## Chapter 03 - Health and Medical Care

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03101 RESPONSIBILITIES AND ENTITLEMENTS

A. NOAA Corps officers are responsible for:

1. seeking medical care;

2. providing complete information regarding matters of their health (present complaints, past illnesses, hospitalizations, medications, etc.) to the Commissioned Personnel Center (CPC);

3. notifying and providing documentation to CPC of any new health condition as soon as the officer becomes aware or is advised of a new health condition; and

4. following any treatment plan established.

B. NOAA Corps officers are entitled to medical, surgical, and dental treatment, hospitalization, examination, and immunization at Military Treatment Facilities (MTFs) and NOAA clinics. These privileges are granted under the following authorities:

1. Title 42 U.S.C. 253;

2. Title 10 U.S.C. 1071; and


C. Active-duty officers must use MTFs if available. In addition to care at MTFs, active-duty officers may receive emergency medical care or emergency dental care at the nearest medical facility (see definition of emergency medical care below).

D. NOAA Corps officers must maintain an unrestricted physical and mental readiness for sea duty at all times. The only exception is for those officers who are temporarily unable to physically or mentally perform his/her duties or those who have received a medical waiver (see NOAA Corps Directives (NCD) 03107). The Director, Office of Health Services, is the NOAA Corps official with the authority to determine if a NOAA Corps officer is temporarily unable to perform his/her duties. NOAA Corps officers must remain physically and mentally qualified for aviation or dive duty only if they are assigned to aviation or dive billets, or to billets which require an officer to maintain the qualifications for aviation or dive duty.
03102 MEDICAL DETERMINATIONS

A. The Director, Office of Health Services, or his/her designee, is the only medical professional authorized to make all medical determinations as to a NOAA Corps officer's fitness for sea, dive or aviation duty. If the Director, Office of Health Services, finds that a NOAA Corps officer is not fit for duty, the affected officer may submit his/her own medical documentation for review, but in all cases, the Director, Office of Health Services, will make the final medical determination.

03103 DEFINITIONS

A. Emergency Medical Care (as defined by TRICARE) is a sudden and unexpected medical condition, or the worsening of a condition, which poses a threat to life, limb or sight, and requires immediate treatment; or, a sudden, extremely painful condition which requires immediate treatment to alleviate suffering. Generally, emergency care is provided at the hospital emergency rooms. (http://www.tricare.osd.mil/news/1997/news)

Conditions that require emergency care include loss of consciousness, shortness of breath, chest pain, uncontrolled bleeding, sudden or unexpected weakness, or paralysis, poisoning, suicide attempts, drug overdose, acute psychosis, and major depression.

Pregnancy-related medical emergencies involve a sudden and unexpected medical complication that puts the mother, the baby, or both, at risk. In the case of pregnancy, TRICARE does not consider a delivery after the 34th week an emergency.

B. Urgent Care (as defined by TRICARE) is medically necessary treatment that is required for illness or injury that would not result in further disability or death if not treated immediately. The illness or injury does require professional attention, and should be treated within 24 hours to avoid development of a situation in which further complications could result if treatment isn’t received. (http://www.tricare.osd.mil/news/1997/news)

Examples of conditions that should receive urgent treatment are: sprains, scrapes, earaches, sore throats, rising temperatures – conditions that are serious, but aren’t life-threatening.
C. Routine medical care includes, but is not limited to, the following services:

1. preventive services (routine physical examinations, immunizations, nutritional counseling, etc.);
2. acute illness and injury outpatient care, to include diagnostic and laboratory procedures;
3. specialty consultations;
4. mental health counseling/psychotherapy;
5. prenatal and postnatal outpatient care; and
6. prescribed medications for 1 through 5.

D. Emergency dental care are those procedures directed toward the immediate relief of pain, the removal of acute oral infection that endangers the health of the patient, or repair of prosthetic appliances where lack of such repair would cause the patient physical suffering.

E. Routine dental care - Includes the following services:

1. preventive services (prophylaxis, oral hygiene instruction);
2. restorative services (fillings);
3. endodontic services (root canals);
4. periodontal services (treatment of gums);
5. prosthodontic services (dentures, caps, bridges, etc);
6. orthodontic services (braces, malocclusion correction, etc.); and
7. diagnostic services necessary before providing any of the above services (exam, x-rays).

