National Capital Region
Medical Directorate
ADMINISTRATIVE INSTRUCTION

NATIONAL CAPITAL REGION MEDICAL

NUMBER 5030.01
FEB 0 1 2017

PERS

SUBJECT: Organizational Structure and Position Organization Address Changes in Defense Health Agency National Capital Region Medical Directorate

References: See Enclosure 1

1. PURPOSE. This Administrative Instruction (AI), in accordance with (IAW) the authority in References (a) through (f), establishes internal policies and procedures for determining Organizational Structure changes and Position Organization Address (POA) changes for organizations which National Capital Region Medical Directorate (NCR MD) exercise authority, direction, and control.

2. APPLICABILITY. This AI applies to the NCR MD; Walter Reed National Military Medical Center to include the DiLorenzo Clinic and the Tri-Service Dental Clinic; Fort Belvoir Community Hospital to include the Dumfries and Fairfax Clinics; and the Joint Pathology Center. Hereafter, these facilities are collectively referred to as Joint Medical Treatment Facilities (MTFs) and Centers.

3. POLICY. It is NCR MD policy that MTFs and Centers that perform like functions will be named and positioned similarly. For unique missions not covered by this guidance, MTFs and Center must submit a request for the establishment of new POA and change of POA address wording with justification to NCR MD. See Enclosure 6

6. RESPONSIBILITIES. See Enclosure 3

7. INFORMATION REQUIREMENTS. See Enclosure 4

8. STANDARD ORGANIZATIONAL GUIDANCE FOR MTFS AND CENTER. See Enclosure 5

9. PROCESS FOR REQUESTING CHANGES TO STANDARD ORGANIZATIONAL POLICY. See Enclosure 6

10. PROCEDURES TO ADD/CHANGE THE POSITION ORGANIZATIONAL ADDRESS (POA). See Enclosure 7

11. RELEASABILITY. Unlimited. This AI is approved for public release and is available on the NCR MD Website at www.capmed.mil/employeeservices/personnel.

12. EFFECTIVE DATE. This AI:

a. Is effective immediately.

b. Will expire 10 years from the publication date if it hasn't been reissued or cancelled before this date in accordance with DoD Instruction 5025.01 (Reference (f)).

D. A. LANE
RDML, MC, USN
Director

Enclosures
1. References
2. Mission and Functional Statements
3. Responsibilities
4. Information Requirements
5. Standard Organizational Guidance for MTFs and Center
6. Process for Requesting Changes to the Standard Organizational Policy
7. NCR MD Organizational Change Request Form
8. NCR MD Manpower Change Request Form
9. Procedures to Add/Change the Position Organizational Address (POA)
10. Timelines Creating New POA Realignment, Request for New UIC, and Request to Establish New Organization
11. Position Organization Address Template
12. NCR MD Organization Chart
13. WRNMMC Organization Chart
14. FBCH Organization Chart
15. JPC Organization Chart

Glossary

ENCLOSURE 1

REFERENCES

(a) National Capital Region Medical Directorate (NCR MD) Concept of Operations, September 30, 2013
(b) DoD Directive 1100.4, "Guidance for Manpower Management," February 12, 2005
(c) Defense Health Agency Directive Type Memorandum, "Defense Health Agency Manpower and Organization Changes," January 10, 2014
(d) DoD Instruction 1100.22, "Policy and Procedures for Determining Manpower Mix," April 4, 2010
(e) National Capital Region Medical Directorate (NCR MD), "Managing Manpower Requests," March 24, 2016
(f) DoD Instruction 5025.01, "DoD Issuance Program," June 6, 2014

ENCLOSURE 2

MISSION AND FUNCTIONAL STATEMENTS

1. MISSION STATEMENT. The NCR MD mission statement is to exercise authority, direction, and control over Walter Reed National Military Medical Center and Clinics, Fort Belvoir Community Center and Clinics, and the Joint Pathology Center.

2. FUNCTIONAL STATEMENT. The National Capital Region Medical Directorate functions are:

a. Create value through excellence in healthcare services that are responsive to the needs and convenience of all patients and their families;

b. Expand Wounded Warrior care best practices to all beneficiary population through comprehensive and multidisciplinary family-centered health services that are respectful of their choices;

c. Enhance patient safety and quality management;

d. Provide patient with access to care anywhere in the market, regardless of enrollment site;

e. Ensure the effective and efficient delivery of world class military healthcare within the NCR using all available military health care resources;

f. Oversee, manage, and direct all health care delivery by military medical units within the NCR;

g. Establish an Integrated Health Care Delivery System to provide patient-centered and integrated care with both patient and family involvement;

h. Develop and maintain interagency and private partnerships;

i. Continue to focus on health, education, training, and research;

j. Ensure medical readiness and operational support;

k. Establish an Integrated Academic Health System;

l. Exercises enhanced Multi-Service market (eMSM) authorities over the following facilities: Walter Reed National Military Medical Center, Fort Belvoir Community Hospital, DiLorenzo Health Clinic, Dumfries Health clinic, Fairfax Health Clinic, Navy Health Clinic Quantico and its subordinate Washington Navy Yard Branch Health Clinic; Navy Health Clinic Annapolis, Kimbrough Ambulatory Care Center and its subordinate Andrew Rader Health Clinic and Fort Mcnair Army Health Clinic; and Malcolm Grow Medical Clinics and Surgery Center

FEB 0 1 2017

(779th Medical Group), and its subordinate Pentagon Flight Medicine Clinic; and Bolling Clinic (579th Medical Group).

