a medical general or flag officer representatives as needed and appoint representatives to any other coordination, oversight, or assessment board established by the Department of Defense Executive Agent; and providing an appropriate system for identification, verification, prioritization, and headquarters/staff-level approval of blast injury requirements before submission to the Department of Defense Executive Agency as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 6025.21E, *Medical Research for Prevention, Mitigation, and Treatment of Blast Injuries*.

A1.26. Authority relating to establishing a service treatment record and/or non-service treatment record information management program and updating Departmental regulations as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6040.45, *DoD Health Record Life Cycle Management*.

A1.27. Authority relating to implementing policies, processes, and programs to provide adequate and appropriate nutrition to Service members in a cost-effective manner and providing military-specific education and training to Service members on the benefits of adequate and appropriate nutrition and the use of and potential harm from dietary supplements, and providing appropriate representation to the Department of Defense Nutrition Committee, its subcommittees, and any other subordinate organization as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6130.05, *DoD Nutrition Committee*.

A1.28. Authority relating to applying and uniformly implementing the medical standards; authorizing the waiver of the standards in individual cases ensuring uniform waiver determinations; authorizing changes in Service-specific visual standards and establish other standards for special programs; notifying Assistant Secretary of Defense (Health Affairs) of any proposed changes in standards; ensuring accurate codes are assigned to all medical conditions resulting in personnel action; eliminating inconsistencies and inequities based on race, sex, or examination location of these standards by the Air Force and Space Force as delegated to the Secretary of the Department Air Force pursuant to Department of Defense Instruction 6130.03 *Volume 1, Medical Standards for Military Service: Appointment, Enlistment, or Induction, and Department of Defense Instruction 6130.03 Volume 2, Medical Standards for Military Service: Retention*.

A1.29. Authority relating to ensuring compliance and implementing instructions issued by the Assistant Secretary of Defense (Health Affairs) and requirements established by the Lead Component as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6200.02, *Application of Food and Drug Administration (FDA) Rules to Department of Defense Force Health Protection Programs*.

A1.30. Authority relating to implementing effective force health protection/quality assurance systems to ensure compliance as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6200.05, *Force Health Protection Quality Assurance (FHPQA) Program*.

A1.31. Authority relating to establishing broad policies on the development and implementation of Family Advocacy programs; designating a family advocacy program manager; establishing standardized criteria for the selection and certification of healthcare and social service personnel; providing education and training to key personnel to alleviate problems associated with child and spouse abuse; and ensuring military families living in the civilian community and on military installations are included in the family advocacy program as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6400.01, *Family Advocacy Program (FAP)*.

A1.32. Authority relating to ensuring compliance, establishing procedures, designating nominees for the family advocacy command assistance team and encouraging timely and comprehensive reporting, assigning responsibilities, and using the Department of Defense Family Advocacy Command Assistance Team to assist in addressing extra familial child sexual abuse allegations as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6400.03, *Family Advocacy Command Assistance Team (FACAT)*.

A1.33. Authority relating to establishing procedures; ensuring adequate funding and staffing resourcing; developing strategies; issuing policies and procedures to increase awareness and prevent child abuse and domestic abuse as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6400.05, *New Parent Support Program (NPSP)*.

A1.34. Authority relating to establishing policies and programs and evaluation at all levels of military command; programming, budgeting and allocating funds and other resources; providing annual education and training; establishing regulations implementing a restricted reporting policy for victims for domestic abuse as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6400.06, *DoD Coordinated Community Response to Domestic Abuse Involving DoD Military and Certain Affiliated Personnel*.

A1.35. Authority relating to providing the food inspection program at Air Force and Space Force bases and developing locally approved lists of food suppliers from which food products are procured only for individual Air Force or Space Force installations as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 6400.04E, *DoD Veterinary Public and Animal Health Services*.

A1.36. Authority relating to planning and programming for medical intelligence resources in consonance with fiscal policy and guidance established by the Secretary of Defense and the Under Secretary of Defense and providing military personnel consistent with National Center for Medical Intelligence mission requirements as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6420.01, *National Center for Medical Intelligence (NCMI)*.