F. A medical officer is a licensed physician, nurse practitioner, or physician assistant.

G. Military Treatment Facilities (MTFs) are hospitals, typically located on military bases, that provide medical or dental services to eligible beneficiaries.
03104 PROCEDURES

A. All active-duty NOAA Corps officers must be enrolled in TRICARE Prime or TRICARE Prime Remote to receive care, either at a MTF or in the civilian sector.

B. Upon presentation of a valid Common Access Card (CAC), active-duty officers may receive emergency, urgent or routine care (as defined in NCD 03103) at MTFs, depending upon space availability.

C. NOAA Corps officers admitted to civilian-care facilities for emergency care are not eligible for elective surgery or medical treatment of conditions not related to the injury or illness for which admitted. Payment of civilian care claims is subject to TRICARE regulations.

D. Receipt of routine medical or dental care from civilian care facilities is governed by catchment areas of each MTF. A catchment area is a set of zip codes that identifies the zone of a MTF. Officers permanently assigned in a catchment area must use the MTF for that area for routine medical/dental care. NOAA Corps officers permanently assigned outside a catchment area must follow the procedures set forth in the TRICARE Prime Remote Handbook (see www.tricare.osd.mil).

In general, TRICARE will use either your duty station zip code or residence zip code; whichever is closer to the MTF for making any catchment area determinations.

E. NOAA Corps officers on duty outside the United States are entitled to care at U.S. military medical facilities. If such facilities are not available, emergency care may be obtained from civilian care facilities. A NOAA Corps officer obtaining such treatment should pay the source of care and claim reimbursement as prescribed in the TRICARE Handbook.

F. Orthodontic treatment for NOAA Corps officers is not authorized from civilian dentists.

03105 PERIODIC MEDICAL EXAMINATIONS

A. Periodic medical examinations are necessary to conserve and promote health, detect impairments, and ensure fitness for duty. NOAA Corps officers should also receive appropriate medical counseling and periodic medical examinations.
B. Physical examinations should be conducted at a MTF or a TRICARE authorized provider. When such arrangements are not possible, the Director, CPC, may authorize travel orders to the nearest MTF. NOAA Corps officers must provide a Report of Medical History (DD 2807-1), Report of Medical Examination (DD 2808), and the Commissioned Personnel Center’s Medical Examination Checklist for Commissioned Officers (available at www.noaacorps.noaa.gov/cpc/medical.html), for the examining facility. A medical officer must sign the completed examinations. The NOAA Corps officer shall forward a copy of these forms to the Director, CPC, with the envelope securely sealed and clearly marked “MEDICAL – CONFIDENTIAL”.

C. The NOAA Corps follows examination procedures and physical standards prescribed by the U.S. Coast Guard Medical Manual. The following requirements must also be met by all NOAA Corps officers:

1. Are required to have a special medical examination when directed by the Director, CPC.

2. Are required to have dental examinations annually.

3. Are required to have screening for the presence of Human Immunodeficiency Virus (HIV) antibodies at intervals no greater than five years. A positive HIV test will be handled like any other serious disease. A NOAA Corps officer testing positive will be provided medical and social service counseling and will be referred to a medical board for evaluation of fit-for-duty status, as appropriate. A determination of not fit for duty is based on impairment that interferes with the performance of assigned duties.

4. Are required, if visual acuity is less than 20/20, to have a refraction examination.

5. All NOAA Corps officers under age 50 and not engaged in aviation or diving are required to obtain a physical examination every five years to include:
   a. complete blood count (CBC);
   b. blood chemistry to include cholesterol profile;
   c. audiogram;
   d. urinalysis;
   e. tuberculin skin testing, PPD, and
recommended annually after age 40, in addition to the preceding testing:

a. glaucoma testing (tonometry);

b. EKG; and

c. fecal occult blood testing (FOBT).

6. All NOAA Corps officers age 50 or older are required to obtain an annual physical examination, to include:

a. complete blood count (CBC);

b. blood chemistry to include cholesterol profile;

c. urinalysis;

d. tuberculin skin testing, PPD;

e. EKG;

f. fecal occult blood testing (FOBT);

g. audiogram; and

h. glaucoma testing (tonometry).