ENCLOSURE 3

RESPONSIBILITIES

1. DIRECTOR, NCR MD. The NCR MD Director shall:

a. Provide policy guidance relative to the Defense Health Agency's overall manpower and organization information requirements.

b. Maintain oversight on the content of manpower and organization data required by this instruction.

c. Maintain disapproval authority for MTFs and Center organizational structures.

2. CHIEF, PERSONNEL BRANCH NCR MD. The NCRMD Chief, Personnel Branch shall:

a. Review the MTFs/Center organizational structures for compliance with reference (b);

b. Ensure the Regional Position Management Board (RPMB) reviews and make a recommendation to the Director, NCR MD for approval or disapproval;

c. Forward recommendation to the Defense Health Agency (DHA) Manpower and Organization Division for approval or disapproval by the DHA Director;

3. DIRECTORS, MTF AND CENTER. The Directors, MTF and Center, shall:

a. Serve as the approval authority for all organization change requests for their Military Treatment Facility and Center consistent with this instruction and manpower ceilings.

b. Shall ensure manpower and resources are organized effectively and efficiently.

c. Shall collaborate with the other MTF or Center Director to reconcile any deviations from the application of standardization of organization structure in this instruction raised by the NCR MD Chief of Staff.

4. CHIEF OF STAFF, MTF AND CENTER. The MTFs and Center Chief of Staff shall:

a. Serve as the key member representing their facility on behalf of their Director

b. Act as the central point of contact for their MTF/Center Director for managing organization structure and alignment of workforce requirements.

c. Coordinate all organization change requests. Ensure organization change requests are documented in official memorandums to the Director of the NCR MD through their MTF or Center Director.

5. MTF AND CENTER POINT OF CONTACTS (POCs). The MTF and Center POCs shall submit all proposed organization changes through their Chief of Staff, ensuring that:

d. All requests for organization changes affecting bargaining unit members are submitted to the Union for review.

e. Current and future capabilities are addressed.

f. The manpower resources affected by any realignments or activation/deactivation of organizations or subordinate units are addressed.

ENCLOSURE 4

INFORMATION REQUIREMENTS

1. The MTFs and Center that perform like functions will be named and positioned equally. For unique missions not covered by this guidance, the MTFs and Center must submit a request for establishment of new POA with justification to NCR MD. See Enclosure 6

2. NCR MD organizations shall be organized and staffed in a manner that permits the effective accomplishment of assigned responsibilities with a minimum number of personnel.

3. Changes to approved organizational structure will be coordinated up through NCR MD to DHA for approval.

4. All military and civilian personnel authorized and assigned to organizations identified within NCR MD shall be included in determining that organization's structure.

5. Existing policies, procedures, and structures shall be periodically evaluated to ensure effective organizational structure.

6. Organizational information in legacy Defense Civilian Personnel Data System (DCPDS) was maintained on "Local Table 30" but is now known as a "Position Organization Address (POA)."

7. New POAs and changes to current POAs must be coordinated with payroll so the new organization can be added to the payroll database before employees are assigned. Usually this is done by the Payroll Customer Service Representative (CSR).

8. DCPDS will not allow duplicate POAs within one UIC. If a UIC exists in more than one region, it is necessary to check and ensure the organization code being considered already exists for that UIC. If the desired organization code does exist, it will be necessary to use a different organization code. A POA will not be established if there are no federal civilian billets assigned to the POA.

9. All new UIC and organization codes must be provided to Defense Financial Accounting System (DFAS) at least 30 days prior to processing the codes to Defense Civilian Pay System (DCPS).

10. Organization codes are process to DCPS before the new codes are entered, the action will not post in DCPS and the employee will not get paid properly.

ENCLOSURE 5

STANDARD ORGANIZATIONAL GUIDANCE FOR MTFs AND CENTER

1. General

a. Standard Organizational Structure for MTFs/Center. The varying size, mission, and functions of MTFs/Center make it impractical to be organized exactly the same. However, if a function is performed at multiple activities, it should be named and positioned the same. For unique missions not covered by this guidance, MTFs/Center should submit a request for organization code establishment with appropriate justification to NCR MD for approval.

b. Basic Organization Principles and Organization Manual Content. The following should be considered when developing organizational principles and manual content:

(1) Carry out organization goals and objectives in the most effective and efficient manner ensuring appropriate command authority and accountability.

(2) Delineate essential functions of the commands as to specific authority and align within the appropriate segment of the organization.

(3) Provide clear definition of individual duties, responsibilities, authority, and organizational relationships.

(4) Provide better resource allocation, management decisions, consistent data comparisons, and clarity of purpose with standard naming functions within a command.

(5) Need for a common lexicon for structures and naming of command organization elements in financial and personnel information systems for the data to be useful and/or meaningful.

2. Activity Categories

a. Medical Center. Major tertiary teaching hospital with multiple residency training programs providing a broad scope of inpatient and outpatient services.

b. Community Hospital. Maintain a limited scope of outpatient and inpatient specialty services.

3. Standard Naming Conventions. Common organizations and functions between the MTFs/Center shall retain standard similar naming conventions.

