OPENING PARAGRAPHS: This directive states the mission, defines the command structure, and establishes the responsibilities of the Air Force Medical Operations Agency (AFMOA) as an Air Force Field Operating Agency (FOA). It applies to the AFMOA. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR). Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, Management of Records, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at https://www.my.af.mil/gess-af61a/afrims/afrims/.

SUMMARY OF CHANGES

This Directive was expanded to include new responsibilities of the Air Force Medical Operations Agency due to implementation of PAD 07-13. The new version of AFMD 35 includes the responsibilities of the following: Commander’s Support Staff (CSS), Commander’s Action Group (CAG), MAJCOM AFMOA Team For Requirements and Information X-Fer (MATRIX), Transformation (CCO), Medical Support, Medical Services, Nursing Services, Biomedical Sciences, Air Force Drug Testing Lab and Dental Services.

1. Mission. AFMOA supports all aspects of Air Force and Joint missions through the execution of programs to enhance the health and performance of Airmen and members of other Department of Defense (DoD) Services through healthcare operations in Air Force medical treatment facilities (MTFs) and other Air Force medical units. AFMOA further supports these missions through promotion of health and provision of healthcare for family members who are authorized beneficiaries for DoD healthcare. AFMOA is the Surgeon General’s primary focal point for
execution and standardization of plans, practices, procedures and programs in planning, budget execution, logistics, clinical operations, clinical quality management, family advocacy and health promotions for the Air Force Medical Service (AFMS). AFMOA coordinates medical process improvement activities IAW AFMS strategies.

2. **Command.** The AFMOA Commander:

   2.1. Commands personnel assigned to AFMOA.

   2.2. In coordination with the Health Care Operations Directorate (AF/SG3), supports and oversees execution of Air Force Surgeon General (AF/SG) guidance and programs.

   2.3. Provides support to Headquarters Air Force (HAF), Department of Defense, major commands, other federal agencies and external civilian medical and research organizations on behalf of AFMS interests.

3. **Responsibilities.**

   3.1. The AFMOA Commander:

      3.1.1. Develops plans, practices and procedures to provide a fit and healthy USAF fighting force.

      3.1.2. Directs clinical activities necessary to meet the requirements of Congressionally mandated DoD health care benefits entitlements.

      3.1.3. Directs clinical quality improvement and risk management programs.

      3.1.4. Manages the allocation and utilization of manpower and funds for AF MTFs in accordance with programming and budgeting by the Strategic Medical Plans, Programs and Budget Directorate (AF/SG8).

      3.1.5. Develops recommendations for the Surgeon General in coordination with other directorates regarding optimal apportionment of resources to clinical processes to meet strategic priorities pertaining to readiness, provision of quality clinical care and force development.

      3.1.6. Leads analysis of healthcare processes in the interest of quality care, efficient use of resources and clinical currency of health care professionals. Leads proposal and execution of AFMS health care process improvement initiatives as approved by the Surgeon General.

   3.2. Commander’s Support Staff (CSS).

      3.2.1. The CSS is responsible for overall management of personnel and administration duties and acts as liaison for the Military Personnel Flight’s programs and services;

      3.2.2. Monitors the submission, coordination and completion of all MILPDS-produced documents; manages and maintains EPRs/OPRs, PRFs, decorations, leave, files management, INTRO/Out-processing, officer/enlisted training, promotion, fitness program, DTS, Government Travel Card, LODs, performance feedbacks, urinalysis trusted agent, quarterly awards program coordinator, appointment letters, unit health monitor, contract verification system monitor, security badge control, IMPAC card, newcomer’s orientation, UIF and control rosters, WAPS testing, reenlistments, duty status, officer and enlisted classification and retirements to support the AFMOA/CC.
3.3. Commander’s Action Group (CAG).

3.3.1. The CAG is responsible for overall communication and guidance in AFMOA. The CAG provides support to AFMOA/CC and staff with civilian personnel oversight and program management.

