



PERSONNEL AND
READINESS

UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

May 22, 2018

MEMORANDUM FOR UNDER SECRETARY OF THE ARMY
UNDER SECRETARY OF THE NAVY
UNDER SECRETARY OF THE AIR FORCE
VICE CHIEF OF STAFF, ARMY
VICE CHIEF OF NAVAL OPERATIONS
VICE CHIEF OF STAFF, AIR FORCE
ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS
DIRECTOR, DEFENSE HEALTH AGENCY

SUBJECT: Construct for Implementation of Section 702

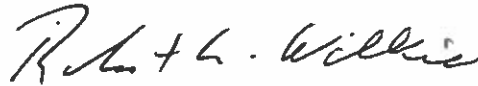
The attached guidance establishes the standard organizational structure; duties, authorities, and responsibilities of key personnel; personnel rating and evaluation relationships; and manpower documentation to be applied in implementing section 702 of the National Defense Authorization Act for Fiscal Year 2017 (Public Law 114-328), *Reform of Administration of the Defense Health Agency and Military Medical Treatment Facilities*, in all Military Treatment Facilities (MTFs) across the Department of Defense (DoD).

As a general rule, at each MTF there will be a single military officer who will be dual-hatted as the MTF Director, under the authority, direction, and control of the Director, Defense Health Agency (DHA), and the Service Commander, under the authority, direction, and control of the Military Department concerned. Acting on behalf of the Director, DHA, the MTF Director will determine the capacity of each MTF required to support both operational readiness and quality, access, and continuity in the delivery of clinical/health care services to members of the Armed Forces and other authorized beneficiaries.

With the objective of ensuring a "ready medical force" and a "medically ready force", MTFs will be the default choice for the assignment, allocation, detail, or other utilization of military medical personnel. Such default will be subject to the capacity of the MTF to afford military medical personnel opportunities to obtain and maintain currency in the clinical Knowledge, Skills, and Abilities associated with their medical specialties and communities, at or above minimum established thresholds.

The drive for operational readiness and support of war fighting and operational missions take primacy over the delivery of clinical/health care services and the execution of business operations in an MTF. To this end, each Military Department will have unrestricted access to its military medical personnel for all validated war fighting and operational requirements.

Effective immediately, the Assistant Secretary of Defense for Health Affairs, the Director, DHA, and the Military Departments will incorporate this construct in planning for and executing the implementation of section 702.

A handwritten signature in black ink, appearing to read "R. L. Wilkie".

Robert L. Wilkie

Attachment
As stated

cc:
Chief Management Officer
Director, Cost Analysis and Program Evaluation

702 Implementation: Standard Organizational Structure; Duties, Authorities, and Responsibilities of Key Personnel; Personnel Rating and Evaluation Relationships; and Manpower Documentation to be Applied in all Military Treatment Facilities

PURPOSE. This paper establishes the standard organizational structure; duties, authorities, and responsibilities of key personnel; personnel rating and evaluation relationships; and manpower documentation to be applied in implementing section 702 of the National Defense Authorization Act for Fiscal Year 2017 (NDAA for FY17), *Reform of Administration of the Defense Health Agency and Military Medical Treatment Facilities*, in all Military Treatment Facilities (MTFs) across the Department of Defense (DoD). Section 702 and implementing memoranda promulgated by the Under Secretary of Defense for Personnel and Readiness (USD(P&R)), require the transformation of the Military Health System (MHS) such that, beginning on October 1, 2018, the Director, Defense Health Agency (DHA) is responsible for the administration and management of all MTFs, including the delivery of clinical/health care services and business operations in support of both operational readiness and beneficiary care.

The standards set forth in this paper are not exhaustive and will be supplemented by subsequent issuances. As appropriate, exceptions to the standards set forth in this paper may be granted, on a case-by-case basis, subject to the approval of the USD(P&R), in consultation with the Secretary of the Military Department concerned. To the extent that any specific provision of this paper is inconsistent with a specific provision set forth in USD(P&R) memoranda of February 21, 2018, and March 21, 2018, or the 3d Report to Congress, dated March 30, 2018, the specific provision set forth in this paper shall govern. All other parts of the USD(P&R) memoranda and the 3d Report to Congress remain in full force and effect.

