



Texas Army National Guard

INSTRUCTION

NUMBER 1308.01

MAR 07 2022

NGTX-JM

SUBJECT: Medical Readiness Policy

References. See enclosure 1.

1. PURPOSE. This directive establishes the Texas Army National Guard policy to document standards and requirements to ensure compliance in individual and unit medical readiness.

2. APPLICABILITY AND SCOPE. This issuance applies to all TXARNG personnel.

3. DEFINITIONS. N/A

4. POLICY.

a. The TXARNG's unit medical readiness standard is 90 percent or above of assigned personnel in Medical Readiness Categories (MRC) one (MRC1) and two (MRC2).

b. Soldiers who are MRC3 are considered not medically ready (NMR) and default to a non-deployable status. These Soldiers require individual review to determine whether they are authorized to attend schools, Inactive Duty Training (IDT) periods, Annual Training (AT) or serve in any other duty status. Soldiers who MRC3 due to a diagnosis as Dental Readiness Class (DRC3) have 90 days from diagnosis to complete dental treatment and restore their individual medical readiness to category one (MRC1) or two (MRC2).

c. In accordance with (IAW) DoDI 6025.19, MRC4 indicates a Soldier is partially medically ready and is deficient for their Periodic Health Assessment (PHA) or dental exam (DRC4), or both.

d. In accordance with DoDI 1215.13, Enclosure 3, 1.e.(1), Soldiers who are not compliant with medical and dental assessments IAW DoDI 6025.19, are prohibited from participating in military training including schools, IDT periods, Annual Training or serve in any other duty status, including, Title 32, Full-Time National Guard Duty for Operational Support (FTNGD-OS, or ADOS) and Title 10.

e. Units are not authorized to Split Train Soldiers during scheduled unit Dental

Readiness or Soldier Readiness Processing (SRP) events but may otherwise Split Train MRC4 individuals to resolve their medical readiness status. All Soldiers completing directed examinations will be in a duty status.

f. Soldiers that fail to report without prior command approval for a scheduled Dental Readiness Event or SRP or fails to complete all requirements during an event, commanders are responsible for enforcing a "U" code on DA Form 1379 for each period the Soldier remains MRC4. In addition, when a Soldier populates the MRC4 or DRC3 (MRC3) roster for 90 days or more, the unit will initiate a Flag/Restriction in IPPS-A for Non-Compliance of RC Member: physical examinations (Flag Code R). Per NGR 600-200, para 6-36t, Commanders will initiate involuntary separation for Soldiers who fail to obtain a required physical, 90 days after notification of the requirement, but may authorize a 60-day extension for extenuating circumstances.

g. Active Guard Reserve (AGR) Soldiers will maintain their medical readiness as a requirement for participation in the AGR program. AGR personnel who are MRC4 for 60 or more days are subject to release from the AGR program. After 30 days MRC4, the J-1 will initiate a Flag for Non- Compliance of Reserve Component Member (RC): physical examinations (Flag Code R).

5. RESPONSIBILITIES.

a. Unit commanders.

(1) Responsible for achieving the required 90 percent medical readiness of assigned personnel.

(2) Will review all profiles for Soldiers with MRC3 in the Medical Readiness Portal Medical Operational Data System (MODS) within 30 days of profile issuance to ensure Soldiers conduct training within prescribed limitations and demonstrate compliance with treatment plans to restore individual medical readiness to category one or two.

(3) Will ensure assistance is provided to Soldiers coordinating medical readiness requirements in order to facilitate completion IAW AR 40-502 and applicable Combatant Command (COCOM) requirements.

b. Full-Time Support: Readiness NCO/Medical Readiness NCOs/leaders are responsible for coordinating with their Soldiers to obtain required medical services and support.

c. The Office of the Joint Surgeon (OJS) is responsible for tracking and managing the medical readiness of the TXARNG. OJS and the Medical Readiness Detachment are available to assist every unit and Soldier in satisfying these medical requirements. For Medical Readiness Portal or Case Management information, contact the Office of the Joint Surgeon, txarng-jointsurgeon-systemsaccess@army.mil.

d. J-1 is responsible for tracking medical flagging/restriction actions and AGR

medical actions.

6. INFORMATION REQUIREMENTS. Not applicable.
7. RELEASABILITY. Unlimited.
8. EFFECTIVE DATE. This directive will expire two years from the effective date of publication unless sooner rescinded or superseded.
9. POINT OF CONTACT. Proponent for this directive is the Office of the Joint Surgeon at 512-782-1134.

Encl

1. References



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Enclosure 1
References

DoDI 1215.13, Ready Reserve Member Participation Policy, 5 May 2015

DoDI 6025.19, Individual Medical Readiness Program, 13 July 2022

AR 40-35, Preventive Dentistry and Dental Readiness, 21 July 2016

AR 40-502, Medical Readiness, 27 June 2019

AR 135-91, Service Obligations, Methods of Fulfillment, Participations Requirements,
and Enforcement Procedures, 14 March 2016

AR 135-178, Enlisted Administrative Separations, 7 November 2017

NGR 600-5, The Active Guard/Reserve (AGR) Program, 21 September 2015

NGR 600-200, Enlisted Personnel Management, 25 March 2021

NG Supplement 1 to AR 600-8-2, Suspension of Favorable Personnel Actions, 9
December 2013