4. Specific Requirements

a. Activities will use the information provided in the standard naming conventions and standard organization code spreadsheets and diagrams available on the website at

www.capmed.mil. Deviation from these documents must be approved by the NCR MD prior to implementation.

b. Director. Each MTF/Center will have a Director. The Director is a nominative position announced by DHA to the Services and selected by the Director, DHA and Director, NCR MD.

c. Chief of Staff (CoS). Except for the Center, each MTF will have a CoS who assumes directorship in the absence of the Director. For the Center, the senior assigned military officer after the Director assumes command in the absence of the Director. Except for the Center, the CoS is a nominative position, announced by DHA to the Services and selected by the Director, MTF/Center

d. Special Assistants (SA). Positions may be appropriate for assignment as SA as indicated by regulations, guidance from higher authority or at the Director's discretion.

e. Director For. Directors For are senior leaders managing large portions of the organization (directorates) and working directly with the CoS. Director for Positions are leadership opportunity positions that are selected by the MTF/Center Directors. The Directors For Administration and Nursing are rotational selected by the respective Service via a robust selection process.

f. Departments and Service Chiefs. Consistent with standard organizational structure, major functions will be established as Departments and, if too broad in scope, may be further subdivided into Services. Leaders of Departments and Services will be titled as Chief, (Department/Service) and shall be selected by the respective Director For and approved by the MTF Director.

g. Senior Enlisted Leader (SEL). Each MTF and Center shall have a SEL to advise the Director on military enlisted personnel issues. The SEL position is not nominative or rotational. It is service specific.

h. Service and Division. Functions below the Service and Division level will be maintained as local organizations at the MTF Director's discretion.

i. Comptroller. The Comptroller reports directly to the MTF Director for financial matters since the head of the activity is ultimately responsible for proper execution of funds. Comptrollers and comptroller functions will be organizationally positioned within the Director for Resource Management.

5. Business Rules

a. The standard organization naming and standard application of business rules allow all MTFs/Center to be viewed and assessed in a fair and consistent manner with regard to peacetime and readiness personnel resources and their utilization. Additionally, standard naming contributes to navigational ease for our beneficiaries and their families, enables robust workforce

or resource analysis, provides for consistent and accurate database queries, and facilitates timely system-to-system information exchange.

b. MTFs/Center will be headed by a Director and will be built with at least 2 directorates with a minimum of 15 positions in each directorate. Directorates may be subdivided into departments and then services, provided they meet the 15 position rule. Functions below the Division level are considered sections and will be managed by the MTFs/Center as local organizations.

c. Organization codes will be reconciled against the Cost Accounting Directory (CAD) annually during the fiscal year shift in accounting systems.

d. Maintaining Defense Medical Human Resource System – internet (DMHRSi) and Fourth Estate Manpower Tracking System (FMTS) assignments. Once this structure is operational in DMHRSi and FMTS, activities need to move personnel assignments in DMHRSi and FMTS. Service specific manpower documents (AMD, TDA, and UMD) will also be updated to reflect the Joint Table of Distribution (JTD) billet structure.

e. Civilians realigned in the organization structure will be reflected in the POA of DCPDS. This will update the POA vetted through the Civilian Human Resource Center (CHRC) and submitted to DCPDS.

f. When new services, products or technologies are defined at any activity, the nomenclature and organizational placement will be vetted through the specific MTF's Executive Committee and forwarded to the final approval by the NCR MD (See detailed directions in Enclosure 6).

ENCLOSURE 6

PROCESS FOR REQUESTING CHANGES TO THE STANDARD ORGANIZATIONAL POLICY

1. Approval Process

a. All requests for changes to the approved Service and Division level and above organization structure

i. Must be vetted through the following steps (in order) prior to submission to DHA for approval.

ii. Briefed to and approved by Board of Directors.

1. Approved by MTF/Center Director.

2. Coordinated by NCR MD Personnel Branch.

3. Briefed and get recommended approval or modification by the RPMB.

4. Briefed to the NCR MD Director for approval or disapproval.

5. Submitted to the DHA Manpower and Organization for approval by the DHA Director.

b. Changes and/or additions to the organization structure below the service level may be made at the discretion of the MTF or Center Director. Local organizations added below the service level must fall under an approved service level organization. Any position movement to new local organizations must follow criteria contained in Enclosure 6.

2. Organization Change Request (OCR) Package Requirements

a. OCR packages must answer the following questions:

i. How will this change directly improve patient care or operations?

ii. How is the change good for the mission/enhanced multi-service market?

iii. How is the change good for the Directorate?

b. OCR packages must include the following information:

i. Concept of Operations for new organizations.

ii. Proposed layout within the organization structure.

iii. List of positions to be realigned within the new organization structure (List shall include unique position numbers with skill, grade, workforce type/category, Program Element Code, organization (activity/department), Position Description title, and Unit Identification Codes from the latest manpower data file extract from the DMHRSi database).

ENCLOSURE 7

NCR MD ORGANIZATIONAL CHANGE REQUEST FORM

NCR MD Organizational Change Request		
Organization:	Requestor:	Date:
Requestor E-Mail:		Requestor Phone:
Subject:		
1a. Type Action:	1b. Desired Effective Date:	
2. Executive Summary:		
3. Organization Change Questions:		
1) Describe each proposed action in detail.		
2) What is the structure of the new organization? (Provide a proposed organization diagram.)		
3) Why is this action needed?		
4) What are the expected benefits to NCR MD, DHA or the MTFs and Center?		
5) Will there be any manpower requirement changes resulting from the proposed action? (If so, explain each change using section 3a, below) _____Yes _____No If Yes, complete the Manpower Change Request		
6) Will there be any change to existing personnel (Military, Civilian, and Contract)?		
7) What cost or savings are expected as a result of this change?		