SEMINAL PRINCIPLES. The standards set forth in this paper will be applied in the context of certain seminal principles that pertain to all affected officials, organizations, and personnel, in all geographic locations, and in all circumstances, as follows:

- The drive for operational readiness and support of operational and war fighting missions take primacy over the delivery of clinical/health care services and the execution of business operations in an MTF. To this end, each Military Department will have unrestricted access to its military medical personnel for all validated war fighting and operational requirements, including both planned and unplanned deployments, military operations, and exercises. DHA consent is not required to deploy military medical personnel assigned to a position on a Service Manpower Document, but allocated against a manpower requirement on a DHA MTF Joint Table of Distribution (JTD), with duty at the MTF, and DHA will fully support the deployment of such personnel. Each Military Department will exercise due care in establishing clinical and non-clinical training requirements applicable to military medical personnel, and will provide as much advance notice to DHA as practicable of any requirement that military medical personnel assigned to a position on a Service Manpower Document, but allocated against a manpower requirement on a DHA MTF JTD, with duty at the MTF, participate in such training. DHA will work to facilitate Military Department access to military medical personnel for such purposes.

- In the interests of achieving and sustaining operational readiness and ensuring quality, access, and continuity in the delivery of clinical/health care services to members of the Armed Forces and other authorized beneficiaries, MTFs will be the default choice for the assignment, allocation, detail, or other utilization of military medical personnel for purposes of generating operational medical readiness.¹ Such default is subject to the capacity of the MTF to afford military medical personnel opportunities to obtain and maintain currency in the clinical Knowledge, Skills, and Abilities (KSAs) associated with their medical specialties and communities, at or above minimum established thresholds.
- The Secretaries of the Military Departments and the Under Secretary of Defense for Personnel and Readiness, together with the officials, organizations, and personnel subordinate to them, will take all necessary and appropriate actions to ensure that their exercise of duties, authorities, and responsibilities, and their relationships, are marked by all due collaboration, coordination, and consultation, in the best interests of a “ready medical force” and a “medically ready force”, the MHS enterprise, and the national defense.

STRUCTURES.

- As a general rule, at each MTF there will be a single military officer who will be dual-hatted as the MTF Director and the Service Commander. For ease of reference, this dual-hatted officer will be referred to as the “MTF Director”, except when acting solely in his/her capacity as Service Commander, in which case, the officer will so state and will execute documents and issue direction over the title of “Service Commander.” The DHA Director, with the concurrence of the Assistant Secretary of Defense for Health Affairs, may authorize exceptions to this general rule, including to permit a civilian employee to serve as an MTF Director; to make appropriate arrangements in jointly staffed National Capital Region MTFs; or upon request of the Secretary of the Military Department concerned, supported by a Concept of Operations that reflects appropriate constraints on the number of staff supporting the Service Commander, to permit the positions of the MTF Director and Service Commander to be single-hatted (i.e., a different officer is assigned to each position).
- The dual-hatted MTF Director will be supported by, and exercise authority, direction, and control over a leadership team and staff in numbers and capabilities appropriate to the totality of his/her duties, authorities, and responsibilities. The leadership team and staff will report to the MTF Director. Mindful that the implementation of section 702 and other provisions of the NDAA for FY17 is expected to yield efficiencies, including appropriate reductions in the number of personnel associated with the Military Medical Departments, that part of the leadership team and staff charged to support the dual-hatted MTF Director in his/her distinct capacity as the Service Commander, will be comprised of the minimum number of persons required to competently effectuate the distinct duties, authorities, and responsibilities of the Service Commander. In lieu of establishing Service Commander-focused elements of the leadership team and staff at each individual MTF, the Secretary of the Military Department concerned may elect to establish, at a regional or intermediate management organization, a

¹ Of course, a Military Department’s very first priority must be to fill medical personnel requirements in combat units.

consolidated leadership team and staff to support the execution of the distinct duties, authorities, and responsibilities of most or all of the Service Commanders assigned to MTFs comprising that region.

DUTIES, AUTHORITIES, AND RESPONSIBILITIES. For purposes of this section, and in the interest of clarity, the distinct duties, authorities, and responsibilities of the MTF Director are described separate and apart from the distinct duties, authorities, and responsibilities of the Service Commander, with the understanding that the MTF Director will, as a general rule, be dual-hatted, and in that capacity, will execute the duties, authorities, and responsibilities of both the MTF Director and the Service Commander.