3.3.2. Perform Strategic Planning: anticipate future needs, generate ideas, authority to task directorates; meets with AFMOA/CC regularly to discuss current/hot issues, upcoming events, to plan accordingly.

3.3.3. Conduct research, direct special projects, compiles briefings.

3.3.4. Perform Strategic Communication: compile briefings, prepare correspondence, remarks/speeches for such forums as NOVA, conferences, etc; facilitates AFMOA social media/network; optimizes technology to improve communications and strengthen relationships with MAJCOM/SGs and MTFs.

3.3.5. Review and approve correspondence (briefings, memos, BBPs, any AFMOA/CC signature-required correspondence) prior to AFMOA/CC’s review.

3.3.6. Perform civilian personnel management duties.

3.3.7. As the pay pool administrator, manages and oversees the guidance governing the hiring staff, classification and appraisals.

3.3.8. Coordinate education and training guidance and procedures pertaining to civilian employees.

3.4. MAJCOM-AFMOA Team For Requirements and Information X-Fer (MATRIX).

3.4.1. This cell will be responsible to maintain responsive and coordinated bi-directional information flow and responses between AFMOA and each MAJCOM.

3.4.2. Gatekeeper “Single Point of Entry / Exit” for large MAJCOM tasks requiring detailed analysis.

3.4.3. Maintains and updates AFMOA Vector Check web site with pertinent data and analysis. Provides MAJCOMs with real-time access to pertinent data utilizing Vector Check.

3.4.4. Focal communicator with AFMOA resources stationed within each respective MAJCOM. Holds periodic training and video teleconferencing sessions to address issues associated with duties within each respective MAJCOM and addresses concerns as appropriate.

3.4.5. Reports periodically to AFMOA senior leadership on pending tasks and identifies barriers hindering improved communications and issues hindering mission accomplishment.

3.4.6. Manages AFMOA workflow process establishing internal suspenses to meet the demand of both internal and external tasks.

3.5. Transformation (CCO).

3.5.1. This division directs and coordinates the integrated planning, scheduling, execution and assessment of the performance analysis and improvement program using
proven continuous process improvement methods. Works directly with senior AFMS leadership to ensure continuous process improvement (CPI) activities align to AF/SG strategic vision and priorities focusing on productivity and efficiency. Coordinates integrated planning, scheduling, execution and assessment of prioritized CPI activities and monitors success. Provides direct support to the field on AFMS CPI program and related policies, procedures, as wells as goals and strategies to achieve them.

3.6. Medical Support.

3.6.1. Medical Support Directorate is responsible for medical administrative support to AFMOA/CC and is comprised of five divisions: Logistics, Resource Management, Plans and Programs, Health Benefits and Information Management/Information Technology. Provides functional consultation for the Air Force Medical Service.

3.6.2. Medical Logistics. The Medical Logistics Division provides guidance and direction for medical logistics operations at all AFMS MTFs, both peacetime and deployed.

3.6.3. Life-cycle management of all medical and surgical supplies, pharmaceuticals, medical equipment and facility management functions in the MTF and across the AFMS.

3.6.4. Medical Resource Management. The Medical Resource Management Division is organized into three branches responsible for oversight, execution and tracking of all aspects of the AF/SG budget including the Defense Health Program, Line of the Air Force-funded and other associated medical appropriations.

3.6.5. Serves as the primary focal point for tracking Uniformed Business Office functions along with tracking monthly workload, personnel costs and expenditures associated with the delivery of healthcare across the Air Force Medical Service.

3.6.6. Medical Plans and Programs. The Medical Plans and Programs Division serves as the planning, programming and implementation arm of Defense Health Plan manpower in the Program Objective Memorandum (POM) Cycle and the Amended POM cycle for the AFMS allocations (excluding HAF programs). Air Reserve Component (ARC) resources are line (non-DHP) authorizations and are managed by AFRC/SGX in conjunction with AFRC/A1 for the AF Reserve and the ANG Readiness Center for all ANG medical authorizations.

