



**DEPARTMENT OF THE ARMY
OFFICE OF THE SURGEON GENERAL
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042-5140**

FEB 03 2020

DASG-ZA

MEMORANDUM FOR COMMANDERS, REGIONAL HEALTH COMMANDS

SUBJECT: Delegation of Authority – Secretarial Designee Program

1. References:

- a. Title 10, United States Code (USC), Section 1074(c).
- b. Department of Defense Instruction (DoDI) 6025.23 "Health Care Eligibility Under the Secretarial Designee (SECDES) Program and Related Special Authorities," 16 September 2011, incorporating Change 1, effective 2 October 2013.
- c. Army Regulation (AR) 40-400 (Patient Administration), 8 July 2014.
- d. Memorandum, Secretary of the Army, 6 December 2019, subject: Delegation of Authority-Secretarial Designee Program.
- e. Memorandum, Assistant Secretary of the Army Manpower and Reserve Affairs, 18 December 2019, subject: Delegation of Authority-Secretarial Designee Program.
- f. Memorandum of Agreement Between The Defense Health Agency (DHA) and The Office of The Surgeon General and the United States Army Medical Command for Direct Support to the DHA for Medical Treatment Facilities Administration and Management, 19 September 2019.

2. Medical resources must be dedicated first and foremost to providing timely quality services to our Soldiers, Families and Retirees who are entitled to military medical care. Pursuant to the Secretarial Designee Program, authorized by reference 1a and implemented in references 1b and 1d, the Secretary of the Army has delegated to me the authority to establish Department of Defense (DoD) health care eligibility for certain individuals, even in the absence of specific statutory eligibility for, or entitlement to, such care. DoD policy and the Secretary's directive to me require that I use this authority sparingly and only when it serves a compelling DoD mission interest, including the provision of necessary training to ensure Army medical care providers develop and maintain wartime-critical health care skills.

DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

3. All persons without statutory eligibility for, or entitlement to, military health care who are provided such care are Secretarial Designees. All such persons must be in an approved Secretarial Designee status at the time military health care is provided to them. Except for Designees who receive emergency care as permitted under reference 1d and this delegation, individuals who are not currently eligible for, or entitled to, military health care shall not receive such treatment until an appropriate authority formally grants them Secretarial Designee status. I will hold you responsible for any and all actions taken pursuant to this delegation.

4. Subject to the terms and conditions set forth below I delegate to the Commander of Brooke Army Medical Center (BAMC):

a. The authority to designate civilian burn patients from the state-wide area and trauma patients accepted at BAMC under the Trauma Service Cooperative Agreement with Bexar County Hospital District who are otherwise ineligible for care in a Military Medical Treatment Facility (MTF) as Secretarial Designees.

(1) Secretarial Designee status will be deemed to begin from the time the Designee initially received military health care (inpatient or outpatient);

(2) You may grant Secretarial Designee status to persons in this category for up to six months from the date the individual initially received military health care (inpatient or outpatient);

(3) Any inpatient or outpatient care is limited to that necessary to complete treatment of the initial burn or trauma injuries;

(4) To support the military burn and trauma care teams in developing and maintaining wartime-critical skills, care may include rehabilitative care for patients with complex burns and trauma (not to include the provision of prosthetics);

(5) My expectation is that care will be transferred to the civilian system as expeditiously as possible and that planning for this transfer will begin on the Designee's admission to BAMC. If BAMC believes an extension of military medical care is required for a legal reason, the request should be submitted through legal channels;

(6) Any patient already in a Secretarial Designee status on the date of this delegation may remain in that status for the period of time previously approved by an authorized Army official; and

(7) You may not further delegate this authority.

b. If the need arises to extend the Secretarial Designee status beyond six months for any civilian burn or trauma patient subject to paragraph 4a, above, the requests for extension of Designee status shall be submitted at least 30 days prior to the expiration of the initial six-month period or prior extension and shall include:

- (1) The date that the designee initially received military health care at BAMC;
- (2) The date that the designee was initially discharged or released from the BAMC emergency room or from BAMC inpatient care;
- (3) The date that the designee's initial Secretarial Designee status expired or will expire;
- (4) A description of inpatient and outpatient care received by the designee after discharge from the BAMC emergency room or from BAMC inpatient care, and the start and end dates of such care;
- (5) A description of the care proposed to be provided during the period for which Secretarial Designee status would be extended, including an explanation of the training benefit military health care providers are anticipated to derive from providing such care;
- (6) A certification by the BAMC Chief of Burn Services or Chief of Trauma Services that the extension would serve a compelling mission interest, which includes training DoD health care providers to perform wartime missions;
- (7) An indication of whether any other extensions of Secretarial Designee status have been granted and, if so, for what time period;
- (8) A description of the plan for, and the efforts made to, transition the designee's care outside the military medical system and the date on which such transition is expected to occur; and
- (9) A copy of the counseling of financial responsibility for the care rendered and the DD Form 2569 Third Party Collection Program/Medical Services Account/Other Health Insurance.
- (10) Whether the Designee has third-party insurance.
- (11) These requests will be routed at a minimum through one of the following appropriate paths:

DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

(a) Trauma patients: Chief of the Trauma Service, Chief of Patient Administration, Deputy Commander for Surgical Services, and the MTF Commander then submitted to Commander, USAMEDCOM, ATTN: MCHO-CL-P, 2748 Worth Road, JBSA, Fort Sam Houston, TX 78234-6010.

(b) Burn patients; Chief of the Burn Center to Commander, USAMEDCOM, ATTN: MCHO-CL-P, 2748 Worth Road, JBSA, Fort Sam Houston, TX 78234-6010.

(12) In order to renew the Trauma Service Cooperative Agreement with Bexar County Hospital District I direct you to submit the request with the full business case analysis at least 90 days before the current agreement expiration to allow for ample time to be staffed and renewed to prevent a lapse in the participation.

c. Other Categories of Persons. I further delegate decisional authority to all MTF Commanders on the following categories of requests for Secretarial Designee status. You may not delegate this decisional authority any lower. Subject to certain caveats set forth in the following subparagraphs, charges for military health care provided to Secretarial Designees in the categories that follow also may be specified in reference 1c. These categories can be approved for up to six months or duration for pregnancies.

(1) Foreign military personnel in the United States pursuant to the sponsorship or invitation of DoD, and their dependents who have been approved by DoD to accompany them, provided such persons are eligible for care pursuant to paragraph 4b(1) and 4b(2) of DoDI 6025.23.

(2) U.S. Government Civilian employees pursuant to paragraph 4g of DoDI 6025.23. All care for patients in this category, including employees of DoD non-appropriated fund instrumentalities, will be on a fully reimbursable basis unless a non-reimbursable basis is required by paragraph 4g of DoDI 6025.23.

(3) Employees of DoD contractors and their authorized dependents to the extent eligible for care pursuant to paragraph 4g of DoDI 6025.23. Care will be provided in accordance with paragraph 4g of DoDI 6025.23.

(4) Emergency care for civilian patients who are injured or become ill while on an Army installation to prevent loss of life, limb, or eyesight (other than care provided as part of a health care program for members of the public authorized in accordance with paragraph 4e). Care is authorized only during the period of the emergency, and such patients will be transferred to another appropriate health care system as soon as they are stabilized. All care will be provided on a fully reimbursable basis.

(5) Senior officials of the U.S. Government.

DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

(6) Nonmedical attendants pursuant to paragraph 4m of DoDI 6025.23 and as defined by 37 USC 481(k). Care is limited to health care needs arising while a person is formally designated as a nonmedical attendant.

(7) Individuals entitled to a DoD Identification Card as provided in DoDI 1000.13 (Identification (ID) Cards for Members of the Uniformed Services, Their Dependents, and Other Eligible Individuals), 23 January 2014.

(8) Care for those granted Secretarial Designee status under the authority of the DoD or the Secretaries of other military departments.

(9) Pregnant former Service Members, pregnant spouses of former Service Members, and their newborn children. Care may be provided if the pregnancy is beyond 20 weeks when the former Service Member separates from the Service. Care may include prenatal care and the intrapartum, postpartum hospitalization, and newborn care associated with a normal delivery. Status as a Secretarial Designee may be granted for the period of time that would permit the MTF to provide one well-baby visit (to occur within 6 weeks of the estimated delivery date) and one postpartum visit (to occur within 8 weeks of the estimated date of birth). Further limitations on eligibility, military health care services to be provided, or the period of Secretarial Designee status may be specified in AR 40-400.