A1.37. Authority relating to participation in collaborative Department of Defense medical materiel acquisition, life cycle management, and standardization programs and the adoption of standardized medical items and logistics management processes to support Service requirements to promote uniformity, efficiency, and joint interoperability as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6430.02, *Defense Medical Logistics Program*.

A1.38. Authority relating to enacting Department of Defense Clinical Laboratory Improvement program policy and Clinical Laboratory Improvement Amendments comparable to Department of the Air Force regulations within the regular and reserve components to include oversight, inspection, proficiency testing, personnel standards, and training in clinical laboratories as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6440.02, *Clinical Laboratory Improvement Program (CLIP)*.

A1.39. Authority relating to developing and implementing a comprehensive plan to screen for G6PD deficiency; developing and implementing a comprehensive plan to screen for sickle cell trait; and providing necessary resources to support these programs as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6465.01, *Erythrocyte Glucose-6-Phosphate Dehydrogenase Deficiency (G6PD) and Sickle Cell Trait Screening Programs*.

A1.40. Authority relating to establishing and maintaining a blood program that provides blood and blood products to the maximum extent possible, to component military treatment facilities; provides appropriate support personnel, facilities, and budgetary resources to support the Armed Services Whole Blood Processing Laboratories and the blood shipment centers and/or transportable blood transshipment centers as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6480.04, *Armed Services Blood Program Operational Procedures*.

A1.41. Authority relating to establishing Department of the Air Force policies, procedures and standards for identification, surveillance, education and administration of personnel infected with Human Immunodeficiency Virus; supporting the recommendations of the Department of Defense-wide Sexually Transmitted Disease Prevention Committee; reporting Human Immunodeficiency Virus test results to the Defense Medical Surveillance System; ensuring personnel providing medical care follow the Centers for Disease Control recommendations for preventing Human Immunodeficiency Virus transmission as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6485.01, *Human Immunodeficiency Virus (HIV) in Military Service Members*.

A1.42. Authority relating to participating in global Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) prevention support to foreign militaries as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 6485.02E, *DoD Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) Prevention Program (DHAPP) to Support Foreign Militaries*.

A1.43. Authority relating to applying and uniformly implementing the standards; ensuring all deploying personnel have a medical assessment to evaluate their medical status before contingency deployments; ensuring pre-deployment processes are in place to identify deployment limiting medical conditions; and ensuring a high state of pre-deployment health and medical readiness as delegated to the Secretary of the Air Force pursuant to Department of

Defense Instruction 6490.07, *Deployment-Limiting Medical Conditions for Service Members and DoD Civilian Employees*.

A1.44. Authority relating to implementing programs and procedures to ensure compliance; evaluate and recommend changes or improvements to the overall health surveillance program; assembling and archiving garrison occupational and environmental health surveillance data/reports and supporting the Department of Defense Executive Agent as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 6490.02E, *Comprehensive Health Surveillance*.

A1.45. Authority relating to coordinating with other Military Departments and ensuring compliance with implementation and application of joint medical surveillance for deployments and evaluating and recommending changes or improvements to the overall medical surveillance program; training, equipping, and providing staffing support to conduct site assessments; program and budgeting for necessary resources as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.03, *Deployment Health*.

A1.46. Authority relating to ensuring compliance and developing a comprehensive Combat Stress Control Program consistent with the Joint Service Combat Stress Control Program for Air Force and Space Force specific operations from garrison to battlefield as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.05, *Maintenance of Psychological Health in Military Operations*.

A1.47. Authority relating to assisting the Director, Defense Health Agency and the Joint Staff Surgeon develop common, analytically rigorous methodologies used to develop current and future joint operational medical force requirements and joint standards for joint operational medical force requirements; as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 8260.04, *Military Health System (MHS) Support for DoD Strategic Analysis*.

A1.48. Authority relating to promulgating Department of the Air Force policies and providing guidance for the management of concussion and mild traumatic brain injuries in the deployed setting to include programming and budgeting resources and developing reporting guidelines for potential concussive events as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.11, *DoD Policy Guidance for Management of Mild Traumatic Brain Injury/ Concussion in the Deployed Setting*.