3.6.7. Unit Manpower Document (UMD) management, program analysis and all aspects of UMD management are completed in conjunction with the MTF and GSUs in support of MAJCOM/SGs.

3.6.8. Directs and oversees the Rules of Engagement in the execution and programming Fiscal Year Defense Plan (FYDP) by maintaining balanced Program Element Codes in the year of execution and in the out years.

3.6.9. Coordinates with MAJCOMs on bi-annual Career Progress Group review for both enlisted and officer ranks redistribution and programming.

3.6.10. Health Benefits. The Health Benefits Division is primarily organized by TRICARE regions, Overseas, West, South and North cells to maximize communications with the Managed Care Support Contractors within the Division’s respective offices. Provides inputs on TRICARE Operations and Patient Administration (TOPA) policy and
strategic vision. Oversees, interprets and guides the implementation of TOPA programs throughout AF MTFs.

3.6.11. The Medical Support Branch oversees all aspects of Medical Records Management and execution of the Health Information Portability and Accountability Act in support of the AFMS.

3.6.12. Medical Information Management (IM)/Information Technology (IT) Information Services.

3.6.13. Interprets and guides the implementation of policy and provides information assurance support to AF MTFs.

3.6.14. Serves as the Subject Matter Experts (SME) for IT and information assurance as it relates to the operation of medical technology services.

3.6.15. Shall provide first line of support for MTFs interfacing with external agencies.

3.6.16. Responsible for the AFMS-wide annual desktop technology refresh of computers, laptops and printers.

3.6.17. Provides day-to-day IT support for AFMOA/AFMSA personnel assigned to 3550 S. General McMullen, San Antonio, TX 78226.

3.7. Medical Services.

3.7.1. Medical services directorate is responsible for oversight of and direct support to medical operations. Executes and provides inputs to medical operations policy, strategic vision, medical operations, behavioral health and expeditionary capabilities for the CSAF, the AF/SG and the AFMOA/CC. The Directorate will be structured in six divisions: Care Coordination, Clinical and Business Analysis, Medical Continuation, Mental Health, Provision of Medical Care and Clinical Quality.

3.7.2. Care Coordination. Care Coordination guides execution/implementation of Population Health and Medical Management programs for AFMS in support of MHS. Develops and monitors tools to evaluate and improve effectiveness of Medical Management programs across the AFMS. Coordinates with AMEDD for approval and disbursement of Clinical Practice Guidelines (CPG) materials to AF facilities.

3.7.3. Clinical and Business Analysis. This division is responsible for analysis, development and optimization of population health to include health promotion, trainee health and supporting deployment of the AFMS version of Patient Centered Medical Home. This requires creating, prototyping, deploying and evaluating strategies to implement AFMS policies and programs. The division supports evidence-based medicine, clinical and community preventive services, applied health research, medical record coding (Central Coding contract oversight), centralized clinical information analysis and in collaboration with the MTFs, develops the AFMS business plan. Provides support for the Post Deployment Health Re-Assessment, Customer Service and MHS Survey working group and business planning processes.

3.7.4. Medical Continuation. Medical Continuation manages all ARC members that have acquired an illness or injury while on Title 10 orders. The role of the case managers is to collaborate with ARC units, Tri- services MTFs, AFRC, NGB, to ensure that ARC
members are receiving the proper care and entitlements in a timely fashion. Coordinate and direct medical related inquires to the appropriate Air Force Agencies. As subject expert’s, make policy recommendations, provide guidance, management tools and informatics to DOD on medical continuation issues.

3.7.5. Mental Health. The Mental Health division will oversee and support MTF efforts involving Clinical Psychology and Psychiatry, Family Advocacy, Social Work, Suicide Prevention, Special Needs Identification and Assignment Coordination, Deployment Mental Health and Substance Abuse/Demand Reduction programs.

