## AIR NATIONAL GUARD Joint Force Headquarters 187<sup>th</sup> FIGHTER WING, MONTGOMERY, ALABAMA 117<sup>th</sup> AIR REFUELING WING, BIRMINGHAM, ALABAMA

### ACTIVE GUARD RESERVE (AGR) – MILITARY VACANCY ANNOUNCEMENT # 24 - 041

**OPEN DATE: 5 DECEMBER 2024** 

**EXPIRATION DATE: 5 JANUARY 2024** 

### **OPEN TO: NATIONWIDE**

Number of Positions: 1 Position Title: Health Technician Func Code: PEC#: 58221G UMDA Position #: 0113214634 AFSC: 4N071 ASVAB REQUIRE: G:50 Grade: E5-E7 Security Clearance: SECRET Unit/Duty Location: 187<sup>th</sup> Fighter Wing Montgomery, AL Selecting Official: SMSgt Tavares Jones HRO Remote: MSgt Vernon Harris

# **APPLICATION REQUIREMENTS**

Signed NGB Form 34-1, NGB Forms

Current Report of Individual Personnel (RIP): Obtain from Virtual Military Personnel Flight (vMPF)

AF Form 422: Must be signed and verified within 6 months from your Medical Group

Air Force Fitness Management System II (AFFMS II) Fitness Report: Must be Current and passing

All applications must be submitted with a completed AGR Eligibility Checklist, found in ANGI 36-101. Your unit's HRO Remote Designee or the appropriate FSS representative must complete this checklist.

Email completed application packages to:

JFHQ-AL MDM ATTN: Ms. Calnecia Gregg ng.al.alarng.list.j1-air-mdm@army.mil P.O. Box 3711 Montgomery, AL 36109-0711

\*All emailed packages must be in a single PDF\*

### JOB INTRO/TITLE: HEALTH TECHNICIAN

**1. SPECIALTY SUMMARY:** This position is located in the Medical Group at an Air National Guard (ANG) Wing and reports to the Health System Specialist. The primary purpose of the position is to serve as the functional expert for issues pertaining to Aerospace Medicine and Force Health Management programs. Incumbent manages essential programs, which impact individual medical readiness (IMR) and personnel fitness for continued worldwide deployability. The position occupant serves as a member of or an advisor to, management boards and committees as well as Wing leadership regarding Force Health Management and Aerospace Medicine.

**2. DUTIES AND RESPONSIBILITES:** 2.1 Develops plans, procedures, goals and objectives in support of the Aerospace Medicine and Force Health Management Programs using an extensive knowledge of Department of Defense (DOD), Occupational Safety Health Administration (OSHA), United States Air Force (USAF) and Air National Guard (ANG) directives, policies and standards. Programs include physical examinations and standards, flight medicine and related aero medical and force health management concerns. Interprets directives and applies standards to determine worldwide deployability of personnel. Advises and makes recommendations to senior officials on force health issues related to physical exams, standards and flight medicine activities to ensure compliance. Determines requirements, requests funding and administers accounts for procurement of supplies, equipment, and medical assessment in support of the physical exam process, flight medicine activities and related programs.

2.2 Implements and maintains the information management systems utilized for aerospace medicine and force health protection programs. Systems include preventive health assessment (PHA) and individual medical readiness (PIMR), Aero medical Information Management Waiver Tracking System (AIMWTS), Physical Exam Processing Program (PEPP), Grounding Management Information System (GMIS) and other related programs. Compiles and completes various special and recurring reports utilizing these systems. Functions as the health systems program administrator. Identifies, develops and implements training programs which support mission essential aerospace medicine and force health management requirements.

2.3 Administers the Physical Examinations and Standards (PES) program and serves as a medical expert on related issues. Develops procedures to evaluate the effectiveness of the PES program and implements processes to ensure individual medical readiness and deployability. Reviews and resolves concerns or conflicts made by the member, supervisor, and/or commander. Identifies reports, formulates and recommends solutions to command personnel for resolution of compliance and delinquency trends and patterns which could negatively impact medical readiness. Addresses complex medical issues with members, supervisors, commanders, state staff, and higher headquarters. Identifies and analyzes abnormal findings through research using medical references and professional consultations. Using established guidelines, advises member of findings, determines additional requirements and refers to medical professionals as needed. Edits, reviews and validates physical examinations to determine qualifications for initial or continued military service. Conducts paraprofessional evaluations (an in-depth screening or interview for the purpose of gathering data for the healthcare provider) and interprets results.