7. All female NOAA Corps officers are required to have the following examinations:

a. pelvic examination (recommended annually);

b. PAP smear (recommended annually at all ages);

c. breast examination (recommended annually); and

d. screening mammography at ages 40, 44, 48, and biennially age 50 or older.

8. A U.S. Coast Guard Class 1 (or equivalent) military aviation physical exam is required biennially for active aviators under the age of 50. A U.S. Coast Guard Class 1 (or equivalent) military aviation physical exam is required annually for active aviators age 50 or older. All aviators shall comply with the DOC/NOAA/AOC Aircraft Operations Manual.
9. Active NOAA divers are required to comply with NOAA Administrative Order (NAO) 209-123, NOAA Dive Program, section 7 – Physical Examinations.

10. NOAA Corps officers assigned to hazardous duty are required to have a medical exam annually, or more frequently, if required by respective program office.

11. NOAA Corps officers deploying to Antarctica, Australia, or other long-term foreign assignments are required to have a medical exam before deployment, regardless of the schedule described above.

12. NOAA Corps officers being separated or retiring from service are recommended to have a medical examination as soon as practicable within one year of separation or retirement from service.

13. All NOAA Corps officers must complete an OSHA Respirator Medical Evaluation Questionnaire if assigned to duty which may require the wearing of a respirator.

14. Any medical problem should be closely monitored, regardless of the routine examination schedule.

03106 DISQUALIFICATIONS

A. As noted in NCD 03101 D., NOAA Corps officers must maintain an unrestricted physical and mental readiness for sea duty at all times; therefore the Director, Office of Health Services, and his/her staff will use the medical conditions and physical requirements below as basis to determine the qualification of a NOAA Corps officer for appointment and retention. A disqualification for medical reasons may not, however, be based on non-medical risks of future liability arising from conditions of employment. Disqualification is required when physical examination and review of the medical documentation reveals the individual's health presents an unacceptable likelihood that the following situations may occur.

1. A NOAA Corps officer’s health presents an unacceptable risk when the medical officer has reason to believe that the medical condition may:
   a. present a high probability of repatriation; or
   b. cause an emergent disruption of ship's operating schedule or diversion from ship's mission; or
   c. interfere with safe and efficient job performance of the officer or other members of the crew; or
   d. result in death from conditions at sea.
2. A NOAA Corps officer with progressive condition(s) which require treatment will be found not fit for sea duty when medical facilities and personnel aboard ship are not capable of providing required care.

3. If conditions at sea would aggravate an existing condition and/or result in further health impairment, the NOAA Corps officer will be found not fit for sea duty.

4. The presence of a communicable disease may not, in itself, be disqualifying for sea duty. The medical officer’s determination of the likelihood of the transmission to other crewmembers will govern the officer’s qualification.

B. When, after review of the medical documentation and examination, the medical officer determines the NOAA Corps officer's medical condition is well-stabilized or static with respect to performance capability, will not interfere with his/her duties, will not likely be aggravated by work exposure or activities, or that the individual will not likely endanger himself/herself in the performance of his/her duties, there exists no medical basis for disqualification for appointment or retention.

C. In such cases were the determination described in NCD 3106 B. (above) is made, any service deficiency (inability to fully perform duties assigned) must be provided, in writing, by the officer's supervisor.

D. If review of the medical documentation indicates that the NOAA Corps officer's medical conditions are disqualifying for sea duty, the medical officer will explain the medical basis for the disqualification and the medical contra-indications for performance of specific duties.

E. See NCD 03107 (below) for waivers.

03107 WAIVER OF PHYSICAL STANDARDS

A. A waiver of a physical standard permits a NOAA Corps officer to remain qualified for duty even though he/she does not meet the physical standard prescribed for the purpose of the examination.

1. Normally, a waiver will be granted when it is expected that the individual will remain fit to perform the prescribed duties of his/her position. An officer will not normally be granted a waiver for a physical disability if the Director has approved a Public Health Service (PHS) Medical Review Board determination that the NOAA Corps officer is not fit for continuation on active duty.
2. If a NOAA Corps officer is under consideration by a PHS Medical Review Board, no medical waiver request shall be submitted for those physical defects or conditions under review by the PHS Medical Review Board. All waiver requests concerning conditions that are currently under review by the PHS Medical Review Board will be returned to the NOAA Corps officer without action.

