



Reserve Action Bulletin



DEMOB Guidance For Mobilized Reservists Recalled Due to COVID-19

Immediate Action Required!

This Reserve Action Bulletin provides important guidance for those reservists that have been mobilized due to COVID-19. The information below covers a wide array of topics and is intended to help support all those involved with the DEMOB process.

Your assistance in spreading the word will be very much appreciated.

Thank you all for your support and please stay safe.

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Demobilization Guidance for Reservists Recalled under Title 10 U.S.C. §12302 for COVID-19

1. This provides guidance for units and SPOs on common issues and questions identified during the Release from Active Duty (RELAD) process for reservists recalled to active duty under Title 10 U.S.C. § 12302 as authorized by Executive Order (E.O.) 13912 and Acting [Secretary Homeland Security Memo of April 3, 2020](#). For purposes of entitlements and benefits, COVID-19 response is considered a contingency operation.
2. Notification: Reservists may be involuntarily recalled under Title 10 U.S.C. §12302 as authorized by E.O. 13912 and Acting Secretary Homeland Security Memo of April 3, 2020 for a maximum of 180 days; there are no exceptions to the 180 day limitation without individual waivers from the Acting Secretary Homeland Security. RELAD process requires a 60-day notification when practicable prior to release from active duty (RELAD) per chapter 3 of the Personnel & Pay Procedures Manual, PPCINST M1000.2 (series) (PPPM). If members approach their 180 day involuntary mobilization limit and volunteer to remain on active duty in support of the operational missions, they may be issued new Title 10 U.S.C. §12301(d) voluntary contingency ADOS-AC orders for any period beyond the 180-day limit.
3. Timeline: Members should expect to RELAD on their end of orders date, and anticipate additional time needed to complete all RELAD procedures, to include use of any accrued leave. When practicable, the member should be provided 60 days notification of early RELAD, however, in the event where 60 days is not practicable, members must be provided a minimum of 30 days notice to allow time to complete all SPO transactions. Sufficient notification of RELAD must occur to ensure Reserve members, their families, and their employers are not disadvantaged.



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4. Direct Access Mobilization Module: The command releasing the member, due to either a rotation of forces or completion of the operation, is responsible for ensuring the member is demobilized in the Direct Access Mobilization Module (DAMOB) with an accurate departure date, in addition to the administrative demobilization and RELAD procedures.
5. Career Intentions Worksheet: Per chapters 3 and 11 of the PPPM, members must submit a CG-2045 Career Intentions Worksheet to their Admin shop upon notification of their RELAD. All leave will be entered into Direct Access by the appropriate SPO no later than 45 days prior to the actual RELAD date. Timely submission of this worksheet is the best way to ensure there are no issues with pay. SPOs need to notify PPC (Separations Entitlements Service) by email correspondence if members' intentions change within 15 days of the impending RELAD date.
6. Leave: Accrued leave will be treated in accordance with section 10-a of the Coast Guard Pay Manual, COMDTINST M7220.29 (series). The 60-day career limitation for selling leave does not apply to leave accrued while serving in support of a contingency operation. Personnel with accrued leave have the options of selling unused leave in accordance with the PPPM, taking transitional leave, carrying leave forward to a future active duty period, or a combination thereof. Leave balances will remain subject to the established FY carryover limitations. ALCOAST 187/20 announced Special Leave Accrual (SLA) for National Emergency during FY20. Members may carryover 90 days on 30SEP20, 80 days on 30SEP21, 70 days on 30SEP22, and 60 days on 30SEP23. Reserve members are reminded that they can only use carried over leave on future orders of 30 days or more. Orders under the authority in paragraph 1 above cannot be extended beyond 180 days under any circumstances, including for the disposal of leave.
7. RELAD Counseling: All personnel must be provided minimum separation counseling prior to RELAD per chapters 3 and 11 of the PPPM, including the following programs:
 - A. Servicemembers Group Life Insurance (SGLI):
 - (1) Members remain eligible for a maximum SGLI (\$400k), Family SGLI (FSGLI) (\$100k for spouse and \$10k per child), and Traumatic SGLI (TSGLI) (up to \$100K) coverage if they remain in the SELRES following RELAD. Any member who reduced or declined coverage while mobilized may have insurance restored up to a maximum coverage when their status changes to SELRES unless the member reduces or declines coverage.
 - (2) Members who separate, retire, or transition to the IRR will maintain their existing SGLI and FSGLI coverage for 120 days following their separation date at no cost to them.
 - (3) Members who transition to SELRES status will continue to pay monthly premiums (and continue to have full-time coverage) unless they reduce or decline coverage by completing form SGLV-8286 or SGLV-8286a online. For married members reducing or declining coverage, the SPO will provide notice to the spouse by first class mail. Spouse concurrence is not required.