The Secretary of the Military Department Concerned:

- Recruits, organizes, trains, and equips Military Department military medical personnel.
- Selects the highest quality candidates for nomination to be an MTF Director and a Service Commander, in accordance with Military Department policies and procedures, and consults with the Director, DHA to vet MTF Director nominees.
- Acting by and through the Military Department chain of command, exercises authority, direction, and control over the Service Commander.
- After consultation with the Director, DHA, may remove the Service Commander from that position and/or relieve him/her of the authority to act in that capacity, in accordance with Military Department policies and procedures.
- Acting by and through the Military Department chain of command: sets and serves as force provider for operational medical force readiness requirements; ensures that military medical personnel obtain and maintain currency in the clinical KSAs associated with their medical specialties and communities, at or above minimum established thresholds; and provides venues and opportunities for military medical personnel to meet non-clinical readiness standards prescribed by the Military Department.
- Acting by and through the Military Department chain of command and the Service Commander, serves as the force provider by allocating military medical personnel assigned to a position on a Service Manpower Document against a manpower requirement on a DHA MTF JTD, with duty at the MTF.
- Acting by and through the Military Department chain of command and the Service Commander, exercises administrative control of all Military Department personnel assigned to a position on a Service Manpower Document. For purposes of this paper, administrative control includes, but is not limited to: personnel assignments, including the allocation of medical personnel against a manpower requirement on a DHA MTF JTD, with duty at the MTF; the issuance of official military orders; routine Military Department administrative functions (e.g., leave, promotion, family care plans); and the exercise of authority over

certain military personnel for purposes of the Uniform Code of Military Justice, and other disciplinary and adverse administrative actions.

- Acting by and through the Military Department chain of command, timely communicates to the Director, DHA regarding Military Department war fighting and operational requirements, including both planned and unplanned deployments, military operations, and exercises, enabling DHA to plan for and accommodate the absence of military medical personnel from duty at the MTF. Exercises due care in establishing clinical and non-clinical training requirements applicable to military medical personnel, and provides as much advance notice to DHA as practicable, of any requirement that military medical personnel assigned to a position on a Service Manpower Document, but allocated against a manpower requirement on a DHA MTF JTD, with duty at the MTF, participate in such training.
- Acting by and through the Military Department chain of command and each Service Commander, executes certain operational and installation-specific medical functions that are separate from the delivery of clinical/health care services in the MTF and MTF business operations, including: Occupational Health, Environmental Health, Substance Abuse Programs, Food Protection, Aerospace Physiology, Aerospace Medicine (specifically, non-MTF health care for aviation personnel), Bioenvironmental Engineering, Nuclear power and other Personnel Reliability Programs, Animal Medicine, Dental Care (except oral and maxillofacial surgery), Installation Emergency Response, Deployment-related functions, Drug Demand Reduction, Medical Logistics for operational units, Embedded Behavioral Health, and Military Aeromedical Evacuation (patient movement).²

Under Secretary of Defense for Personnel and Readiness (USD(P&R))/Assistant Secretary of Defense for Health Affairs (ASD(HA)):

- Plans, executes, and oversees the transformation of the MHS.
- Exercises authority, direction, and control over the Director, DHA.
- Acting with and through the KSA Program Management Office, in which representatives of each Military Department and the Joint Staff participate, establishes DoD-wide clinical KSAs associated with each medical specialty or community, together with minimum thresholds of currency that military medical personnel must obtain and maintain.

Director, DHA

- Section 702 of the NDAA for FY17 provides that the Director, DHA is responsible for the administration of each military MTF, including with respect to:
 - Budgetary matters;
 - Information technology;

² The assignment of certain of these functions to a Military Department is dependent on legislative change to section 702 of the NDAA for FY17, as codified in Title 10 U.S. Code, section 1073c. The Department is taking all appropriate action to seek this legislative change.