A1.49. Authority relating to Department of Defense laboratories, programs, and activities with analytic or response capabilities as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6440.03, *DoD Laboratory Network (DLN)*.

A1.50. Authority relating to ensuring compliance with DoD policy to foster a culture of support in the provision of mental health care and voluntarily sought substance abuse education to military personnel in order to dispel the stigma of seeking mental health care and/or substance misuse education services, by implementing the guidance for healthcare provider notifications to command and the protection of private information as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.08, *Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members*.

A1.51. Authority relating to ensuring compliance and implementing instructions issued by the Assistant Secretary of Defense (Health Affairs) to meet mission assurance and readiness by

protecting installations, facilities, personnel, and other assets in managing the impact of public health emergencies caused by all-hazards incidents as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6200.03, *Public Health Emergency Management (PHEM) Within the Department of Defense*.

A1.52. Authority relating to developing, implementing, and maintaining immunization procedures or processes for personnel under Department of the Air Force jurisdiction; compliance with procedural instructions; ensuring immunization requirements are provided in operational use guidance; identifying and defining requirements and providing resources, including logistical support; and providing requested information to the Defense Health Agency, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6205.02, *DoD Immunization Program*.

A1.53. Authority relating to building medical forces to meet validated requirements; approving Military Department specific expeditionary knowledge, skills, and abilities established for each clinical specialty; developing and maintaining readiness for medical personnel; implementing a clinical readiness assessment process for wartime skills maintenance; and approving medical, clinical or logistical capabilities required as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6000.19, *Military Medical Treatment Facility Support of Medical Readiness Skills of Health Care Providers*.

A1.54. Authority relating to execute Secretary of Defense taskings to provide medical materiel support for assigned units. Provide the necessary force structure and initial outfitting to operate Class VIIIA unit support. Provide reimbursement and funding for supplies provided and budget for changes resulting from implementation of this directive. Coordinate Class VIIIA support requirements for Medical Materiel and the Director, Defense Health Agency as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 5101.09E, *Class VIIIA Medical Materiel Supply Management*.

A1.55. Authority relating to the alignment with Service staffing levels, providing authorized military manpower in accordance with approved individual Service manning documents that identify billets and which describe the requirements of the Service member selected to fill the position in terms of Service, Corps, grade, and specialty, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 5105.45, *Uniformed Services University of the Health Sciences (USU)*.

A1.56. Authority relating to support Assistive Technology programs within the continuum of care, such as DoD Component wounded warrior programs, community-based healthcare organizations, the Veterans Administration Polytrauma Rehabilitation Centers, and other similar programs, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.22, *Assistive Technology (AT) for Wounded, Ill, and Injured Service Members*.

A1.57. Authority relating to the testing of Service members and Department of Defense civilians across the deployment cycle will undergo computerized neurocognitive assessment testing as specified as delegated to the Secretary of the Air Force pursuant Department of Defense Instruction 6490.13, *Comprehensive Policy on Traumatic Brain Injury Related Neurocognitive Assessments by Members of the Military Services*.

A1.58. Authority relating to issuing, implementing, updating, and monitoring a component human research protection program management plan in order to conduct or support Department

of Defense research involving human subjects, as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 3216.02, *Protection of Human Subject and Adherence to Ethical Standards in DoD-Conducted and Supported Research*.

A1.59. Authority relating to the Executive Agency responsibilities as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 5154.30, *Armed Forces Medical Examiner System (AFMES) Operations*.

A1.60. Authority as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6465.03, *Anatomic Gifts and Tissue Donation*, to include authority to ensure that notification of donation procedures is provided to officer candidates and recruits in accordance with section 1109(b) of Title 10, U.S.C.

A1.61. Authority as delegated to the Secretary of the Air Force, which requires the Secretary to develop and distribute policies implementing procedures for transition of Service members' behavior health care to new locations; and to ensure military treatment facility commander's compliance with the instruction and that provider(s) are made aware of the instruction by installation medical authorities pursuant to Department of Defense Instruction 6490.10, *Continuity of Behavioral Health Care for Transferring and Transitioning Service Members*.

