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### **NATIONAL GUARD BUREAU**

### 111 SOUTH GEORGE MASON DRIVE ARLINGTON VA 22204-1373

ARNG-CSG 13 February 2023

### MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army National Guard (ARNG) Field Level Medical Maintenance Guidance

## 1. References:

- a. AR 40-61 (Medical Logistics Policies), 28 January 2005.
- b. AR 710-2 (Supply Policy Below The National Level), 28 March 2008.
- c. AR 735-5, (Property Accountability Policies), 9 November 2016.
- d. AR 750-1 (Army Materiel Maintenance Policy), 28 October 2019.
- e. HQDA EXORD 138-21 Global Combat Support System- Army (GCSS-Army) Integration.
- f. Supply Bulletin 8-75-S10, 2013
- g. Supply Bulletin 8-75-S6, 2014

Purpose: This memorandum is to provide guidance on medical equipment that require servicing and/or calibration for field level maintenance.

- 2. Background: As of 03 February 2023, National Guard Bureau (NGB) was notified by Army Medical Logistics Command (AMLC) that its Medical Materiel Operational Divisions (MMODs) will no longer provide field-level medical maintenance support. The shortage of full-time Biomedical Repair Specialist (68A) in the Army National Guard (ARNG) has resulted in the utilization of MMODs to perform all field-level maintenance. Historically, units have relied on the MMODs to service and calibrate all durable CL VIII equipment. ARNG has 10,562 Associated Support Items of Equipment (ASIOE) medical devices that require servicing on an annual basis. In light of the recent reduction in medical maintenance support, units must take necessary actions to ensure fielded medical ASIOE are Fully Mission Capable and available to meet operational readiness demands at a moments notice.
- 3. Way Forward:

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- a. Effective immediately, units will input their Medical Equipment Sets (MESs) with associated sub-components into GCSS-Army per HQDA EXORD 138-21, GCSS-Army Integration. States are required to report serviceability of these items in order to accurately depict the ARNG's medical equipment readiness rate. Failure to load MESs with associcated sub-components into GCSS-Army will negatively impact funding for field-level and sustainment-level medical equipment maintenance.
- b. States with qualified 68As will schedule and perform field-level maintenance IAW Reference g. See paragraph 1-15 (1) a through b.
- c. If units are unable to complete field-level medical maintenance organically due to a lack of resources (i.e., parts, tools, TMDE, facilities, training or time) or manning authorizations, States have the following options available to consider:
- 1) Utilize local Medical Treatment Facilities (MTFs) resources to conduct field-level medical equipment maintenance and ensure actions completed are reimbursable to the servicing MTFs.
- 2) Develop support agreement with USAMMA to project a schedule for field-level medical maintenance services. The following USAMMA POCs will be able to assist in this effort: Mr. Kevin Culihan at kevin.b.culihan.civ@army.mil or (301) 619-4383 and Mr. Joshua Varnes at joshua.l.varnes.civ@army.mil or (301) 619-2614. Additionally, Ms. Leigh Anne Alexander, Director of the Integrated Logistics Support Center (ILSC) at AMLC is available to work with states in developing Memorandums of Agreement that support future ARNG field-level medical maintenance requirements. She can be reached at leigh.a.alexander9.civ.army.mil or (301) 619-1296.
- 3) Develop local contracts with certified Biomedical Equipment Technician (BMETs) to support States with internal/regional medical maintenance services.

### 4. Point of contacts are:

- a. MAJ Michael Park, ARNG CSG Chief Medical Logistics Officer at 703-607-1360 or michael.park4.mil@army.mil.
- b. Chief Warrant Officer 4 Douglas Malone, ARNG G4 Ground Maintenance Policy Team Warrant Officer at 703-607-7665 or douglas.l.malone.mil@army.mil

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Encl HQDA EXORD 138-21

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