- Health care administration and management;
 - Administrative policy and procedure;
 - Military Medical Construction; and
 - Any other matters the Secretary of Defense determines appropriate
- In addition, the Director, DHA:
 - Reports to the USD(P&R) and the ASD(HA).
 - Consults with the Secretary of the Military Department concerned to vet nominees submitted by the Secretary to be an MTF Director.
 - Acting by and through the DHA chain of supervision, exercises authority, direction, and control over the MTF Director.
 - With advance notice to the Secretary of the Military Department concerned, may remove the MTF Director from that position, and/or relieve him/her of the authority to act in that capacity, in accordance with DHA policies and procedures.
 - Acting by and through the MTF Director, determines the capacity of each MTF required to support both operational readiness and quality, access, and continuity in the delivery of clinical/health care services to members of the Armed Forces and other authorized beneficiaries.
 - Acting by and through the MTF Director, exercises authority, direction, and control of all MTF operations and of all personnel assigned, allocated, detailed to, or otherwise utilized to perform duties and functions associated with MTF operations, including the delivery of clinical/health care services and MTF business operations.
 - Provides venues and opportunities within each MTF for military medical personnel to obtain and maintain currency in clinical KSAs associated with their medical specialty or community, at or above minimum established thresholds.
 - If unable to meet operational medical readiness needs through the MTFs, uses his/her authorities in law and regulation, to establish, on behalf of one or more Military Departments, such military-civilian partnerships, DoD/Department of Veterans Affairs collaborations, and other like undertakings, as may be necessary and appropriate to provide venues and opportunities for military medical personnel to obtain and maintain currency in clinical KSAs associated with their medical specialty or community, at or above minimum established thresholds. Military Department partnerships, collaborations, and other like undertakings effectuated prior to October 1, 2018, will be continued up to and including their date of expiration, subject to periodic review to validate that each provides appropriate opportunities for military medical personnel to obtain and maintain currency in clinical KSAs associated with their medical specialty or community, at or above minimum thresholds, or to support longstanding MTF-community relationships. Such partnerships, collaborations, and other undertakings may be renewed by the DHA, as appropriate.
 - Acting by and through the MTF Director, plans for and accommodates the absence of military medical personnel from duty at the MTF, to meet validated war fighting or operational requirements, or, as practicable, to participate in certain clinical and non-clinical readiness training.³

³ The DHA can accommodate the absence of military medical personnel from duty at the MTF in a number of ways, including but not limited to: a request to the Military Department concerned for the mobilization of Reserve Component military medical personnel for duty at the MTF; a request to the Military Department for the allocation

MTF Director

- Section 702 of the NDAA for FY17 provides that the MTF Director will be responsible for:
 - Ensuring the readiness of the members of the armed forces and civilian employees of such facility; and
 - Furnishing the health care and medical treatment provided at such facility.
- In addition, the MTF Director:
 - On behalf of the Director, DHA, exercises authority, direction, and control of all MTF operations and of all personnel assigned, allocated, detailed to, or otherwise utilized to perform duties and functions associated with MTF operations, including the delivery of clinical/health care services and MTF business operations.
 - Acting on behalf of the Director, DHA, determines the capacity of each MTF required to support both operational readiness and quality, access, and continuity in the delivery of clinical/health care services to members of the Armed Forces and other authorized beneficiaries.
 - Acting on behalf of the Director, DHA, plans for and accommodates the absence of military medical personnel from duty at the MTF to meet validated war fighting or operational requirements, or, as practicable, to participate in certain clinical and non-clinical readiness training.

Service Commander

- Acting on behalf of the Secretary of the Military Department concerned, serves as the force provider, by allocating military medical personnel assigned to a position on a Service Manpower Document against a manpower requirement on a DHA MTF JTD, with duty at the MTF.
- Acting on behalf of the Secretary of the Military Department concerned, ensures that military medical personnel assigned to a Service Manning Document obtain and maintain currency in clinical KSAs associated with their medical specialty or community, at or above minimum established thresholds, and provides venues and opportunities for military medical personnel to meet non-clinical readiness standards, as prescribed by the Military Department.
- Acting on behalf of the Secretary of the Military Department concerned, exercises administrative control of Military Department personnel assigned to a position on a Service Manpower Document. For purposes of this paper, administrative control includes, but is not limited to: personnel assignments, including the allocation of uniformed medical personnel against a manpower requirement on a DHA MTF JTD, with duty at the MTF; the issuance of official military orders; routine Military Department administrative functions (e.g., leave, promotion, family care plans); and the exercise of authority over certain military personnel

of available military medical personnel from a local operational unit; the referral of authorized beneficiaries to the managed care system; contracting for additional medical care providers or the term/temporary hire of additional civilian medical care providers; or by decreasing MTF capacity.

for purposes of the Uniform Code of Military Justice, and other disciplinary and adverse administrative actions.