ENCLOSURE 7

3b: Organization Structure Changes
1) Current Unit Identification Code (UIC):
2) New Unit Identification Code (UIC):
3) Current Position Organization Address (POA):
4) New Position Organization Address (POA):

MTF/Center Chief of Resource Management/Comptroller	Date
MTF/Center Director's Signature or Delegated Authority (i.e., Chief of Staff)	Date
Director for Business Operations, NCR MD Signature	Date
Director, NCR MD Signature or Delegated Authority (i.e., Chief of Staff)	Date

ENCLOSURE 8

NCR MD MANPOWER CHANGE REQUEST FORM

National Capital Region Medical Directorate Manpower Change Request Form		
Organization:	Requestor:	Date:
Requestor's E-Mail:		Requestor's Phone:
Subject:		
1a. Type Action: (Select One) Select Below (Select One) Select Below	1b. Desired Effective Date:	
2. Request Summary (BLUF):		
3. Justification:		
a) Describe proposed action:		
b) Is the requirement temporary or permanent? (Select One) Select Below		
c) Why is the action needed?		
d) Type of resource requested (Military, Civilian, or Contract)? (Select One) Select Below		
e) What are the expected benefits to the organization? Provide a business case analysis or other verifiable evidence such as backlog reduction, customer satisfaction improvement, or other statement of benefit appropriate to the scope of the change.		
f) Have other options been explored, e.g., process improvements, skill upgrades, technology changes, etc.		
g) Will there be any changes to existing military duty or civilian position descriptions?		

ENCLOSURE 8

h) What costs/savings will occur as a result of the proposed action if any?
i) When does this action need to be accomplished?
4. Position/Billet Information (Current):
a. (OLD) Position Title:
b. Rank/Grade:
c. AOC/MOS/Occupational Series:
d. Position/Billet Number:
e. UIC:
5. Position/Billet Information (Change To):
a. (NEW) Position Title:
b. Rank/Grade:
c. AOC/MOS/Occupational Series:
d. Position Number:
e. Branch of Service:
f. UIC:
6. Civilian billets realigned or cross-leveled within NCR? (Select One) Select Below
7. Military personnel and/or billets moved to new department/section within MTFs or Center? (Select one): Select Below
8. Insourcing/outsourcing? (Select One) Select Below
9. Cross-leveling of contract support? (Select One) Select Below

1. Director For (sign):	2. Requesting Office Manpower (sign): Select Below
3. Chief of Staff (Requesting Organization (sign): Select Below	4. Chief of Staff (Gaining Organization (sign): Select Below
5. Chief for Personnel, NCR MD (sign):	6. Chief of Staff / Director NCR MD (sign):
7. Manpower, DHA (US PHS Program Office Only)	

ENCLOSURE 9

PROCEDURES TO ADD/CHANGE
THE POSITION ORGANIZATIONAL ADDRESS (POA)

The DoD Organization Hierarchy is a structure/architecture that depicts the highest organization level down to the lowest organization level. This structure identifies organizations starting at the Secretary of Defense and proceeds downward through the various Components (DoD, Army, Navy, etc.) to the installation or activity level in most cases. The Organization Hierarchy is centrally managed and built in the system for each component down to the UIC.

1. CHANGE POA ADDRESS WORDING (TEXT ONLY)

a. Submit a memo requesting "Change of POA" without changing POA String (JT60…).

b. Memo/email signed by MTF/Center Director to NCR MD.

c. NCR MD Chief of Personnel Branch coordinates.

d. NCR MD Director or CoS approve.

e. NCR MD Chief Personnel Branch forwards approved change to CHRC.

2. CREATE NEW POA (string) using established Command Code (60) and UIC (DDAAFE, DDAAFF, or DDAAFG).

a. Creating new POA (string) and changing the POA wording requires establishing an organizational code combined with the Command Code and established UIC.

b. 155r Building a POA (38 characters include alpha/numeric, spaces and punctuation).

i. Organization Info Line 1 - Do not exceed 38 characters – Agency

ii. Organization Info Line 2 - Do not exceed 38 characters – Command

iii. Organization Info Line 3 - Do not exceed 38 characters – Directorate

iv. Organization Info Line 4 - Do not exceed 38 characters – Department

v. Organization Info Line 5 - Do not exceed 38 characters – Division, Branch, Section

vi. Organization Info Line 6 - Do not exceed 38 characters – City, State, Zip Code

3. Coordination process:

a. MTFs/Center forwards Organization Change Request to NCR MD, Chief for Personnel Branch;

b. NCR MD, Chief for Personnel Branch prepares Organization Change Request for RPMB review and recommendation;

c. Coordinates then forward to NCR MD Director or Chief of Staff for approval;

d. Once approved, NCR MD Chief for Personnel forwards to CHRC for processing;

e. CHRC coordinates with the activity DRM and CSR for input into DCPS to build new POAs;

f. DCPS have 60 to 90 days to build new POAs;

g. Activity Director for Resources Management provides either Request for Personnel Action (RPA(s)) or excel spreadsheets identifying civilian employees with their bargaining unit status (BUS code), current Command Code, UIC, organizational codes and their new UIC (if applicable) and new organizational code for appropriate action (i.e., Change in Duty Station, Realignment or Reassignment).

h. Once POAs are built and are reflected in both DCPDS and DCPS, CHRC processes personnel actions for affected civilian employees.