2.4 Manages the Reserve Component Periodic Health Assessment (RCPHA) program. Reviews military unique individual readiness requirements. Identifies documents and ensures member is notified of abnormal laboratory or diagnostic results. Tracks PIMR and reports noncompliance information to leadership. Provides training for unit RCPHA monitors.

2.5 Acts as the Medical Group customer service expert. Addresses complex issues using independent judgment. Provides technical medical assistance to medical inquiries and responds to inquiry by researching, compiling information, generating response and providing information through written correspondence, telephone, electronic or in-person response.

2.6 Monitors the medical status of military personnel. Identifies and profiles personnel with medical conditions impacting duty performance or assignment restriction. Reviews and validates profiles disqualified for worldwide duty. Notifies and advises commanders, supervisors and unit deployment managers when a member's medical/dental condition or duty restriction affects deployable status.

2.7 Determines the need for and initiates Medical Evaluation Board (MEB) actions for duty related medical conditions. Coordinates, prepares and/or processes MEB with active-duty facility. Serves as the primary local interface with the Military Personnel Flight (MPF) for MEB/Physical Evaluation Board (PEB) process, issues, and concerns. Advises individuals and commanders on appropriate procedures and responsibilities. Coordinates with military and civilian providers for required medical tests, studies and medical evaluation board proceedings. Uses applicable medical references to code medical conditions and treatments; consolidates medical information and forwards to higher headquarters as required.

2.8 Determines the need for and initiates worldwide duty evaluations for non-duty related actions. Coordinates, prepares and/or processes actions for higher headquarters review. Advises individuals and commanders on appropriate procedures and responsibilities. Coordinates with civilian providers for required medical tests/studies. Develops and maintains waiver tracking system.

2.9 Administers policies and develops procedures for the flight medicine and grounding management programs, which directly affect flying safety and mission readiness. Assesses abnormal medical findings in flying and special operations personnel, and initiates grounding actions in accordance with directives and local policies. Maintains direct and frequent communication with the flight surgeon and the flying unit on status of grounding actions and return to flying duties to maintain the highest state of aircrew readiness. Coordinates and monitors care of aircrew members found medically disqualified for flying duty until returned to flying status. Reviews, prepares and processes flying initial/renewal waivers for higher headquarters. Acts as the force health management reviewer.

2.10 Manages administrative and automated orders system. Prepares, revokes, amends, reproduces, and distributes logs and maintains orders for all Medical Group personnel.

2.11 Provides prescreening for medical/dental/mental health and evaluation of personnel eligibility for deployment. Reviews preventative health assessment (PHA) and individual medical readiness (PIMR) data and health/dental records to determine medical deployability. Schedules members to complete any medical requirement that is necessary to meet and maintain eligibility for deployment status.

2.12 Performs quality assurance studies on medical issues such as: patient satisfaction surveys, review of medical records for content and structure, reviews laboratory results for validity and application, and generates readiness reports for commander review.

2.13 Administers the medical records program and acts as the medical records custodian. Prepares, safeguards, and maintains medical and dental records. Reviews records for security clearances and special duty assignments. Reviews incoming records and performs administrative quality assurance checks to ensure that the record contains accurate and complete data in accordance with current directives. Makes recommendations to improve procedures for compiling and retrieving medical records information. Determines eligibility for release of confidential medical information within established guidelines and abstracts information from medical record. Trains new employees and resolves problems encountered. Conducts annual audit of medical records to include monthly monitoring to ensure accountability. Analyzes audit data; identifies trends and patterns and reports results to leadership for corrective action.

2.14 Must possess a working knowledge of other DOD component medical requirements.

2.15 Performs additional duties as assigned

### **3. SPECIALITY QUALIFICATIONS:**

3.1 Knowledge of the mission, organization, requirements and procedures of military medicine to provide guidance and assistance on multiple policies and quality assurance relating to health care programs. Extensive knowledge of medical entitlements, civilian and military health care systems, and managed care programs available to traditional guard members and individuals on Active Guard/Reserve status.