A1.62. Authority relating to ensuring compliance with subject Instruction and with the Department of Defense Health Information Privacy Regulation as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.18, *Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Compliance in DoD Health Care Programs*.

A1.63. Authority as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.04, *Mental Health Evaluations of Members of the Military Services* relating to implementing requirements for mental health evaluations of Armed Forces members which provides for the rights and protection of Service members; as well as, authority to ensure compliance and establish procedures for reporting to the Inspector General, Department of Defense, any assessments that a mental health evaluation was used in violation of this directive.

A1.64. Authority related to ensuring commanders and supervisors are proficient in fulfilling their responsibilities, as set forth by Military Department's policies and procedures as delegated to the Secretary of the Air Force as pursuant to Department of Defense Instruction 6490.15, *Integration of Behavioral Health Personnel (BHP) Services Into Patient-Centered Medical Home (PCMH) Primary Care and Other Primary Care Service Settings*.

A1.65. Authority as delegated to the Secretary of the Air Force pursuant to Department of Defense Instructions 8580.02, *Security of Individually Identifiable Health Information in DoD Health Care Programs*.

A1.66. Authority relating to ensuring compliance as delegated to the Secretary of the Air Force for operational health units pursuant to Department of Defense Instruction 6000.14, *DoD Patient Bill of Rights and Responsibilities in Military Health System (MHS)*.

A1.67. Authority delegated to the Secretary of the Air Force for coding outside the military treatment facility as per Department of Defense Instruction 6040.42, *Management Standards for Medical Coding of DoD Health Records*.

A1.68. Authority delegated to the Secretary of the Air Force to make eligibility determinations, and administer policies that provide uniformed services members and eligible beneficiaries' access to DoD medical and dental programs as per the Department of Defense Directive 6010.04 *Healthcare for Uniformed Services Members and Beneficiaries*.

A1.69. Authority relating to Anti-Fraud Program at MTFs as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 5505.12, *Anti-Fraud Program at Military Treatment Facilities (MTFs)*.

A1.70. Authority as delegated to the Secretary of the Air Force pursuant to Department of Defense Directive 6070.01, *Department of Defense Medicare Eligible Retiree Health Care Fund*.

A1.71. Authority relating to calculating the required normal cost contribution as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6070.7, *Department of Defense Medicare Eligible Retiree Health Care Fund Operations*.

A1.72. Authority relating to Department of Defense and Department of Veterans Affairs Health Care Resource Sharing Program as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6010.23, *Department of Defense and Department of Veterans Affairs Health Care Resource Sharing Program*.

A1.73. Authority delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.20, *Medical Management (MM) Programs in the Direct Care System (DCS) and Remote Areas*.

A1.74. Authority delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6025.24, *Provision of Food and Beverages to Certain Uniformed Service Members, Former Members, and Dependents Not Receiving Inpatient Care in Medical Treatment Facilities (MTFS)*

A1.75. Authority delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6040.40, *Military Health System (MHS) Data Quality Management Control (DQMC) Program*.

A1.76. Authority relating to compliance as delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6015.17, *Military Health System (MHS) Facility Portfolio Management*.

A1.77. Authority delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6400.09, *DoD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm*.

A1.78. Authority delegated to the Secretary of the Air Force pursuant to Department of Defense Instruction 6490.12, *Mental Health Assessments for Service Members Deployed in Connection with a Contingency Operation*.

Attachment 2

THE AIR FORCE SURGEON GENERAL ORGANIZATIONAL STRUCTURE

A2.1. As per 10 U.S.C. § 9036, the AF/SG serves as advisor to the Secretary of the Air Force, Chief of Staff, and the Chief of Space Operations on all health and medical matters of the Department of the Air Force, including strategic planning and policy development related to such matters. The Surgeon General also serves as the chief medical advisor of the Air Force and Space Force to the Director of the Defense Health Agency on matters pertaining to military health readiness requirements and safety of Airmen and Guardians. AF/SG, under the authority, direction and control of the Secretary of the Air Force, recruits, organizes, trains and equips medical personnel of the Air Force.