ENCLOSURE 10

TIMELINES
CREATING NEW POA
REALIGNMENT,
REQUEST FOR NEW UIC, AND
REQUEST TO ESTABLISH NEW ORGANIZATION

If "Proponent" says Walter Reed, that is management of the organization. Classification under Proponent is a Civilian Personnel's role

Actions Required for New UICs to be Established in DCPDS	Proponent	Time Required for Processing	Status
Submit request through NCR MD to DHA	NCR MD		Pending
Upon approval of UIC, the Command (or CHRC on their behalf) submits the CPOL Service Desk Ticket.			
Civilian Human Resources Agency (CHRA), Civilian Information Services Division, Enterprise Functional Automation Branch (eFAB) updates and changes Unit Identification Codes (UICs) in the Defense Civilian Personnel Data System (DPDS).	CHRC/CHRA	**48-72 hours of receipt of ticket to establish**	

Actions Required for New Organizations to be Established in DCPDS		Time Required for Processing	
Submit new organizational codes to CHRC, who coordinates with MTF/Center RM/CSR after organizational codes are in DCPDS			
Ensure new orgs are established in DCPS (Payroll)	MTF/Center	**60-90 Days Req** for DCPS Processing	Pending
Submit org template spreadsheets to CHRC	MTF/Center RM		Pending
Establish new organizations in DCPDS	CHRC	**14 Days - Can be completed NOW**	Pending

Employee Realignments , Change in Duty Station, or Reassignment		Time Required for Processing	
Notify Union of Bargaining Unit	MTF/Center	**15 Days**	
Submit realignment template to NCR MD for review and coordination, if necessary	MTF/Center	**5 days**	
Submit realignment template spreadsheet to CHRC for each Dept.	MTF/Center		Pending
Set up and process employee realignments	CHRC	**30-45 Days for Set-up and Processing (Timeline begins after UIC is Available in DCPDS)**	Pending

ENCLOSURE 11

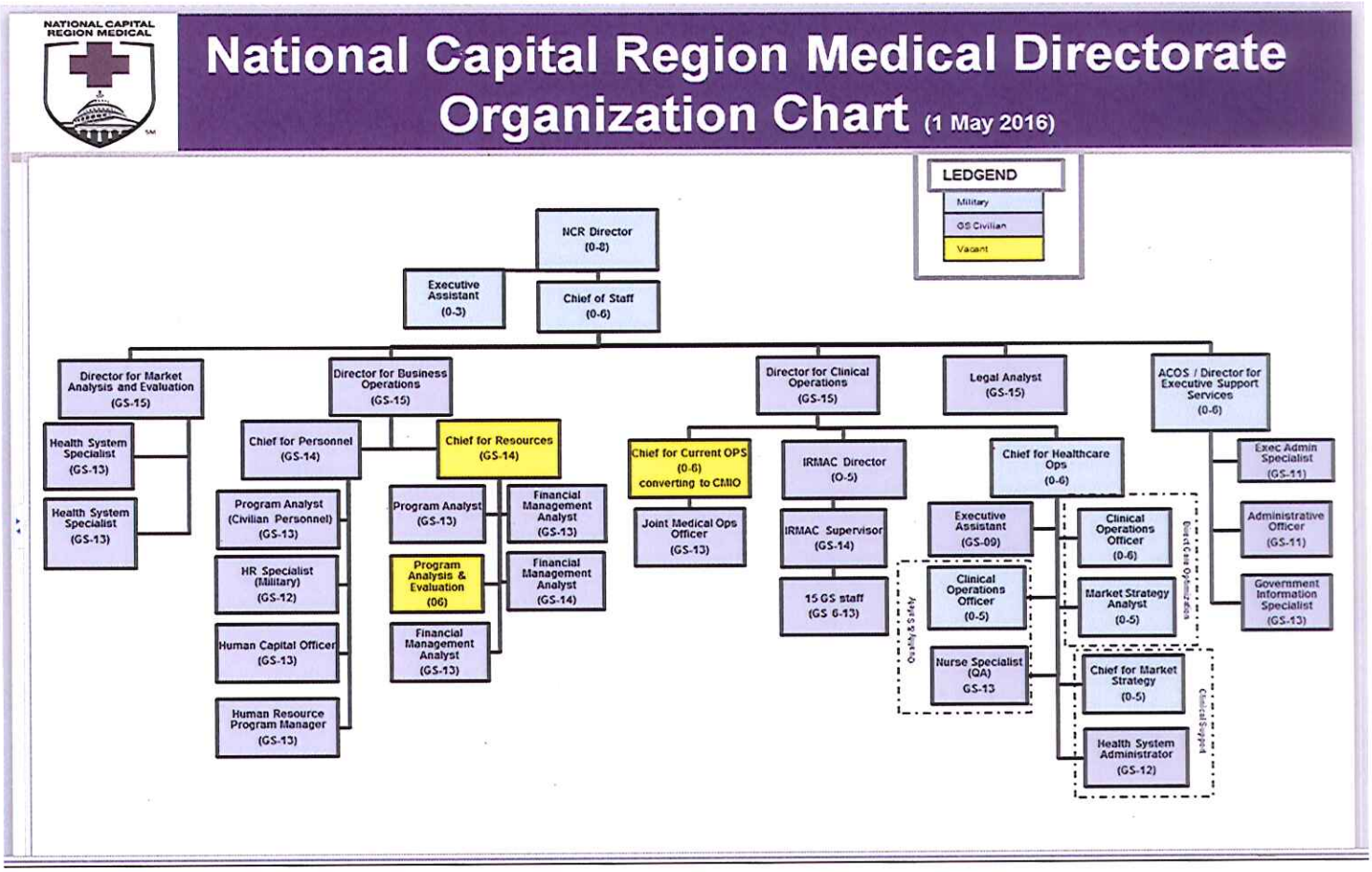
Position Organization Address (POA) Template