- Acting on behalf of the Secretary of the Military Department concerned, timely communicates to the Director, DHA, regarding Military Department war fighting and operational requirements, including both planned and unplanned deployments, military operations, and exercises, enabling DHA to plan for and accommodate the absence of military medical personnel from duty at the MTF. Exercises due care in establishing clinical and non-clinical training requirements applicable to military medical personnel and provides as much advance notice to DHA as practicable, of any requirement that military medical personnel assigned to a position on a Service Manpower Document, but allocated against a manpower requirement on a DHA MTF JTD, with duty at an MTF, participate in such training.
- Acting on behalf of the Secretary of the Military Department concerned, exercises authority, direction, and control over Military Department medical personnel executing certain operational and installation-specific medical functions that are separate from the delivery of clinical/health care services in the MTF and MTF business operations, including: Occupational Health, Environmental Health, Substance Abuse Programs, Food Protection, Aerospace Physiology, Aerospace Medicine (specifically, non-MTF health care for aviation personnel), Bioenvironmental Engineering, Nuclear power and other Personnel Reliability Programs, Animal Medicine, Dental Care (except oral and maxillofacial surgery), Installation Emergency Response, Deployment-related functions, Drug Demand Reduction, Medical Logistics for operational units, Embedded Behavioral Health, and Military Aeromedical Evacuation (patient movement).

PERSONNEL RATING AND EVALUATION RELATIONSHIPS. Personnel rating and evaluation relationships are as set forth in Chart 1. Military personnel will be rated and evaluated in accordance with the policies and procedures of the Military Department of which they are a member. In general, rating schemes are grounded in the principle that personnel should be rated by those who are best able regularly to observe, supervise, and shape their performance of duties.

MANPOWER DOCUMENTATION. There will be at least two manpower documents at each MTF: the DHA MTF Joint Table of Distribution (JTD) (i.e., the statement of MTF manpower requirements) and the Service Manpower Document.

The **DHA MTF JTD** will be generated by DHA. Subject to validation of enumerated requirements, authorizations, and force structure through appropriate processes, the JTD is the authoritative manpower document for the establishment and documentation of all DHA MTF manpower requirements and authorizations—including military manpower, uniformed service personnel (e.g., members of the U.S. Public Health Service), and civilian employees, in the numbers and capabilities required—associated with MTF operations, including but not limited to the delivery of clinical/health care services and MTF business operations, at the capacity required, as determined by the Director, DHA.

- The DHA MTF JTD itemizes the static manpower requirements to be filled by assignment to, or employment by DHA.
- As well, the JTD enumerates the manpower requirements that will serve as the DHA MTF “demand signal”, against which the Military Department will allocate military medical personnel assigned to a position on a Service Manpower Document, in the numbers and capabilities available.

The **Service Manpower Document** (e.g., Table of Distribution and Allowances, Activity Manpower Document, Unit Manpower Document) will be generated by the Military Department concerned. Subject to validation of enumerated requirements, authorizations, and force structure through appropriate processes, the Service Manpower Document is the authoritative manpower document for the establishment and documentation of all Military Department manpower requirements and authorizations—both military manpower and civilian employees, in the numbers and capabilities required—associated with the Military Department’s execution of operational and installation-specific medical functions separate from the delivery of clinical/health care services in the MTF and MTF business operations, at the capacity required, as determined by the Military Department concerned. All military personnel of the Military Department concerned will be assigned to the Service Manpower Document.

- The Service Manpower Document itemizes the static positions to be filled by assignment to, or employment by the Military Department for purpose of executing these particular operational and installation-specific medical functions.
- As well, the Service Manpower Document enumerates the positions comprising the pool of military medical personnel available for duty at the MTF to perform MTF operations, including but not limited to the delivery of clinical/health care services and MTF business operations, in response to the demand signal established by the DHA MTF JTD.
- Allocation against a manpower requirement on a DHA MTF JTD, with duty at the MTF, will be the default choice to enhance the operational medical readiness of Military Department military medical personnel. Such default is subject to the capacity of the MTF to afford military medical personnel opportunities to obtain and maintain currency in the clinical KSAs associated with their medical specialties and communities, at or above the established minimum thresholds.

Meeting DHA MTF Capacity Requirements.

- The Military Department concerned will work with the DHA to ensure that, to the greatest extent practicable, the pool of military medical personnel assigned to a position on a Service Manpower Document and available for allocation against a position on the DHA MTF JTF, with duty at the MTF, are sufficient to meet MTF capacity requirements⁴, as determined by

⁴ “MTF capacity requirements” will include consideration of installation-specific mission requirements and other requirements, as appropriate.

the Director, DHA, and reflected in the DHA MTF JTD manpower requirement structure for military medical personnel.