A2.2. Headquarters Air Force three-digit subordinate offices include:

A2.2.1. Executive Services (AF/SGE). Manages and directs executive and administrative support functions for the AF/SG. Mentors staff officers on tactics, techniques, and procedures on how to operate and succeed at the Air Staff and Space Staff level. Aligns directors and staff to respond to requests for information from other Services and Inter-agencies.

A2.2.2. Chief, Medical Enlisted Force (AF/SGF). Principal enlisted advisor, and member of the AFMS Corporate Structure. Serves as the AFMS Enlisted Corps Chief, providing guidance on all issues regarding the welfare, readiness, morale, and proper utilization and progression for all personnel in the Total Force medical enlisted community. Serves as the focal point for inquiries on medical policy and procedures to the Chief Master Sergeant of the Air Force and the Chief Master Sergeant of the Space Force.

A2.2.3. Congressional and Public Affairs (AF/SGL). Serves as spokesperson and communicator for AFMS policies, programs, personnel, beneficiaries, successes, and requirements; integrating Congressional liaison and public affairs functions for comprehensive public outreach.

A2.2.4. Legal Advisor for AF/SG (AF/SGJ). Provides legal counsel and support to the AF/SG on matters of policy, operations, medical ethics, patient safety, and standards of practice. Acts as liaison to the Department of the Air Force Judge Advocate General, Secretary of the Air Force General Counsel and the Department of Defense General Counsel. While the Legal Advisor to the Surgeon General is listed as a “3-letter” it is actually a position under the Judge Advocate General of the Air Force’s Civil Law Domain, with an attorney detailed to provide direct legal support to the AF/SG.

A2.3. Directorates:

A2.3.1. Directorate for Medical Operations (AF/SG3/4). Develops and executes AF/SG medical readiness policies and programs; integration of Air Reserve components, and all aspects of medical readiness.

A2.3.1.1. Develops policy and drives AFMS peak clinical performance. Develops policy to optimize the application of health expertise in support of unique operational requirements across the Department of the Air Force. Provides healthcare expertise and policy support to human performance optimization and integrated resiliency efforts across

the enterprise. Serves as a critical interface between operationally embedded health delivery platforms and the AFMS.

A2.3.1.2. Develops dental readiness policy. Provides advice to the AFMS corporate structure on dental personnel resources.

A2.3.1.3. Develops policy to optimize the health, safety, and performance for the Department of the Air Force, including physical standards, force health protection, environmental safety, bioenvironmental engineering, public health, and occupational, and flight/operational medicine programs. Leads several North Atlantic Treaty Organization activities and oversees outreach programs worldwide.

A2.3.1.4. Provides oversight, strategic direction, policy and medical operational support for air/space ground and air/space expeditionary medical capabilities used in agile combat support, homeland security, and humanitarian aid/disaster response operations. Directs and coordinates deliberate planning activities to include guidance for medical unit type code and medical chemical, biological, radiological, and nuclear program development, implementation and management for current and future requirements. Provides medical readiness training and exercise oversight for expeditionary operational requirements.

A2.3.2. Directorate for Manpower, Personnel, and Resources (AF/SG1/8). Develops strategic policy, plans, programs, budgets, and executes assigned resources for the conduct of comprehensive medical readiness operations. Formulates and evaluates policies and programs related to the recruitment, retention, development, and utilization of the AFMS workforce. Addresses full spectrum of medical force management, force sustainment, senior leader management, and education/training related activities.

A2.3.2.1. Responsible for Total Force planning, particularly as it applies to personnel initiatives affecting recruiting, retention, education, and training. Ensures appropriate numbers of medical personnel are trained and developed to fulfill AFMS requirements, worldwide.

A2.3.2.2. Responsible for formulating policy relating to the recruitment, retention, education, training, development and integration of civilian medical personnel.

A2.3.2.3. Evaluates annual portfolio to program resources medical readiness capabilities in terms of financial, manpower, and facility requirements.

A2.3.2.4. Evaluates and analyzes the AFMS Future Years Defense Program and long-range plans and doctrine to support national security objectives and military strategy.