(Formerly Table 30)

CURRENT TITLE	OLD ORGANIZATION CODE	NEW TITLE	ACTION	RPAs NEEDED
ANMCW2DHAAXXB01A WALTER REED ARMY MEDICAL CENTER DEPARTMENT OF PHARMACY CHIEF PHARMACY WASHINGTON, DC 20307-5001	**ANMCW2DHAAXXB01A**	**ANMCW2DH01XXB01A** WALTER REED NATIONAL MILITARY MEDICAL CENTER DEPARTMENT OF PHARMACY CHIEF PHARMACY BETHESDA, MD 20889	**Change Org Code**	**Spreadsheet is being sent.**
ANMCW2DHAAXXB02A WALTER REED ARMY MEDICAL CENTER DEPARTMENT OF PHARMACY INPATIENT PHARMACY SERVICE WASHINGTON, DC 20307-5001	**ANMCW2DHAAXXB02A**	**ANMCW2DH01XXB02A** WALTER REED NATIONAL MILITARY MEDICAL CENTER DEPARTMENT OF PHARMACY INPATIENT PHARMACY SERVICE BETHESDA, MD 20889	**Change Org Code**	**Spreadsheet is being sent.**
ANMCW2DHAAXXB02B WALTER REED ARMY MEDICAL CENTER DEPARTMENT OF PHARMACY INPATIENT PHARMACY SERVICE INPATIENT PHARMACY SECTION WASHINGTON, DC 20307-5001	**ANMCW2DHAAXXB02B**		**DELETE**	
ANMCW2DHAAXXB02F WALTER REED ARMY MEDICAL CENTER DEPARTMENT OF PHARMACY INPATIENT PHARMACY SERVICE ACUTE CARE SECTION WASHINGTON, DC 20307-5001	**ANMCW2DHAAXXB02F**		**DELETE**	
ANMCW2DHAAXXB04A WALTER REED ARMY MEDICAL CENTER DEPARTMENT OF PHARMACY AMBULATORY CARE SERVICE WASHINGTON, DC 20307-5001	**ANMCW2DHAAXXB04A**	**ANMCW2DH01XXB04A** WALTER REED NATIONAL MILITARY MEDICAL CENTER DEPARTMENT OF PHARMACY OUTPATIENT CARE SERVICE BETHESDA, MD 20889	**Change Org Code and Title**	**Spreadsheet is being sent.**

