SUBJECT: Reserve Component Medical Care and Incapacitation Pay for Line of Duty Conditions

(b) Sections 1074, 1074a, 12322 and 12301(h) of title 10, United States Code
(c) Sections 204(g), 204(h) and 206 of title 37, United States Code
(e) through (g), see enclosure 1

1. REISSUANCE AND PURPOSE

This Directive:

1.1. Reissues reference (a) to update policies and assign responsibilities under references (b), (c), and (d), to authorize medical and dental care for members of the Reserve components who incur or aggravate an injury, illness, or disease in the line of duty, and provide pay and allowances to those members while being treated for or recovering from a service-connected injury, illness, or disease, or who demonstrate a loss of earned income as a result of an injury, illness, or disease incurred or aggravated in the line of duty.

1.2. Establishes policies for ordering a member to active duty or continuing a member on active duty, with the consent of the member, to receive authorized medical care, to be medically evaluated for disability or other purposes, or to complete a
required Department of Defense (DoD) healthcare study, which may include associated medical evaluation of the member.

1.3. Establishes policies for ordering a Reserve component member to active duty or continuing the member on active duty while being treated for (or recovering from) an injury, illness, or disease incurred or aggravated in the line of duty.

1.4. Authorizes the issuance of DoD Instruction 1241.2 (reference (e)), to prescribe procedures for the management of the Reserve component member who incurs or aggravates an injury, illness, or disease in the line of duty.

2. **APPLICABILITY**

2.1. This Directive applies to the Office of the Secretary of Defense, the Military Departments, the Chairman of the Joint Chiefs of Staff, the Combatant Commands, the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities and all other organizational entities in the Department of Defense (hereafter referred to collectively as “the DoD Components”).

2.2. The Coast Guard when it is not operating as a Military Service in the Navy by agreement with the Department of Homeland Security.

3. **DEFINITIONS**

3.1. **Incapacitation.** Physical disability due to injury, illness, or disease that prevents the performance of military duties as determined by the Secretary concerned, or which prevents the member from returning to the civilian occupation in which the member was engaged at the time of the injury, illness, or disease.

3.2. **Line of Duty.** A finding after all available information has been reviewed that determines an injury, illness, or disease was incurred or aggravated as a result of military duty not due to gross negligence or misconduct of the member. This includes a Reserve component member on inactive duty training, funeral honors duty, traveling directly to or from such duty or training, or while remaining overnight, immediately before the commencement of or between successive periods of such duty.

3.3. **Military Duties as Determined by the Secretary Concerned.** The duties of a Service member's office and grade, and not necessarily the specialty or skill qualification held by the member prior to incurring or aggravating an injury, illness, or disease in the line of duty.
3.4. **Secretary Concerned.** The Secretary of the Army regarding matters concerning the Army; the Secretary of the Navy regarding matters concerning the Navy, the Marine Corps, and the Coast Guard when it is operating as a Service in the Department of the Navy; the Secretary of the Air Force regarding matters concerning the Air Force; and the Secretary of Homeland Security regarding matters concerning the Coast Guard when it is not operating as a Service in the Department of the Navy.

4. **POLICY**

It is DoD policy that:

4.1. A Reserve component member on active duty for a period of 30 days or less; on inactive duty training, funeral honors duty, traveling directly to or from such duty or training, or while remaining overnight, immediately before the commencement of or between successive periods of such duty is entitled to medical and dental treatment for injuries, illnesses, or diseases incurred or aggravated in the line of duty not as a result of gross negligence or misconduct of the member.

4.2. A Reserve component member on active duty for a period of 30 days or less may be continued on active duty while the member is being treated for, or recovering from, an injury, illness, or disease incurred or aggravated in the line of duty.

4.3. The Secretary of the Military Department may order a Reserve component member to active duty, with the consent of the member, to receive authorized medical care, be medically evaluated for disability or other medical purposes, or complete a required DoD healthcare study, which may include an associated medical evaluation of the member.

4.4. Reserve component members who have been continued on active duty for medical reasons for more than 30 days are entitled to medical and dental care on the same basis as a member of the regular component.

4.5. The Military Departments shall authorize pay and allowances, to the extent permitted by reference (c), for a Reserve component member who is not medically qualified to perform military duties, as determined by the Secretary concerned, because of an injury, illness, or disease incurred or aggravated in the line of duty, or to provide pay and allowances to a member who is fit to perform military duties, but experiences a loss of earned income because of an injury, illness, or disease incurred or aggravated in the line of duty. This is commonly referred to as incapacitation pay.
4.6. Where applicable, a line of duty determination approved by the Service component designated authority shall serve as basis for eligibility and continuation of medical and dental care and incapacitation benefits.

4.7. Medical and dental care authorized under this Directive shall be provided until the member is fit for duty, or the condition cannot be materially improved with continued treatment and the member has received a final disposition under the Disability Evaluation System, as prescribed in DoD Directive 1332.18 and DoD Instruction 1332.38 (references (f) and (g)).

5. **RESPONSIBILITIES**

5.1. The Assistant Secretary of Defense (Reserve Affairs), under the Under Secretary of Defense for Personnel and Readiness, and in coordination with the Deputy Under Secretary of Defense (Military Personnel Policy) and the Assistant Secretary of Defense (Health Affairs), shall be responsible for Reserve incapacitation system management policy and is authorized to issue instructions implementing the Directive.

5.2. The Secretaries of the Military Departments shall:

5.2.1. Establish funding policy and procedures for pay and allowances authorized under reference (c), and DoD 7000.14-R (reference (d)) for members authorized such pay during a period of incapacitation.

5.2.2. Develop a system to track Reserve component members who are incapacitated.

5.2.3. Develop a plan to manage Reserve component members being treated in medical treatment facilities or authorized treatment in civilian treatment facilities to ensure the member receives the proper treatment, evaluation, and referral services in a timely and efficient manner.

5.2.4. Review each case in which the member is projected to remain incapacitated for more than 6 months to determine if it is in the interest of fairness and equity to continue benefits paid under reference (c) (if applicable), and to determine if the case should be referred to the Disability Evaluation System. Such a review shall be made every 6 months.
6. **EFFECTIVE DATE**

This Directive is effective immediately.

![Signature]

Paul Wolfowitz  
Deputy Secretary of Defense

Enclosures - 1  
E1. References, continued
E1. ENCLOSURE 1
REFERENCES, continued


(g) DoD Instruction 1332.38, "Physical Disability Evaluation," November 14, 1996