3.7.6. Provision of Medical Care. The Provision of Medical Care Division provides medical and business strategy consultation and products to all levels of the AFMS from the SG to the individual medical personnel. This consultative service has core Medical Corps expertise that represent every medical specialty. Strategic involvement in posturing services to accomplish the Air Force and US war and peace time medical missions is accomplished using the AFMS business rules and in collaboration with AFPC, the VA and sister services. Daily operational and tactical missions are facilitated via consultative interface with all levels of medical command and the individuals.

3.7.7. Clinical Quality. Quality operations will involve support and oversight of MTF work in Risk Management, MIIs, Patient Safety, Data Analysis, Education and Training, Inpatient and Outpatient Quality, Credentialing and Privileging and Compliance and Process Improvement.


3.8.1. The Nursing Directorate is responsible for the execution of AF/SG policies supporting AF expeditionary capabilities and is the principle consultant to the AFMOA/CC on nursing services. It is comprised of three divisions: Provision of Nursing Care, Nursing Service Resourcing and Education and Training. The Nursing Directorate provides guidance, clinical oversight and reach-back support for AF nursing.

3.8.2. Provision of Nursing Care. This division is composed of Inpatient Care and Outpatient Care and provides expert consultative leadership supporting officer and enlisted nursing staff for AF MTFs. The division directly supports AFSO21 initiatives through consultation and local event facilitation.

3.8.3. Outpatient Care. Provides guidance and interpretation of policies, procedures and standards of practice for all aspects of outpatient nursing care across the AFMS. This includes support for inspections by Health Services Inspectors, AAAHC and support for AFMS initiatives at each facility. Provides direct support to and communicates concerns from MTFs to HAF as appropriate. Interfaces with other clinical specialties and consultants to provide standardized support and guidance to the MTFs.

3.8.4. Inpatient Care. Provides guidance on policies, procedures and standards of practice for all aspects of inpatient nursing care across the AFMS. This includes support for inspections by Health Services Inspectors, JCAHO and support for AFMS initiatives at each facility. Provides direct support to and communicates concerns from MTFs to HAF as appropriate. Interfaces with other clinical specialties and consultants to provide standardized support and guidance to the MTFs.
3.8.5. Nursing Service Resourcing. This division provides expert nursing resources in research, analysis, data and consultation that helps to guide decision makers with business planning, proper alignment/allocation of nurse staffing, UTC assignments and all issues related to nursing resources for the AFMS. The division participates in force development and a broad spectrum of issues for nursing staff across the AFMS.

3.8.6. Education and Training. This division will direct and manage programs to provide professional and career development to AFMOA personnel and will serve as consultant for the AFMS on education/training and professional development issues. The division will manage On-the-Job Training responsibilities; the Self-Aid/Buddy Care, Emergency Medical Technician, life support and Unit Training Manager programs; Air Force Institute of Technology short courses and formal course training quotas. The Education and Training Division will provide consultation and advice to the AFMS for management of same programs and of Training Affiliation Agreements, annual training requirements, Mirror Force initiatives and competency and training requirements.

3.9. Biomedical Sciences.

3.9.1. Directs execution of Biomedical Sciences Corps programs through two divisions: Air Force Blood program and Pharmacy Operations and assists in the oversight of the Air Force Drug Testing Lab (AFDTL). Act as an advisor to BSC Chief on BSC issues and provides feedback and progress on implementation of programs. Responsible to forward data calls to MTF’s and provide a consolidated report back to the BSC Chief.

3.9.2. Air Force Blood Program (AFBP). The AFBP’s mission includes planning, coordinating, budgeting and policy formation related to worldwide garrison and contingency blood support. The AFBP Office serves as consultant to the AF/SG on blood donor and transfusion service issues or policies and represents the AF/SG to the Armed Services Blood Program (joint level). The AF/SG is the Food and Drug Administration license holder for the AF manufacture of blood products. The AFBP maintains an ongoing program of quality assurance and compliance validation of AF blood manufacturing and transfusion practices to ensure AF compliance with federal and accreditation standards. The AFBP serves as the executive agent for the two Armed Services Whole Blood Processing Laboratories, which provide CONUS and OCONUS blood trans-shipment services and participate in the DoD Frozen Blood Program to manufacture and distribution contingency stockpiles of frozen red cells. The AFBP also acts as an advisor to the Tri-Service Blood Bank Fellowship graduate education program on curriculum and standards requirements.