(a) If the designee is covered by third-party insurance, care will be provided at the fully reimbursable rate. If the designee is not covered by third-party insurance, care may be provided at the Family Member rate.

(b) If the designee suffers an intrapartum or postpartum complication, the MTF should provide care to prevent loss of life, limb, or eyesight; stabilize the Designee; then expeditiously arrange for and execute transfer to another appropriate health care system. Alternatively, the MTF may seek an extension of Secretarial Designee status from me. All care for complications must be billed at the fully reimbursable rate, unless you determine care should be provided on a non-reimbursable basis because the designee is a potential claimant.

(c) The care described in this paragraph may be provided for pregnant former Service Members and pregnant spouses of former Service Members whose pregnancies have progressed beyond 20 weeks at the time of their eligibility, if any, for any transitional health care. All military health care provided after the expiration of transitional health care will be provided at the fully reimbursable rate.

(10) Newborns of dependent daughters of Service Members or retired Service Members, and newborns (not fathered by deceased Service Member) of unremarried widows. Care may include intrapartum and postpartum hospitalization and newborn care associated with a normal delivery to include a C-section. Care may be provided at the Family Member rate. If the newborn suffers an intrapartum or postpartum

DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

complication, the MTF should provide care to prevent loss of life, limb, or eyesight; stabilize the child; then expeditiously arrange for and execute transfer to another appropriate health care system. Alternatively, the MTF may seek an extension of Secretarial Designee status from you. All care for complications must be billed at the fully reimbursable rate, unless you determine care should be provided on a non-reimbursable basis because the newborn or his or her parent is a potential claimant. Care will be at the fully reimbursable rate if the dependent daughter is eligible for TRICARE Young Adult and elects not to sign up.

(11) Applicants for enlistment or reenlistment in the Armed Forces, and applicants for admission to the Service academies and the Reserve Officers' Training Corps.

(12) Foreign military personnel assigned to joint U.S. defense boards or commissions and their authorized dependents.

(13) International students assigned or attached to U.S. military units for training and their authorized dependents.

(14) Beneficiaries of other Federal agency programs for military medical care provided on a reimbursable basis under authority of the Economy Act, Title 31, U.S.C., Section 1535.

(15) Persons in military custody and non-military Federal prisoners.

(16) Persons who require medical evaluation in connection with consideration of their cases pending before the Army, Navy, or Air Force Board for Correction of Military Records. The proposed evaluation of a class of persons for whom no case is pending is subject to the Assistant Secretary of the Army for Manpower and Reserve Affairs' approval pursuant to reference 1d.

(17) Students in the health professions who are assigned to a DoD MTF for training purposes under an affiliation agreement with a civilian institution.

(18) Civilian participants in Army-sponsored sports, recreational, educational, or training activities who are injured or become ill while participating in such activities.

(19) Claimants, in order to determine the extent and nature of the injuries or disabilities claimed, and care for potential claimants. All requests related to potential claimants must be submitted through legal channels.

(20) Non-active duty chaplains who are employed in the full-time provision of religious support to the United States Military Academy, and their authorized dependents.

(21) Research subject volunteers pursuant to paragraph 4i of DoDI 6025.23.

(22) U.S. nationals serving with, employed by, or accompanying the Armed Forces outside the United States, and their authorized dependents when confined in foreign penal institutions.

(23) Civilians injured in alleged felonious assaults, such as sexual assault, occurring on an Army installation. Care is limited to an examination and initial treatment.

(24) Civilian faculty members of the Uniformed Services University of the Health Sciences.

(25) Accredited foreign military members of the Neutral Nations Supervisory Commission, Panmunjom, Korea, and their authorized dependents living with the military member in Korea.

(26) Non-retired residents of a U.S. Soldiers' and Airmen's Home (USSAH) or Armed Forces Retirement Home (AFRH). Outpatient care will be provided on a non-reimbursable basis. Inpatient care will be provided at the Family Member rate. All charges will be billed to the USSAH/AFRH for collection from the resident.