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- (4) More SGLI information is available at the Department of Veterans Affairs website: <http://www.insurance.va.gov/sglisite/sgli/sgli.htm>.
- B. Uniform Services Employment and Reemployment Rights Act (USERRA): Information is at the Employer Support of the Guard and Reserve website: www.esgr.mil. Members can contact the ESGR Customer Service Center at 800-336-4590, option one or email osd.userra@mail.mil for more information. Similarly, members may contact their local servicing legal office for additional information and guidance on USERRA rights and benefits.
- C. Transitional Assistance Management Program (TAMP): TAMP benefits are provided for 180 days after being released from orders over 30 days in support of a contingency operation. Family members enrolled in TRICARE Prime during mobilization must re-enroll to continue benefits. Members should check milConnect or call Tricare/DEERS 48 hours after orders have been marked finished in DA or the actual orders end date – whichever is later. Further details are available at <https://tricare.mil/tamp/> or <https://milconnect.dmdc.osd.mil/milconnect/>.
- D. TRICARE Reserve Select (TRS): Reserve members may be eligible to purchase premium-based health insurance at a discounted cost. The 2020 rates are \$44.17 per month for member only, or \$228.27 per month for family. To enroll, a member must be in the SELRES and not eligible for Federal Employee Health Benefits (FEHB). More information is available at <https://tricare.mil/TRS>. Enroll 60 days before TAMP expires to avoid a gap in health coverage.
- E. TRICARE Dental Program (TDP): If previously enrolled in TDP before activation, members will be automatically re-enrolled upon deactivation/demobilization. Family members will remain enrolled in TDP, but the premium rate will increase to the reserve family member rate. If not already enrolled, members can enroll upon demobilization. Further information is available at 844-653-4061 or <https://tricare.mil/dental/>.
- F. Post 9/11 GI Bill (Chapter 33): Guidance regarding the Post 9/11 GI Bill is available at: <https://www.va.gov/education/about-gi-bill-benefits/post-9-11/>.
- G. BAH/CONUS COLA Entitlements: While serving on 10 USC 12302 involuntary orders, or on 10 U.S.C. § 12301(d) voluntary ADOS-AC orders in support of contingency operations, members are entitled to receive BAH and CONUS COLA based on their principal place of residence at the time ordered to active duty for the duration of the orders. If a member's 10 U.S.C. § 12302 orders are terminated, and the member executes an extended active duty (EAD) contract or other long-term (181 days or more) ADOS orders, the member's orders will be deemed a PCS. BAH and CONUS COLA will then be based on the members permanent duty station location once the PCS is complete. To prevent erroneous payments of BAH/COLA, it is essential that SPOs enter correct BAH and CONUS COLA entitlements. See the Coast Guard Pay Manual for current Reserve Component BAH policy and regulations.



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- H. Dwell period: Reservists recalled to active duty under Title 10 U.S.C. § 12302 may be entitled to a dwell period. More information is available in Accessing the Reserve Components (RC), DoDI 1235.12.
8. DD-214: Pursuant to Certificate of Release or Discharge from Active Duty (DD Form 214/5 Series), DoDI, 1336.01, enclosure 3, paragraph 2.d., a DD-214 is normally not provided for reservists ordered to active duty for contingencies of periods of 30 days or less; however, the Service Secretary concerned may authorize the issuance of a DD-214 when required. All reservists recalled to active duty in support of COVID-19 operations, for any length of time, are entitled to a DD-214 upon RELAD. DD-214s for reservists who RELAD from being recalled in support of COVID-19 response should be completed in accordance with chapter 3 of the PPPM.
9. Administrative Holds: Individuals pending disciplinary proceedings under the UCMJ may be retained on active duty without their consent, as provided by Rules for Courts-Martial, Rule 202(c) and 10 U.S.C. § 802(d) (Art. 2, UCMJ), pending resolution of allegations. Members ordered to active duty under 10 U.S.C. § 12302 whose recall status changes for administrative reasons must have their orders modified on or before completing 180 days, to reflect that they no longer serve under the provisions of 10 U.S.C. § 12302 involuntary orders. Commands must notify commander PSC(rpm) and FORCECOM (FC-1) for coordination and consultation as soon as possible.
10. Reduced Eligibility Age for Receipt of Non-Regular Retirement Pay: A reserve member who performs 90 days of active duty must have the eligibility age for receipt of retired pay reduced below 60 years of age by three months for each aggregate of 90 days on which the member performs active duty in any two consecutive fiscal years. A day of duty must be included in only one 90 day period. The eligibility age may not be reduced below 50 years of age for any reason. Policy and additional information can be found at: <https://militarypay.defense.gov/Pay/Retirement/Reserve.aspx>.
11. Medical Evaluations:
- A. RELAD Medical Assessments. Per Coast Guard Medical Manual, COMDTINST 6000.1F, the nature of a RELAD Medical Assessment depends on the duration of the activation. These Medical Assessments may be completed at a CG clinic or by a CG IDHS/MO and should be completed prior to RELAD.
- (1) For reservists who served at least 30 but not more than 179 days, a current Periodic Health Assessment (Form DD-3024) and a Report of Medical Assessment, Form DD-2697, are required. Reservists who are completely separating or retiring from service do not need a current PHA, but instead must complete a Mental Health Assessment, Form DD-2978 if their last PHA was more than 6 months before the date of separation/retirement. Reservists returning to a participating reserve status must meet CG retention medical standards. If a possible fitness for duty concern exists, see Paragraph 12 below.