3.9.3. Pharmacy Operations. This division is responsible for executing AFMS policies for pharmacy and directing operations in support of AF pharmacy capabilities, in collaboration with the Associate Chief for Pharmacy. The division also coordinates on manpower and resource management issues and seeks AF-wide opportunities to standardize processes for improved patient safety and increased operational efficiency.

3.10. Air Force Drug Testing Lab.

3.10.1. Headquarters Air Force Drug Testing Laboratory (HQ AFDTL) is the drug testing portion of the Air Force Drug Demand Reduction Program (DDRP) and reports directly to the AFMOA/CC. The USAF DDRP mission is to detect and deter illegal drug
use by service members and thereby support commanders in ensuring the readiness of the fighting force. HQ AFDTL supports this mission by conducting urine drug testing on samples from all active duty and reserve USAF members as well as National Guard soldiers and airmen worldwide. It also reports these testing results and prepares documentation in support of administrative and judicial proceedings. The final aspect of HQ AFDTL's mission is to develop new methodologies for drug detection as new trends in drug abuse in DoD are observed.

3.11. Dental Services.

3.11.1. The Dental Directorate provides inputs to and executes dental operations policies, the Air Force Dental Service (AFDS) strategic vision and expeditionary capabilities for the AF/SG and the AFMOA/CC. AFMOA/SGD provides guidance, clinical oversight and reach-back support through three divisions: Clinical Dentistry, Dental Support and Dental Training. It directs efficient and effective delivery of dental services and resources, Dental Corps and 4Y0 force management and education and training to support the AFMS dental mission and its dental treatment facilities (DTFs), MAJCOM/SG staffs and the AFMOA/CC. Provides advice and staff assistance to DTFs on clinical practice, clinic management and leadership development. In addition, the Dental Directorate coordinates with the Air National Guard Assistant and AFRC/SGD on Air Reserve Component (ARC) dental matters relating to the total force.

3.11.2. Clinical Dentistry. This division monitors the business plan performance for the individual DTFs and advises the Chiefs of Dental Services on staffing issues (to include manning assists) and performance improvement processes. It disseminates clinical practice policies for all DTFs. Standards of care, clinical practice and infection control guidelines and clinical pathways are monitored and this division provides guidance on all aspects of dental practice management. AFMOA/SGDD also interfaces with clinical dental specialties and consultants to provide standardized support and guidance and addresses dental laboratory issues and enlisted standards of practice. The Division Chief participates in dental officer career vectoring, SQ/CC candidate selection and leadership development via the Dental Development Team.

3.11.3. Dental Support. This division monitors and analyses dental performance metrics including Air Force Dental Readiness Assurance Program compliance and DTF Satisfaction Health Access Readiness Performance (SHARP) trends. Oversees data collection and surveys DTFs and uses the information to participate in the POM build with the Dental Operations Panel, to coordinate and assist in the validation of equipment unfunded requirements and monitor execution year funding. Addresses UMDs, contracts and technology integration throughout the AFDS. Monitors private sector care Active Duty Dental Plan (ADDP) utilization and leadership effectiveness. The Division Chief participates in dental officer career vectoring, SQ/CC candidate selection and leadership development via the Dental Development Team.

3.11.4. Dental Training. This division provides direct support and communication to DTFs for formal AFDS courses, selection and coordination of education and training quotas (both officer and enlisted) and dissemination of information for graduate dental education. The division also oversees the applications, student progress and assignment coordination for the Dental Hygiene Training Scholarship program. Interfaces with
MAJCOM training managers, acts as liaison to the AFMS Schoolhouse and monitors enlisted continuing education throughout the AFDS.

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