



DEPARTMENT OF THE ARMY
WARRIOR TRANSITION COMMAND
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ARLINGTON, VIRGINIA 22202

MCWT-CG

WTC Policy Memo 11-002

MAY 18 2011

Expires **MAY 18 2013**

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Policy Memorandum - Exception to Policy for Transfer of Warriors in Transition

1. References:

- a. AR 614-100, Officer Assignment Policies, Details, and Transfers, 10 January 2006.
- b. AR 600-8-11, Reassignment, 1 May 2007.
- c. AR 600-20, Army Command Policy, 18 March 2008.
- d. AR 614-200, Enlisted Assignments and Utilization Management, 26 February 2009.
- e. AR 600-8-14, Identification Cards For Members Of The Uniformed Services, Their Eligible Family Members, and Other Eligible Personnel, 17 June 2009.
- f. AR 40-400, Patient Administration, 27 January 2010.
- g. Army G-1 Personnel Policy Guidance (PPG), 23 February 2009.
- h. Warrior Transition Unit Consolidated Guidance (Administrative), 20 March 2009.
- i. OPORD 09-67, HQDA, 251000Q August 2009, subject: Enhanced Medical Regulation of Patients.
- j. FRAGO 3 to EXORD 118-07, HQDA, 010900Q July 2008, subject: Healing Warriors.
- k. FRAGO 4 to EXORD 118-07, HQDA, 191536Z May 2009, subject: Healing Warriors.
- l. OPORD 07-55, MEDCOM, 05 0522Q June 2007, subject: Army Medical Action Plan.
- m. FRAGO 46 to OPORD 07-55, 201800 May 2009, subject: Army Medical Action Plan.
- n. OPORD 08-21, MEDCOM, 071100R February 2008, subject: Soldier Transfer and Regulating Tracking Center.
- o. OPORD 09-67, MEDCOM, 251000Q August 2009, subject: Enhanced Medical Regulation of Patients.

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p. Memorandum, OTSG/MEDCOM, 11 January 2008, subject: Movement of Soldiers in Transition between Warrior Transition Units (WTUs) and WTUs/Community Based Health Care Operations (CBHCO).

2. Purpose: To provide policy guidance on case-by-case basis as exception to policy on the expeditious evaluation and transfer of Soldiers assigned to Warrior Transition Units (WTUs) and Community Based Warrior Transition Units (CBWTUs).

3. Proponent: The proponent for this policy is the United States Army Warrior Transition Command (WTC) G-1.

4. Policy:

a. Originating MTF/WTU/CBWTU Triad of Care ensure Warriors in Transition meet both clinical and administrative eligibility as outlined in the DA G-1 WTU Consolidated Guidance, <http://www.armyg1.army.mil/default.asp> and in accordance with (IAW) Office of the Surgeon General (OTSG)/MEDCOM Policy Memorandum 08-039 (Warrior Transition Unit Risk Assessment and Mitigation Policy).

b. WTs are eligible to transfer as an exception to policy provided:

(1) The problems cannot be resolved through the use of leave, correspondence, power of attorney, or the help of Family members or other parties.

(2) The request is based on medical problems of a Family member. A signed statement from the attending physician giving medical diagnosis and prognosis of illness must be provided. This statement should also address how transfer of the Soldier will affect the medical condition of the Family member.

(3) The request is related to legal issues. A signed statement from a licensed attorney must state the legal problems and reasons why transfer of the Soldier will be beneficial.

(4) The request may be based upon other than medical or legal problems. Supporting documents from appropriate persons (such as clergy, social workers, and others who have a working knowledge of the problem) must be included.

(5) The request is based upon the health and welfare of the family members. The affected Family member must be:

(a) The spouse, child, parent, minor brother or sister, guardian (in loco parentis), or the only living blood relative of the Soldier.

(b) Or other authorized dependent, as described in AR 600-8-14.

(6) The request is based upon the condition of a parent-in-law and no other member of the spouse's family is available to assist with or resolve the problem.

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(7) The request is based upon terminal illness with less than 12 months' life expectancy of an immediate Family member. Documentation by attending physician must be provided.

(8) The request is based upon the Soldier's minor children are being made wards of the court or placed in an orphanage or foster home as a result of Family separation. Separation must be the result of military service and not of neglect or misconduct on the part of the Soldier.

(9) The request is based upon the Soldier's Family member having disabling allergies aggravated by climatic conditions.

(10) The request is based on a threat to life to the Soldier or Family member.

(11) Active Duty (COMPO 1) Soldiers may be transfer to a CBWTU under the following conditions:

(a) Existence of catastrophic illness or injury.

(b) Will most likely require a MEB.

(c) Will require assistance with care from family member/support system.

c. The WTC G-1 is the single approval authority for all exception to policy for transfers of WTs.

5. Responsibilities:

a. Leadership involvement. Leaders will actively support the entire spectrum of Warriors in Transition (WT) movement among WTUs and CBWTUs. Regular messages from senior leaders identify the goal of healing "Closest to Home" as one of their priorities.

b. WTC, G-1, Transfer Support Branch approves/disapproves WT movements awaiting approval within the TRANSCOM Regulating and Command Control Evacuation System (TRAC2ES) database within three business days upon receipt of request from Soldier Transfer and Regulating Tracking Center (STARTC). Is the single arbitrator for resolution of discrepancies and disputes. Is responsible for overall process improvement and subsequent changes to policy and documentation regarding WTC transfers. Monitors Medical Operating Data System (MODS)-WT transfer module to identify WT transfer eligibility.

c. Regional Medical Commands (RMCs). Monitor submitted PMRs in TRAC2ES and provide feedback to STARTC personnel regarding eligibility NLT 48 hours of request of information.

d. WTU/CBWTU (Remote Care) commanders. Assure Command and Control (C2) and Medical Management (M2) coordination and communication between gaining and losing unit. Gaining unit must acknowledge report date of WT and be proactively involved in the warm handoff of the inbound Soldier and his Family.

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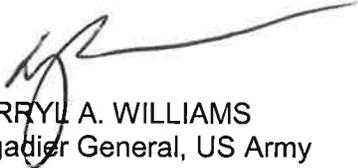
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e. WTU/CBWTU Triads of Care/Leadership assure compliance with eligibility criteria and associated checklists by utilizing a proactive approach to ensure a seamless handoff.

f. Medical Command (MEDCOM) STARTC. Coordinates, regulates and tracks all WT transfers. STARTC will request assistance from RMCs as necessary. Submitted Patient Movement Requests (PMR) will be resolved within three business days.

g. MEDCOM Human Resources (HR). In coordination with (ICW) STARTC, is responsible for publication of attachment orders for all COMPO 2 and 3 WTs in accordance with goal of moving Soldiers closest to home of record. Upon notification from STARTC orders will be published within three business days.

6. POC. Point of contact for this policy is the WTC G-1, at 703 602-7057.



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