A2.3.2.5. Works closely with the Defense Health Agency, AF/A8 and Department of the Air Force Corporate Structure to ensure the AFMS is well integrated in all aspects of the Department of the Air Force planned and programmed capabilities. In addition, AF/SG1/8 manages the AFMS Corporate Structure, working closely with all other AF/SG Directorates in integrating and formulating a consistent policy for AFMS global medical readiness capabilities for the AF/SG.

A2.3.2.6. Responsible for budgeting and executing assigned resources in accordance with existing laws and policies, maintaining internal controls over financial operations, and preparing financial statements for assigned resources.

A2.3.2.7. Serves as the principal contact for all joint basing and base realignment and closure medical activities working closely with the Defense Health Agency, major commands, field commands, the Headquarters Air Force, other Services, the Joint Staff, and the Office of the Secretary of Defense.

Attachment 3

STANDARD OPERATING PROCEDURES FOR THE ASSISTANT SECRETARY OF THE AIR FORCE (INSTALLATIONS, ENVIRONMENT, & LOGISTICS) AND THE AIR FORCE SURGEON GENERAL

A3.1. These standard operating procedures (SOPs) apply to individuals assigned to Assistant Secretary of the Air Force for Installations, Environment, and Logistics (SAF/IE) and the Air Force Surgeon General (AF/SG) who are responsible for developing policy, managing programs, and preparing guidance on approved policies and plans for the field in the general area of occupational health. These procedures are intended to facilitate routine staff actions and functions and reduce duplication of effort between SAF/IE and AF/SG staff roles while increasing operating effectiveness and efficiency.

A3.1.1. SAF/IE retains authority and responsibility for occupational health programs delegated through public law, executive order and Department of Defense Directive and Instruction. These include programs outlined in:

A3.1.1.1. DoD Directive 4715.01E, *Environment, Safety and Occupational Health (ESOH)*.

A3.1.1.2. DoD Instruction 6050.05, *DoD Hazard Communication (HAZCOM) Program*.

A3.1.1.3. DoD Instruction 6055.05, *Occupational and Environmental Health (OEH)*.

A3.1.1.4. DoD Instruction 6055.08, *Occupational Ionizing Radiation Protection Program*.

A3.1.1.5. DoD Instruction 6055.11, *Protecting Personnel From Electromagnetic Fields*.

A3.1.1.6. DoD Instruction 6055.12, *Hearing Conservation Program (HCP)*.

A3.1.1.7. DoD Instruction 6055.15, *DoD Laser Protection Program*.

A3.2. Subject to the SOPs that follow, a general description of the flow of work between SAF/IE and AF/SG for the specific programs described in [paragraph A3.1](#) is:

A3.2.1. AF/SG submits policies requiring Secretary of the Air Force approval to SAF/IE for coordination and concurrence prior to publication.

A3.2.2. AF/SG executes approved policies and guidance, Department of the Air Force instructions, and strategic plans, providing additional guidance to the field as necessary.

A3.2.3. The Deputy Assistant of SAF/IE coordinates policies that impact execution of the Air and Space Occupational Health Program with AF/SG prior to publication.

A3.3. Conditions for AF/SG to Exercise Delegated Secretarial Authorities. AF/SG is authorized to act on the Secretary of the Air Force or SAF/IE's behalf for programs outlined in [paragraph A3.1](#) When such action:

A3.3.1. Provides data, analyses, information papers, etc., to the Office of the Secretary of Defense or congressional staff in support of established policies, programs, or other initiatives that have been vetted through the Department of the Air Force corporate structure, or other appropriate decision process; e.g., senior leader forum or fully coordinated staff package.

A3.3.2. Implements an order or revised policy direction from the Secretary of the Air Force.

A3.3.3. Satisfies routine reporting requirements and requests for status reports on the Department of the Air Force programs/initiatives from the Office of the Secretary of Defense and the United States Congress.

A3.4. Conditions Requiring SAF/IE Action. SAF/IE review and concurrence are required prior to implementing any policy, plan, and program when one or more of the following situations or conditions apply for programs outlined in [paragraph A3.1](#).