3.2 Detailed knowledge of medical terminology, anatomy, and physiology. Knowledge of, and skill in applying, an extensive body of rules, regulations, procedures and precedents relating to the physical standards program and ability to resolve complex procedural and substantive problems. Knowledge to plan, coordinate, develop facts, and/or resolve support problems. Knowledge of the organization and its functions and programs to answer inquires of a general nature or to refer them to a responsible staff member.

3.3 Knowledge of physical examination techniques to include taking and recording blood pressure, pulse, height, weight, routine visual acuity testing, interpretation of hearing tests and other related techniques. Knowledge of medical terminology, anatomy, physiology, aero medical principles, flight physiology, diagnostic criteria, preventive medicine, routine laboratory and radiological procedures, and other medical procedures to properly evaluate and assess the medical background of members for qualification.

3.4 Knowledge of International Classification of Diseases (ICD) and other specialized

references for coding medical conditions from the simple through highly technical and diversified diagnoses, operations, procedures and other medical demographic data and to serve as the resource person for coding problems. Knowledge of available medical services, terminology, and procedures. Ability to record and report medical information such as test results and give preparatory instructions to patients for a variety of diagnostic procedures.

3.5 Knowledge of information management systems utilized for aerospace medicine and force health protection programs to include PIMR, AIMWTS, PEPP, GMIS and other related programs and the ability to compile various special and recurring reports utilizing these systems.

3.6 Knowledge of DOD, OSHA, Military Health Services Systems, USAF, ANG, Federal, state, and local policies and directives to administer medical unit programs. Knowledge of aerospace medicine in order to administer the related programs of occupational/physical examinations and flight medicine to ensure personnel readiness and mission effectiveness.

3.7 Knowledge of the medical records program with the ability to maintain medical and dental records, analyze records and audit data, and identify trends and patterns and report results to leadership for corrective action.

3.8 Skill in using a personal computer to perform operations or to prepare complex

documents containing various types of information and to compile and complete various special and recurring reports. Ability to communicate both orally and in writing.

### ELIGIBILITY REQUIREMENTS FOR ENTRY INTO THE AGR PROGRAM:

Must be a member or eligible to become a member of the Alabama Air National Guard.

Member will be required to hold a compatible military assignment in the unit they are hired to support.

Member's military grade will not exceed the maximum military duty grade authorized on the Unit Manning Document (UMD) for the position.

Member must meet the physical qualifications outlined in, Medical Examination and Standards (DAFMAN 48-123), Attachment 2 before being placed on an AGR tour.

Member must have retain-ability to complete the tour of military duty.

Member must not be eligible for or receiving a federal retirement annuity.

Member must comply with standards outlined in DAFMAN 36-2905, Fitness Program to be eligible for entry into the AGR program. Member must meet all eligibility criteria in ANGI 36-101, The Air National Guard Active Guard and Reserve (AGR) Program. Member must hold required AFSC or be eligible for retraining (if applicable) and meet all eligibility criteria in AFECD/AFOCD

### ADDITIONAL DUTIES

AGR members will participate with their unit of assignment during Regular Scheduled Drill (RSD).

AGR tour lengths in the State of Alabama are at the discretion of the Squadron Commander.

Initial tours will not exceed 6 years. Follow-on tours will be from 1 to 6 years, per ANGI 36-101

To be considered for this position you must meet all minimum AFSC requirements to include the minimum ASVAB qualifying score. Scores are reflected on your personnel RIP.

If your ASVAB score does not meet the minimum required IAW AFECD contact your servicing MPF. You have the option to retake the test.

You must schedule your test date and receive your new scores prior to the announcement closing date.

Selectee will be required to participate in the Direct Deposit Electronics Funds Transfer program.

A law enforcement background check may be required prior to appointment to this position.