- Optimally, the pool of military medical personnel assigned to a position on a Service Manpower Document and available for allocation against a position on the DHA MTF JTD, with duty at the MTF, will mirror the MTF “demand signal” established by the DHA MTF JTD.
- The Military Departments, acting through the Service Commander, will use established Military Department policies and procedures to allocate military medical personnel assigned to a position on a Service Manpower Document, by name, against specific DHA MTF JTD manpower requirement numbers, for duty at the MTF.
- So as to ensure no disruption in MTF operations or in quality, access, and continuity in the delivery of clinical/health care services to members of the Armed Forces and other authorized beneficiaries, the starting assumption is that all military personnel assigned to MTF operations immediately prior to transfer of the Phase I and Phase II MTFs⁵ from the Military Departments to DHA, will both be assigned to a position on the Service Manpower Document after transfer, and allocated against a manpower requirement on the DHA MTF JTD, with duty at the MTF. Refinement of both the Service Manpower Document and DHA MTF JTD will be undertaken over time to properly assign and allocate personnel as set forth in this guidance.

Regular Periodic Review of Manpower Documents. The DHA MTF JTD and Service Manpower Document will be reviewed and updated regularly to reflect MTF mission and capacity requirements, and Military Department operational medical force readiness requirements, respectively.

- To the greatest extent practicable, a change in the number and/or type of military medical manpower requirements documented on the DHA MTF JTD will trigger commensurate change to the positions enumerated on the Service Manpower Document and the military medical personnel assigned thereto.
- Over time, all manpower documents will be refined to reflect application of the single DoD process for defining the military medical and dental personnel requirements necessary to meet operational medical force readiness requirements, as required by section 721 of the NDAA for FY17, and as the DoD Program Budget Review determines that more or fewer military manpower requirements and/or different capabilities are needed to execute DHA MTF or Military Department missions to the required capacity, in a cost-effective and efficient manner.

⁵ Phase I MTFs will transfer from the Military Department concerned to DHA on October 1, 2018. Phase II MTFs will transfer from the Military Department concerned to DHA on October 1, 2019.

**CHART 1: PERSONNEL RATING AND EVALUATION RELATIONSHIPS
BY MILITARY DEPARTMENT**

	RATED INDIVIDUAL	ASSIGNED TO OR ALLOCATED AGAINST DHA MTF JTD	ASSIGNED TO SERVICE MANPOWER DOCUMENT (NOT ALLOCATED AGAINST DHA MTF JTD)
ARMY	Dual-hatted MTF Director/Service Commander	RATER: DHA Intermediate Management Organization (IMO)	
	OR Single-hatted MTF Director	SENIOR RATER: Army Senior Commander/Senior Mission Commander	
	Single-hatted Service Commander		RATER: Service Commander Chain of Command
			SENIOR RATER: Rater of Rater or second-level Commander, following Military Department Chain of Command
	All other military personnel	RATER: DHA MTF Chain of Supervision	RATER: Service Commander Chain of Command
		SENIOR RATER: Rater of Rater or second-level Supervisor, following DHA MTF Chain of Supervision	SENIOR RATER: Rater of Rater or second-level Commander, following Military Department Chain of Command
NAVY	Dual-hatted MTF Director/Service Commander	REGULAR REPORT: DHA IMO	
	OR Single-hatted MTF Director	CONCURRENT REPORT: Military Department Line Commander	
	Single-hatted Service Commander		REGULAR REPORT: ISIC
	All other military personnel	REGULAR REPORT: DHA MTF Chain of Supervision	REGULAR REPORT: ISIC

AIR FORCE	Dual-hatted MTF Director/Service Commander	RATER: Military Department Line Commander of Wing	
	OR	ADDITIONAL RATER: DHA IMO	
		REVIEWER: Military Department Line Commander of Numbered Air Force	
	Single-hatted MTF Director		
	Single-hatted Service Commander		RATER: Service Commander Chain of Command
			ADDITIONAL RATER: Rater of Rater or second-level Commander, following Military Department Chain of Command
	All other military personnel	RATER: DHA MTF Chain of Supervision	RATER: Service Commander Chain of Command
		ADDITIONAL RATER: Rater of Rater or second-level Supervisor, following DHA MTF Chain of Supervision	ADDITIONAL RATER: Rater of Rater or second-level Commander, following Military Department Chain of Command