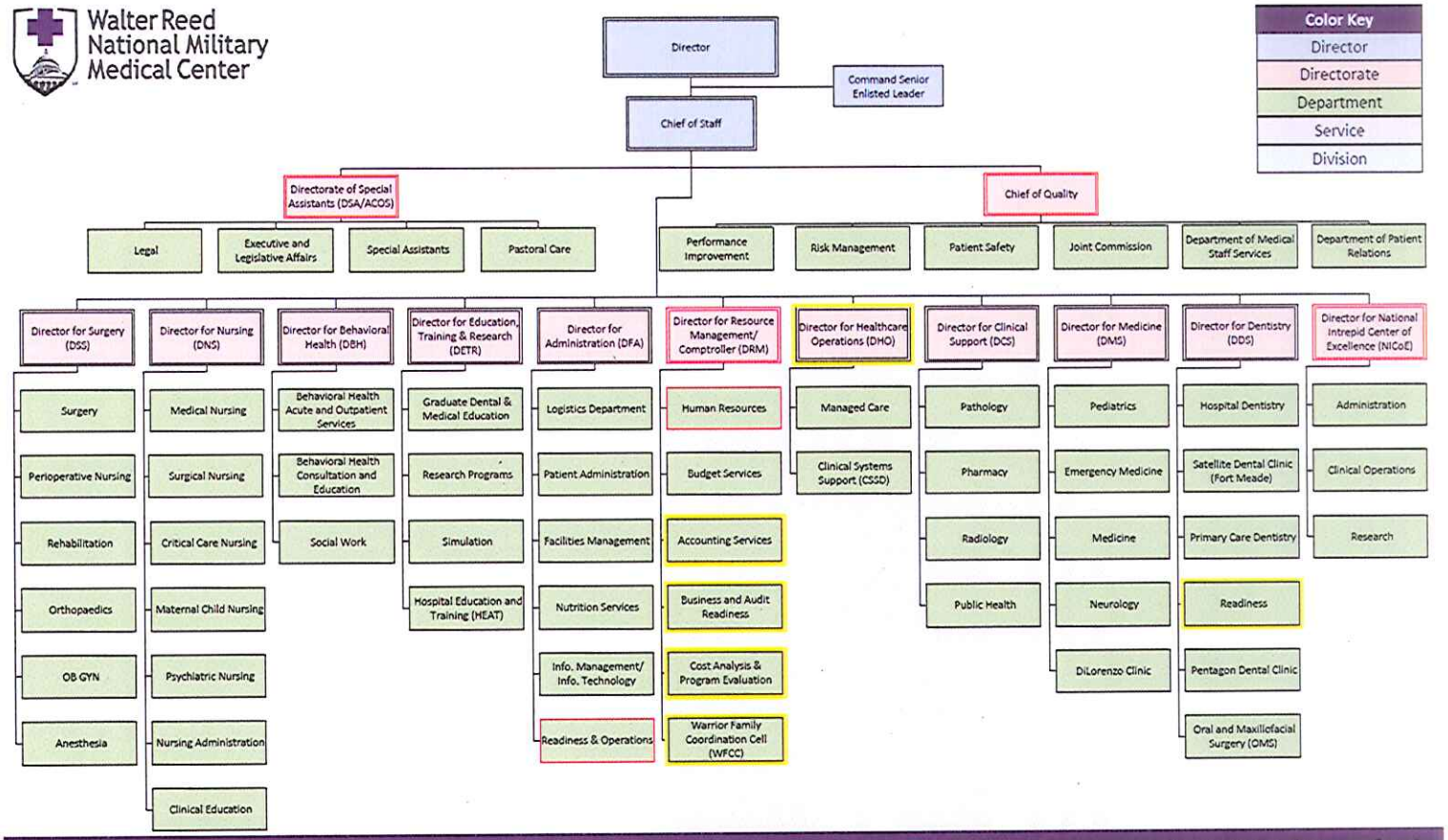
ENCLOSURE 12

NATIONAL CAPITAL REGION MEDICAL DIRECTORATE
ORGANIZATION CHART
(NCR MD)