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(2) For reservists who served at least 180 days in addition to a current PHA, a full Separation History and Physical Examination (SHPE) is required (see The Separation History And Physical Examination (SHPE) For The DOD Separation Health Assessment (SHA) Program, DoDI 6040.46). Reservists who are completely separating or retiring from service do not need a current PHA, but instead must complete a Mental Health Assessment, Form DD-2978 if their last PHA was more than 6 months before the date of separation/retirement. Reservists returning to a participating reserve status must meet CG retention medical standards. If a possible fitness for duty concern exists, see Paragraph 12 below. COMDT (CG-11) may add additional COVID-19 deployment-specific requirements. PHAs and MHAs may be accomplished telephonically or using telemedicine but the SHPE may require a face-to-face medical appointment depending on local or national COVID-19 mitigation status.

B. Post-Deployment Health Assessment (PDHA) Form DD-2796/ Post-Deployment Health Re-Assessment (PDHRA) Form DD-2900: For COVID-19 mobilization completion of the PDHA and the PDHRA are not required. COMDT (CG-11) may add additional COVID-19 deployment-specific requirements. PHAs and MHAs may be accomplished telephonically or using telemedicine but the Form DD-2697 may require a face-to-face medical appointment depending on local or national COVID-19 mitigation status.

12. Medical Holds/Notice of Eligibility:

A. Reservists who are found not available for duty (NAFD) or available for limited duty (AFLD) and require more detailed medical evaluations or treatments must, with their consent, be retained on active duty pending line of duty (LOD) determinations and resolution of medical conditions. Reserve members that are NAFD or AFLD will be flagged in the Medical Readiness Reporting System (MRRS) as having a deployment limiting condition (DLC) and will be prohibited from active duty including ADT, ADOT or mobilization until available for full duty (AFFD).

(1) With approval from RPM-3, members meeting LOD criteria must have their 10 U.S.C. §12302 involuntary orders terminated (change actual end date of orders) and must be issued 10 U.S.C. §12301(h) voluntary orders, for medical treatment under this provision.

(2) 10 U.S.C. §12301(h) orders will remain in effect, pending resolution of the medical issue and/or completion of the physical disability evaluation board process in accordance with the Physical Disability Evaluation System, COMDTINST M1850.2D (series).

(3) Reservists who elect to stay on voluntary orders for medical treatment must remain at a Coast Guard unit with the capacity and expertise to swiftly manage their case to conclusion in proximity to appropriate medical facilities and professionals. Contact PSC-RPM-3 at ARL-SMB-CGPSC-RPM-Reserve-Medical@uscg.mil for specific guidance.

B. Reservists who elect release from active duty must have their medical problems fully documented in their medical records prior to release. The reservist's permanent duty station must request a Notice of Eligibility (NOE) authorizing health care at a military or civilian facility from PSC-RPM-3 through the servicing district (Dxr) via email to: ARL-SMB-CGPSC-RPM-Reserve-Medical@uscg.mil. Further guidance can be found in chapter 6 of the



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Reserve Policy Manual, COMDTINST M1001.28 (series) and PSC-RPM-3 portal site at:
<https://cg.portal.uscg.mil/units/psc/psc-rpm/rpm3/SitePages/Medical.aspx>.

- C. Reporting Requirements for Medical Holds: Commands must provide the LOD and initial request for medical hold to PSC-RPM-3. A monthly update is required by the responsible clinic until the reservist has been determined available for full duty (AFFD) or separated/retired in accordance with the process detailed within the Physical Disability Evaluation System, COMDTINST M1850.2D (series). A Medical Hold template and other helpful links are available on the PSC-RPM-3 portal site at:
<https://cg.portal.uscg.mil/units/psc/psc-rpm/rpm3/SitePages/Medical.aspx>.
13. Members who have served more than three months of involuntary active duty under Title 10 U.S.C. § 12302 may participate in, but are not required to, resume IDT in the first 60 calendar days following their RELAD. Reservists who have recently been released from active duty must resume IDT within 90 days of their RELAD. These members may participate in, but are not required to perform, ADT-AT in the first six months following RELAD. Note: while this policy relaxes participation standards for these reservists, nothing in this policy relieves members of the requirement to earn 50 points in an anniversary year. Members are still responsible for earning 50 retirement points in order to be credited with a satisfactory year towards a reserve retirement per Title 10 U.S.C. §12732.