3. A waiver of a physical standard is not required in a case where a NOAA Corps officer’s ability to perform on duty has been reviewed by the PHS Medical Review Board and Director has approved a finding of fit for duty.

B. The Director has the sole authority to grant waivers of physical standards. The decision to authorize a waiver is based on many factors, including the recommendations of the Director, Office of Health Services; the best interest of the Service; and, the NOAA Corps officer's training, experience, and duty performance.

C. The types of waivers are:

1. A temporary waiver may be authorized when a physical defect or condition is not stabilized and may either progressively increase or decrease in severity. These waivers are authorized for a period not to exceed six months and require medical reevaluation prior to being extended.

2. A permanent waiver may be authorized when a physical defect or condition is not normally subject to change or progressive deterioration, and it has been clearly demonstrated that the condition does not impair the individual’s ability to perform his/her duties.

D. Procedures for Recommending Waivers are:

1. A medical officer who considers a defect disqualifying by the standards, but not a disability for the purpose for which the physical examination is required because the defect or condition does not affect the NOAA Corps officer’s ability to perform his/her duties, shall:

   a. enter a detailed description of the defect in Item 77 of the DD-2808; and

   b. indicate that either a temporary or permanent waiver is recommended.
2. When the medical officer receives a Report of Medical Examination (DD-2808) indicating that a NOAA Corps officer is not physically qualified, the medical officer shall inform the individual and the Director, CPC, that he/she is not physically qualified. Within ten days of receipt of being found not qualified, the NOAA Corps officer shall inform the Director, CPC, via letter of his/her intentions to pursue a waiver. The Director, Office of Health Services, or his/her designee, is required to give a recommendation on whether the waiver is appropriate and if the individual may perform his/her duties with this physical defect. This recommendation shall be completed on a (SF-502) Narrative Summary. A cover letter stating the medical officer's opinion as to the appropriateness of a waiver, the individual's previous performance of duty, special skills, and any other pertinent information, shall accompany the medical officer’s report.

E. A command receiving authorization from the Director for the waiver of a physical standard shall carefully review the information provided to determine any duty limitation imposed and specific instructions for future medical evaluations. Unless otherwise indicated in the authorization, a waiver applies only to the specific category or purpose for which the physical examination is required. A copy of the waiver authorization shall be retained in the NOAA Corps officer’s Medical Folder for the period for which the waiver is authorized. Copies of future DD-2808's for the same purpose shall be endorsed to indicate a waiver is or was in effect.

03108 STATUS OF HOSPITALIZED NOAA CORPS OFFICERS

A. NOAA Corps officers hospitalized with or without written orders, in MTFs, are deemed hospitalized under orders and cannot be discharged from hospitalization at their own request. The hospital will not discharge an officer from treatment unless, in the opinion of the attending physician, the officer is physically able to return to duty. If a NOAA Corps officer leaves a hospital against medical advice, a report of that fact must be made to the Director.

B. Rating supervisors, aircraft commanders, and commanding officers shall comply with NCD Chapter 06, Leave and Liberty, when deciding whether to grant "sick in quarters" status or other type of leave.
03109 CHARGES AND PAYMENTS

A. NOAA Corps officers hospitalized in a MTF are charged a nominal subsistence. There is no charge to the NOAA Corps officer for outpatient care.

B. Reimbursement for local travel in connection with periodic medical or dental examinations is not authorized. When treatment or hospitalization is required but not available locally, the authorizing officer of the activity to which the NOAA Corps officer is assigned shall issue temporary-duty (TDY) orders directing the officer to proceed to the nearest MTF for the required examinations.

03110 MEDICAL RECORDS

A. The Commissioned Personnel Center maintains the official medical folder for NOAA Corps officers on active duty. This folder is the property of the U.S. Government and contains all official reports of medical examinations and treatment.

B. Each NOAA Corps officer on active duty shall maintain a "local" health record and shall furnish it to the medical facility when applying for hospitalization, examination, or treatment.

C. NOAA Corps officers shall ensure that documentation of all medical examinations and treatment, regardless of where obtained, is made a part of their official medical folder in CPC. This information may be of vital concern to a NOAA Corps officer should the question of service-connected or service-aggravated disability ever arise with the Veterans Administration (VA) after leaving active duty.