ENCLOSURE 13

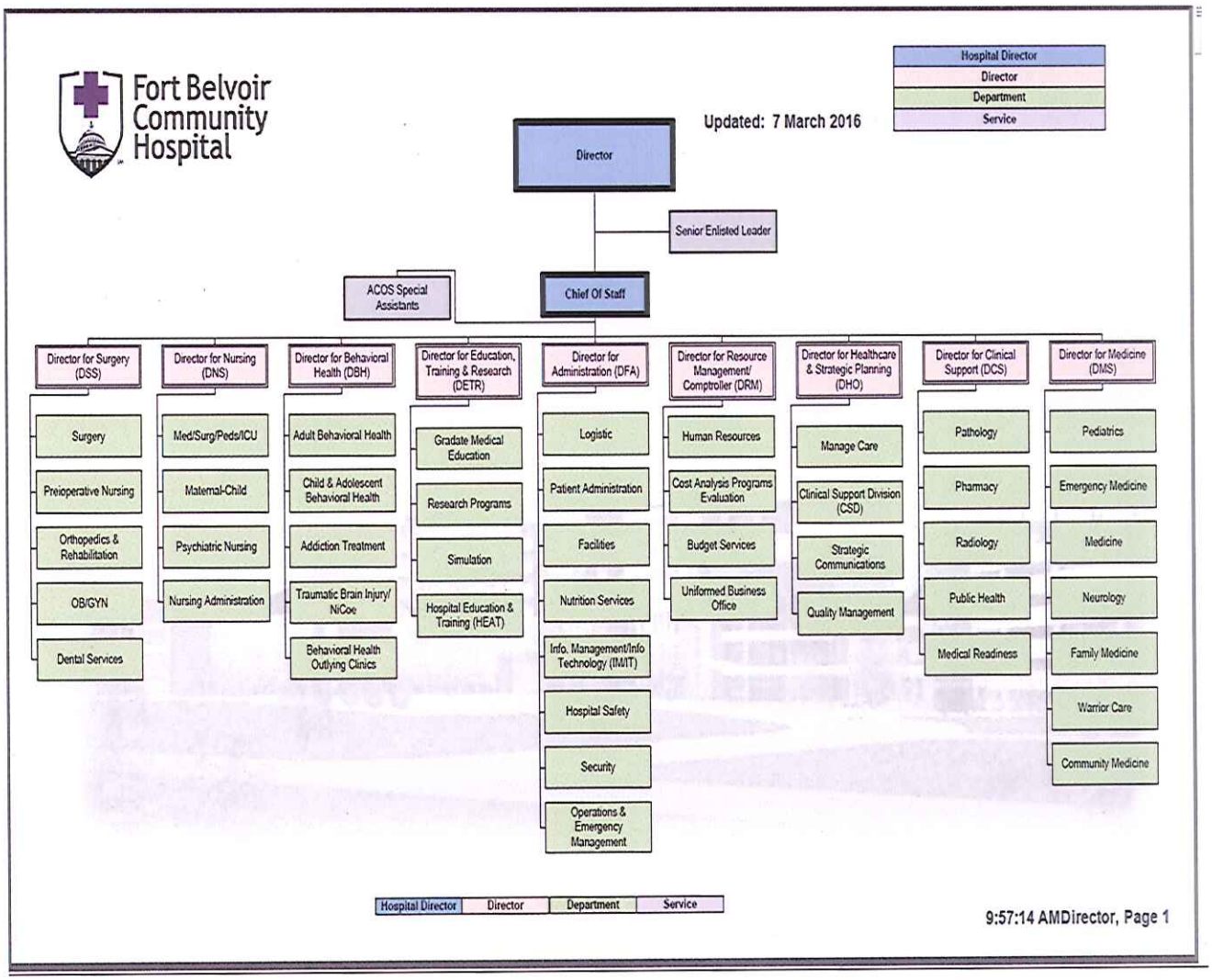
WALTER REED NATIONAL MILITARY MEDICAL CENTER (WRNMMC)
ORGANIZATION CHART



FEB 0 1 2017

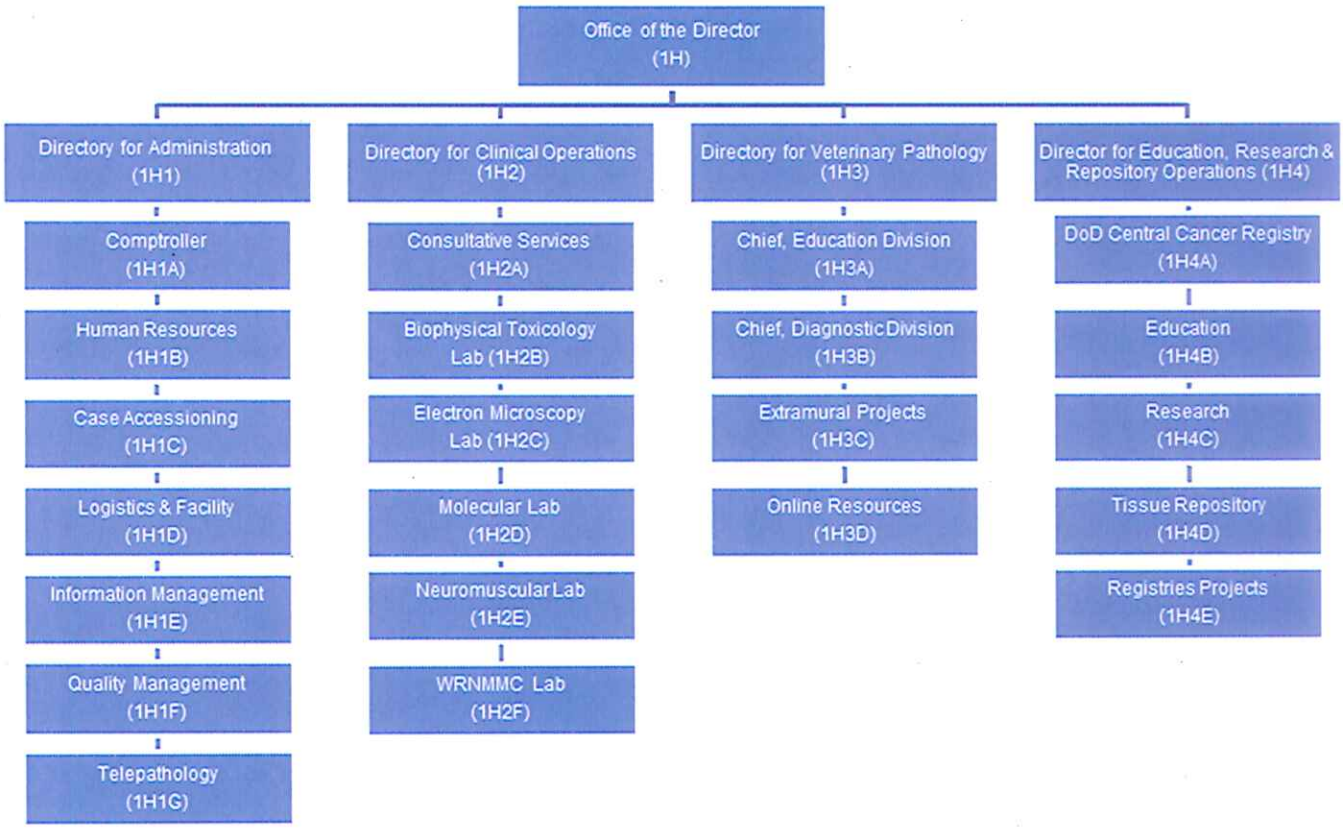
ENCLOSURE 14

FORT BELVOIR COMMUNITY HOSPITAL (FBCH)\



ENCLOSURE 15

JOINT PATHOLOGY CENTER
(JPC)



GLOSSARY

PART I. ABBREVIATIONS AND ACRONYMS

AI	Administrative Instruction
CHRC	Civilian Human Resources Center
CSR	Civilian Service Representative
DCPDS	Defense Civilian Personnel Data System
DCPS	Defense Civilian Pay System
DFAS	Defense Finance and Accounting System
DHA	Defense Health Agency
DMHRSi	Defense Manpower Human Resources System-internet
DRM	Director for Resource Management
FBCH	Fort Belvoir Community Hospital
FMTS	Fourth Estate Manpower Tracking System
JPC	Joint Pathology Center
OCR	Organization Change Request
MTF	Medical Treatment Facility
NCR MD	National Capital Region Medical Directorate
M & O	Manpower and Organization
POA	Position Organization Address (POA)
RPA	Request for Personnel Action
UIC	Unit Identification Code
WRNMMC	Walter Reed National Military Medical Center

PART II. DEFINITIONS

1. Realignment. The movement of an employee and employee's position when:

a. An organization change (such as reorganization or transfer of function) occurs, the employee stays in the same agency, and there is no change in the employee's position, grade or pay.

b. Must include an "authorizing" document that authorizes the realignment or mass transfer to determine which employees are affected by the change and whether the change will place the employee(s) under the jurisdiction of a different servicing personnel or payroll office.

2. Change in Duty Station. A change in duty station occurs when an employee's work site or station is moved to a new geographic location (a change in city/town, county, or State) and no other change occurs.

a. If the employee's duty station, geographic location code, and/or agency code changes (blocks 38 and 39 on the SF50), enter the new data on the Standard Form 52.

b. Movement between WRNMMC, FBCH and JPC would be by a change in duty station (billet, position, and person)

3. Reassignment. The change of an employee from one position to another without promotion or change to lower grade, level or band.

a. Movement to a position in a new Directorate

b. Movement to a different position at the same grade but to a new Directorate.

4. Transfer. Is when an employee's:

a. Separation action is initiated by either the employee or the agency when the employee (or a group of employees) moves from one agency to another agency, nature of action is: Termination-Appt In (agency).

b. When the separation is to move to other Federal employment without a break in service, the effective date should be the day immediately preceding the day the employee entered on duty in the new employing agency.