A3.4.1. Involves a controversial issue that will cause, or is likely to cause, significant reactions among senior Administration officials, members of the United States Congress or key staff, the public, or the press.

A3.4.2. Involves the breach of a performance parameter established in policy directives and/or Department of the Air Force guidance.

A3.4.3. Informs SAF/IE of annual occupational health programs and budget requirements and any impacts to Occupational Health program execution.

A3.5. Conditions Requiring SAF/IE Approval of AF/SG Actions. SAF/IE approval is required prior to implementing any policy, plan, program, practice or activity for programs outlined in A3.1 when one or more of the following situations or conditions apply:

A3.5.1. Involves a Statute, Executive Order, or Department of the Defense policy that requires Secretary of the Air Force review, coordination, and/or implementation. Department of Defense policy requires Department of Defense Forms 106, DoD Issuances Program Coordination Record, be signed by SAF/IE.

A3.5.2. Involves new policies or initiatives proposed by the Office of the Secretary of Defense officials, congressional staff, or Department of the Air Force that would result in significant changes to the Department of the Air Force programs that are the corollary to DoD programs in [paragraph A3.1](#).

A3.6. Conditions Requiring AF/SG Review of SAF/IEE Actions. AF/SG review is required before implementing any policy, plan, program, practice or activity for programs outlined in [paragraph A3.1](#), which may cause a resource impact as a result of execution.

A3.7. Revisions to Standard Operating Procedures. These operating procedures may be reviewed and revised as deemed necessary by the Secretary of the Air Force. SAF/IE or AF/SG may also initiate a revision in consultation with AF/SG or SAF/IE, respectively. Office of Primary Responsibility must follow revision procedures as mandated in HOI 90-1.

//signed//

Edwin H. Oshiba

Acting Assistant Secretary of the Air Force

//signed//

Robert I. Miller

Lieutenant General, USAF, MC, SFS

Air Force Surgeon General

Attachment 4**STANDARD OPERATING PROCEDURES FOR THE ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER AND RESERVE AFFAIRS) (SAF/MR) AND THE AIR FORCE SURGEON GENERAL (AF/SG)**

A4.1. These standard operating procedures (SOPs) apply to individuals assigned to SAF/MR and AF/SG who are responsible for developing policy, managing programs, and preparing guidance on approved policies and plans. These procedures are intended to facilitate routine staff actions and functions between SAF/MR and AF/SG while increasing operating effectiveness and efficiency.

A4.1.1. Subject to the SOPs that follow, a general description of the flow of work between SAF/MR and AF/SG is:

A4.1.1.1. AF/SG submits policies requiring Secretary of the Air Force approval to SAF/MR for coordination and concurrence;

A4.1.1.2. AF/SG develops Department of the Air Force instructions and submits them to SAF/MR for coordination and concurrence prior to AF/SG publication;

A4.1.1.3. AF/SG develops strategic plans and submits them to SAF/MR for coordination and concurrent prior to SG implementation; and,

A4.1.1.4. AF/SG executes approved policies and guidance, Department of the Air Force instructions, and strategic plans, providing additional guidance to the field as necessary.

A4.1.2. Additionally, AF/SG and SAF/MR will jointly establish performance measurements so that AF/SG will notify SAF/MR when required. This will be when conditions and measurement parameters signal an issue or initiative requires the involvement of SAF/MR to fulfill inherent policy oversight responsibility.

A4.2. AF/SG Support of the Chief of Staff of the Air Force and Chief of Space Operations in their roles as members of the Joint Chiefs: AF/SG will act independently of SAF/MR when AF/SG is providing support to the Vice Chief or Chief of Staff of the Air Force or Vice Chief or Chief of Space Operations in their roles as members of the Joint Chiefs of Staff, including the Joint Requirements Oversight Council. To the extent not inconsistent with the direction of the Chiefs or the Vice Chiefs, AF/SG will keep SAF/MR informed of significant matters in these areas.

A4.3. SAF/MR Responsibility to the Secretary of the Air Force: SAF/MR retains Secretarial oversight responsibility for all aspects of the regular Air Force and Space Force, as well as Air Reserve and Auxiliary Component Affairs concerning health program benefits and entitlements, and medical readiness to include authorities delegated directly to AF/SG in this publication.