NOAA Corps officers engaged in diving or aviation duty shall provide the NOAA Dive Center (NDC) and the Aircraft Operations Center’s (AOC) Public Health Service officer their current physicals. The NDC and AOC medical officer shall provide monthly lists to the Director, CPC, of officers qualified for diving and aviation duty.

D. A copy of the periodic medical examinations as prescribed by NCD 03105, shall be maintained at CPC. A NOAA Corps officer’s nomination or temporary/permanent promotion to a higher grade shall be delayed if a complete periodic medical examination has not been received by CPC (see NCD 04301 and 04302).
Entitlements and Procedures ................................................................. 03201
PART 2 – Retired NOAA Corps Officers

03201 ENTITLEMENTS AND PROCEDURES

A. Retired NOAA Corps officers are entitled to medical and dental care at any Military Treatment Facility (MTF), subject to availability of space and facilities, and capabilities of the professional staff. [10 U.S.C. 1071 et seq.]

B. MTFs are medical facilities of the Armed Services. A complete list of MTFs is available from the Commissioned Personnel Center (CPC).

C. Medicare eligible uniformed services retirees, their spouses, and survivors who are age 65 and over are now entitled to expanded health care benefits, under the National Defense Authorization Act of 2001. The new benefits include coverage under TRICARE and pharmacy coverage. For more information on TRICARE, refer to the TRICARE Handbook available from CPC, a TRICARE Service Center, TRICARE Regional Managed Care Support Center, or on the web at www.tricare.osd.mil/.
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PART 3 - Dependents

03301 ENTITLEMENTS

A. Dependents enrolled in the Defense Enrollment Eligibility Reporting System (DEERS) are entitled to medical care in Military Treatment Facilities (MTFs) subject to the availability of space and facilities, and the capabilities of the medical staff (10 U.S.C. Chapter 55). Determination of the MTF with regard to availability is conclusive.

B. When a NOAA Corps officer is separated from active duty for any reason other than retirement or death, or when a dependent's status changes to ineligible, the Government's responsibility for furnishing medical care normally ceases as of midnight of the date of such event.

C. Dependents may be entitled to hospital and health benefits from civilian sources under the TRICARE program. All TRICARE beneficiaries, including children under one year old, must be enrolled in DEERS, and enrolled in TRICARE by the sponsoring NOAA Corps officer.

D. Dependent parents or parents-in-law of active-duty NOAA Corps Officers are not entitled to TRICARE but are eligible for care in MTFs on a space-available basis. The following dependents of active duty, retired, and deceased NOAA Corps officers are covered by TRICARE:

1. spouses;

2. unmarried children who:
   (a) have not attained their 21st birthday; or
   (b) are age 21 or over, if severely handicapped and the condition existed before the 21st birthday; or
   (c) have not attained their 23d birthday and are enrolled in an approved full-time course of study in an institution of higher learning; or when their full-time student status ends; and

3. certain former spouses (contact Commissioned Personnel Center (CPC) for specifics on this category).

E. Questions regarding eligibility should be referred to CPC and/or TRICARE.
PART 3 - Dependents

03302 PROCEDURES

A. To ensure prompt DEERS enrollment for newborns, members should promptly submit to CPC:

1. an Application for Uniformed Services Identification and Privilege Card (DD Form 1173) and DEERS Enrollment (DD Form 1172); and

2. a certificate of live birth.

B. Dependents, 10 years of age and older, must present a Uniformed Services Identification and Privilege Card (DD Form 1173), when applying for medical care at uniformed services facilities. Parents are responsible for providing identification for children under 10 years of age.

C. Dependents receiving inpatient care at MTFs are charged a per diem rate that includes the cost of subsistence. This rate applies to adults and children except in maternity cases where there is no charge for care of the newborn infant as long as the mother remains in the hospital. No charge is made for outpatient care.

03303 TRICARE DENTAL PROGRAM

A. The TRICARE Dental Program (TDP) is a voluntary benefit program covering the cost of basic dental care for dependents of active-duty members of the uniformed services. TDP is available to all family members of active duty uniformed service members. TDP covers a wide range of diagnostic, preventative and restorative services. Payment for this program is through monthly payroll deduction, and coverage is effective the first of the month if enrollment by the 20th day of the previous month is completed. Once enrolled, dependents remain in the program for a minimum of 12 months.

B. For details and enrollment information, contact CPC or TRICARE Dental Program.