By submitting a resume or application for this position, you authorize this agency to accomplish the check

### APPLICATION INSTRUCTIONS

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#### WRITTEN EXPLANATION IS REQUIRED FOR ANY MISSING DOCUMENTS

Current AGR members and those who wish to become an AGR must submit the following: AGR Eligibility Checklist found in ANGI 36-101 (see below). NGB Form 34-1, Application for Active Guard/Reserve (AGR) Position, Form Version Dated 11 November 2013 Announcement number and position title must be annotated on the form Download the current form version from; http://www.ngbpdc.ngb.army.mil/forms/Adobe%20PDF-F/ngb34-1.pdf Current Report of Individual Personnel (RIP). Documents must show your ASVAB scores. RIP can be obtained from the servicing Force Support Squadron (FSS) In lieu of a RIP, applicant may provide a printout from the virtual MPF (vMPF) Select 'Record Review', and then 'Print/View All Pages' Copy of current passing physical fitness assessment. (From AF Portal, https://www.my.af.mil/) AF Form 422, Physical Profile Serial Report https://asims.afms.mil/imr/MyIMR.aspx (CURRENT within 5 years, validated within 12 months, working copy is acceptable) ALANG - Air Technicians interested in converting to AGR status: Selection for the advertised position does not constitute acceptance into the AGR program. Once notification of a selection is made, the individual is required to submit a request for AGR medical clearance through the Medical Group, to the State Air Surgeon.

The State Air Surgeon will evaluate the request and notify MDG of the member's medical clearance approval or denial.

The information below was taken from ANGI 36-101, 21 April 2022.

**5.3 Grade.** To accept an AGR position, an applicant's military grade cannot exceed the maximum military authorized grade on the UMD for the AGR position. Reference paragraph 6.6 for proper assignment to position/unit. Enlisted Airmen who are voluntarily assigned to a position which would cause an overgrade must indicate in writing a willingness to be administratively reduced in grade in accordance with AFI 36-2502, Enlisted Airman Promotion/Demotion Programs, when assigned to the position. Acceptance of demotion must be in writing and included in the assignment application package.

5.4 Commissioning of Enlisted Member. Enlisted personnel applying for officer positions must be eligible for

commissioning upon application for AGR duty. Assignment to the AGR tour will not become effective until the individual receives a commission in the ANG and as a Reserve of the Air Force and has completed formal training for which an AFSC has been awarded

**5.5. Air Force Fitness Standards.** AGR Airmen are subject to the provisions of AFMAN 36-2905, *Air Force Fitness Program.* Airmen must meet the minimum requirements for each fitness component in addition to scoring an overall composite of 75 or higher for entry into the AGR program. For members with a documented DLC which prohibits them from performing one or more components of the Physical Fitness Assessment (PFA), an overall "Pass" rating is required and any DLC must be resolved prior to accession.

**5.6 Security Clearance.** AGRs must have a current favorable adjudicated personnel security investigation that is commensurate with their currently assigned AFSC. Local security representatives can provide verification of security clearance information using the Defense Information System for Security (DISS)

**5.7. Separated for Cause.** To be accessed in the AGR program, an individual must not have been previously separated for cause from a previous Reserve Component AGR tour or from any Active Component. Requests for waiver to this policy will be annotated on the AF Form 679 and routed to NGB/A1PP.

**5.8. Retainability for an AGR Assignment.** Enlisted personnel must obtain sufficient retainability to fulfill an AGR assignment.

**5.9. Sanctuary**. It is not the intent of the AGR program to bring non-career applicants into the sanctuary zone (18 to 20 years of TAFMS). Anyone whose order, whether active duty (AD) or full-time National Guard duty (FTNGD) other than for training, places them at 18 years or more of TAFMS will require a signed, approved sanctuary waiver in accordance with DAFI 36-2110, *Total Force Assignments*.

**5.10. Inability to attain 20 years TAFMS**. AGR applicants should be able to attain 20 years of TAFMS in the AGR career program. Waiver authority of this requirement is The Adjutant General, Commanding General, or designee. Individuals selected for AGR tours that cannot attain 20 years of TAFMS prior to reaching mandatory separation must complete the Statement of Understanding contained in Attachment 3. The HRO will maintain the completed, signed Statement of Understanding.

**5.11. Medical Requirements.** Applicants for permanent, occasional or AGR deployment backfill tours must meet the requirements outlined in Chapter 12.