(27) Bone Marrow/Stem Cell Donors who volunteer to donate to a beneficiary may be granted up to 6 months of coverage for the inpatient/outpatient care and surveillance associated with the donation.

5. All care provided to any Secretarial Designee, with the exception of those persons entitled to care pursuant to paragraph 4b(2) of DoDI 6025.23, must be provided in an MTF. All care must be provided on a space-available basis. Care provided under this delegation will not take precedence over care provided to authorized military health care beneficiaries.

6. MTFs will undertake all appropriate efforts to secure reimbursement from third-party payers for care provided to Secretarial Designees. Immediately upon approval of designee status, a DD Form 2569 will be completed for each designee.

7. No later than 60 days after the conclusion of each fiscal year, provide a report to me enumerating the following for each Secretarial Designee authorized during that fiscal year:

- (a) The reason for the designation;
- (b) The location of military medical treatment provided;
- (c) The date of initial Secretarial Designee status;

DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

- (d) The date Secretarial Designee status expires or expired;
- (e) The number of days as Secretarial Designee;
- (f) If the Secretarial Designee was granted an extension;
- (g) The cost of the care provided;
- (h) Whether the Secretarial Designee has/had third-party insurance; and
- (i) The outcome of efforts to collect from the patient for reimbursable costs.

8. In addition to the annual report for MTFs that have an approved trauma/burn program shall provide a narrative summary that includes:

- a. Updates to the program;
- b. A list of the top three trauma cases, by volume, per surgical specialty;
- c. Total number of trauma operative procedures;
- d. A list of research studies/publications (from the current fiscal year) resulting from the program;
- e. Summary chart with numbers of patients by category of care (i.e., burn, trauma, etc.);
- f. Fiscal year data (number of extensions, billed, unpaid balance, collection status);
- g. Update on previous years' collections; and
- h. Oversight, new procedures and processes, emerging issues, improvements, and the way-ahead.

9. I will hold you responsible for any and all actions taken pursuant to this delegation.

10. Although not a limitation on your authority to act on my behalf, in those cases where a proposed action or decision represents a change in precedent or policy is of significant White House, Congressional, Department or public interest or has been, or should be, of interest or concern to me for any reason, you will brief me before taking such action or decision, unless the exigencies of the situation prevent you from doing so. I expect you to forward to me only those extensions and other requests for which you recommend approval in your exercise of good judgement

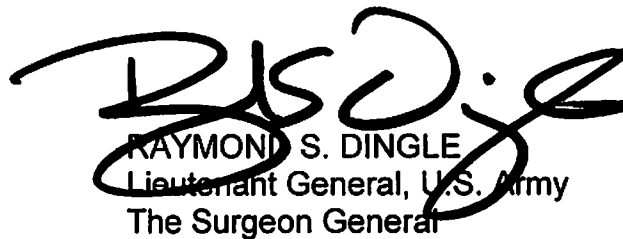
DASG-ZA

SUBJECT: Delegation of Authority – Secretarial Designee Program

11. The Defense Health Agency assumed authority, direction, and control of all Military MTFs on 1 October 2019. Pursuant to referenced, DHA and OTSG/MEDCOM agree that OTSG/MEDCOM and Army policies, procedures, and process for management and administration of Army Military MTFs will continue to be in effect until they are superseded by DHA publication. Based on this agreement, OTSG and MEDCOM retain all existing Army, command, and requisite authorities necessary to provide direct support to DHA with respect to the Secretarial Designee Program until the direct support relationship ends.

12. This delegation is effective immediately and supersedes all prior delegations related to the Secretarial Designee Program, including those pertaining to the BAMC burn and trauma care programs. Reference 1d and this delegation establish current Army policies and processes, and supersede any contrary policies and processes set forth in the current iteration of AR 40-400.

13. This delegation will remain in effect until 30 September 2022 unless earlier revoked or superseded.



RAYMOND S. DINGLE
Lieutenant General, U.S. Army
The Surgeon General

CF:

Assistant Secretary of the Army (Manpower & Reserve Affairs)
Administrative Assistant to the Secretary of the Army