A4.4. Conditions for AF/SG to Exercise Delegated Secretarial Authorities. AF/SG is authorized to act on the Secretary of the Air Force or SAF/MR's behalf when such action:

A4.4.1. Implements and supports the Program Management Objective, Budget Estimate Submission, or President's Budget;

A4.4.2. Implements an order or revised policy direction from the Secretary of the Air Force;

A4.4.3. Provides a clear, unambiguous, quantitative link to and/or aligns program resources with goals and objectives;

A4.4.4. Excluding formal reports, provides data, analyses, information papers, etc., to the Office of the Secretary of Defense or congressional staff in support of established policies, programs, or other initiatives that have been vetted through the Department of the Air Force Corporate Structure or other appropriate decision process: e.g., senior leader forum or fully coordinated staff package. SAF/GC will provide SAF/MR a copy of all material submitted to the Office of the Secretary of Defense or congressional staffs.

A4.5. Conditions Requiring SAF/MR Involvement. SAF/MR review and concurrence is required prior to implementing any policy, plan, and program when one or more of the following situations or conditions apply:

A4.5.1. Involves a disagreement among the components of the Department of the Air Force Total Force on a policy over which SAF/MR has authority;

A4.5.2. Drives unfunded or budgeted resource demands (\$50 million or more across the Future Year Defense Program) to the federal government, or that requires Department of the Air Force Corporate Structure consideration and/or an annual reprogramming action;

A4.5.3. Involves a controversial issue that will cause, or is likely to cause, significant reactions among senior Administration officials, members of Congress or key staff, the public, or the press;

A4.5.4. Drives broad cultural changes crossing many Department of the Air Force functions that will take concerted coordinated action over several years to achieve;

A4.5.5. Involves an assessment of a program, falling within the portfolio of SAF/MR, that suggests a significant problem or failure in the program, or an out of tolerance condition in a performance measurements established in policy directives and/or Department of the Air Force instructions requiring Secretary of the Air Force, the Office of the Secretary of Defense or Congressional attention.

A4.6. Conditions Requiring SAF/MR Approval of AF/SG Actions. SAF/MR approval is required prior to implementing any policy, plan, program, practice or activity when one or more of the following situations or conditions apply:

A4.6.1. Is an official report being submitted to the Office of the Secretary of Defense or Congress;

A4.6.2. Involves a change or perceived erosion of Air Force and Space Force support for a key Secretary of the Air Force or Administration agenda item about which the Principal speaks; likewise for a senior member of Congress or a member of a congressional committee with significant focus on national defense-related issues (such as Armed Services, Appropriations, Ways and Means, or Veterans Affairs);

A4.6.3. Involves process changes affecting the oversight roles or abilities of the Department of the Air Force, Office of the Secretary of Defense, other (non-Department of the Air Force) Administration officials, or the Congress;

A4.6.4. Involves a Statute, Executive Order, or Department of Defense policy that requires Secretary of the Air Force review, coordination, and/or implementation. Department of the Air Force policy requires all Department of Defense Form 106 must be signed by SAF/MR;

A4.6.5. Involves new policies or initiatives proposed by the Office of the Secretary of Defense officials, congressional staff, or Department of the Air Force that would result in significant changes to Department of the Air Force personnel management practices or programs and their outcomes.

A4.6.6. Involves decisions relating to SAF/MR operations, to include personnel assignments, temporary duty and supply resource, and contract or research support.

A4.7. Revisions to Standard Operating Procedures. These operating procedures may be reviewed and revised as deemed necessary by the Secretary of the Air Force. SAF/MR or AF/SG may also initiate a revision in consultation with AF/SG or SAF/MR, respectively. OPRs must follow revision procedures as mandated in HOI 90-1.

//signed//

John A. Fedrigo

Acting Assistant Secretary of the Air Force for Manpower and Reserve Affairs

//signed//

Robert I. Miller

Lieutenant General, USAF, MC, SFS

Air Force Surgeon General