

Medical Actions (NGGA-PEM)

**Reserve
Component
Managed
Care Mobilization/
Training
(RCMC-M/T)**

Joint Force Headquarters
Georgia Army National
Guard
Marietta, GA
1 October 2025

SUMMARY of CHANGE

SOP

Reserve Component Managed Care Mobilization/Training (RCMC M/T)

- o. Adds RCMC documents PPOM # 19-039-Implementation Guidance for the Reserve Component Managed Care-Mobilization and Training, dated 4 September 2019. (Appendix A)**

Proposed changes, modifications, and/or deletions should be made known GAARNG G-1, HR Plans using DA Form 2028. Your feedback to provide a quality product is always welcome.

GAARNG G-1 Medical Actions Branch SOP, 1 October 2025

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Chapter 1

Overview

1-1 Purpose.

The purpose of this SOP is to describe the correct use of the Reserve Component Managed Care Mobilization/Training (RCMC M/T) program. It is designed to clearly define the process steps, eligibility, and mandated requirements for entry into the program.

1-2 Applicability.

- a. To be eligible for this program, a Soldier would have been in either an Active Duty (AD), Active-Duty Operational Support (ADOS), Annual Training (AT), Initial Active Duty (IADT), Inactive Duty for Training (IDT), Initial Entry Training (IET), or Reserve Component-Active Duty for Operation Support (RC-ADOS) status. The Soldier would have incurred a service-connected medical condition that has been determined to be In the Line of Duty (ILOD). Only Soldiers with low risk, low acuity conditions requiring medical care of more than 30 days, but less than 179 days are eligible to be placed on RCMC orders. However, behavioral health conditions, such as Post-Traumatic Stress Disorder (PTSD), and mild Traumatic Brain Injury (TBI) are potentially high risk, high acuity conditions, that are better managed through the Soldier Recovery Unit (SRU) and do not qualify for RCMC. Soldiers who have a P3 permanent profile do not qualify for RCMC.
- b. Medical condition(s) must prevent the Soldier from performing his or her Military Occupational Specialty (MOS), Area of Concentration (AOC), or at least one of the functional activities listed on the DA Form 3349, which all Soldiers must perform regardless of MOS or AOC.
- c. The condition(s) requires definitive care, and the Soldier must have a specific treatment plan of 30 days or more. The treatment plan must consist of two or more medical appointments per week and is expected to direct progress toward the Medical Retention Decision Point (MRDP) and either return the Soldier to duty or begin the Disability Evaluation System (DES) process.
- d. Soldiers will perform duties within the limitations of their profile and wear the appropriate duty uniform as directed. While on RCMC, Soldiers will not perform or attend Title 32 training or perform non-federal missions (such prohibited training and missions include Inactive Duty Training (IDT), Annual Training (AT), State Active Duty (SAD), Readiness Management Assemblies (RMA), Initial Active-Duty Training (IADT), and Full Time National Guard-Active-Duty Operational Support (FTNGD-ADOS).

1-3 Concept.

- a. Reserve Component Managed Care-Mobilization (RCMC-M). Soldiers who have an approved Line of Duty (LOD) while mobilized in support of a contingency operation and released from active duty, may request to return to Title 10 Active Duty for managed care utilizing RCMC-M orders (i.e., medical treatment or evaluations). The authority for this action is Title 10 USC, section 12301(h).
- b. Reserve Component Managed Care-Training (RCMC-T). Soldiers who have an approved LOD while participating in training (IET, IADT, IDT, AT, FTNGD-ADOS), and released from training, may request to return to active duty for managed care (i.e., medical treatment or evaluations). The authority for this action is Title 10 USC, section 12301(h).

Chapter 2

Process Steps.

- a. A Soldier who meets eligibility requirements may volunteer to request RCMC-M/T for continued medical care.
- b. The unit will verify that the Soldier has an approved LOD, updated physical profile (DA Form 3349), an e-Case file, a signed Authorization for Disclosure of Medical and Dental Information Form (DD Form 2870), and ensure that medical records are updated in the Soldier's Health Readiness Record (HRR).
- c. The Unit and Soldier, with the assistance of the Medical Readiness Non-Commissioned Officer (MRNCO), will complete a RCMC packet in accordance with the enclosed RCMC checklist.
- d. The MRNCO will coordinate with the RCMC Program Manager (PM) to submit the completed packet which must include an ILOD approval memo from Human Resources Command (HRC) or the National Guard Bureau (NGB). The PM will review the packet and confirm that medical documents have correct information pertaining to a treatment plan, prognosis, and a return to duty date.
- e. The PM will upload the packet into Active-Duty Order Process (ADOP) within the Electronic Medical Management Processing System (eMMPS) of Medical Electronic Data for Care History and Readiness Tracking (MEDCHART). Packets are usually processed within 15 days of submission to NGB.
- f. The PM will complete the required information in the Department of the Army Mobilization Processing System-Overseas Contingency Operations Individual Orders Application (DAMPS/OCOIND) module and forward the packet to the Deputy State Surgeon-Clinical (DSS-C) in ADOP and DAMPS. The DSS-C will review the medical documents and treatment plan, will concur or non-concur and forward the packet to The Adjutant General (TAG) or designee.
- g. The PM will track the progress of the packet in ADOP and DAMPS/OCOIND to ensure all actions are completed.
- h. TAG or designee will concur or non-concur eligibility and forward to the NGB G-1 for review. If corrections are required, NGB will send a request for information (RFI) memorandum to the PM for action. The PM will coordinate with the Soldier or the MRNCO to make corrections.
- i. Upon approval by NGB, orders will be generated by Human Resources Command (HRC) and forwarded to the PM. The MRNCO and unit representative will complete the required Integrated Personnel and Pay System-Army (IPPS-A) and Defense Enrollment Eligibility Reporting System (DEERS) actions.
- j. The RCMC program requires the Soldier be assigned to a unit within 50 miles of his/her HOR for duty reporting for the duration of the orders. The Soldier will perform duties only within the limits of the profile. A duty site supervisor will supervise the Soldier and will remain in contact with the RCMC PM during the orders period.
- k. While on orders, the Soldier is responsible for attending all medical appointments. Soldiers are required to attend two or more medical appointments per week to remain qualified for RCMC. While participating in the program, Soldiers are not authorized to perform their civilian employment, civilian education, or civilian training classes. If the Soldier fails to report for duty, fails to attend scheduled medical appointments, or violates any program requirements, they may be removed from the RCMC program according to NGB implementation guidance.
- l. In the event the Soldier needs to be extended on RCMC orders (not to exceed a total of 179 days), the Soldier must provide the PM with updated medical documents, an updated treatment plan, and an updated profile (DA Form 3349) at least 21 days prior to expiration. The RCMC extension packet must include an updated treatment plan and supporting medical documents. The PM will complete an RCMC extension request memorandum and submit the updated documents to NGB via the ADOP module. The PM will also update DAMPS to request an amendment to the original orders. Once the extension has been approved, orders will be generated and forwarded to the PM for submission to the Soldier and unit.
- m. The state DSS-C will process all profile extensions. All requests for profile extensions must be submitted to Medical Actions at least 14 days prior to expiration of the current profile.
- n. All leave accrued while on the RCMC orders are use or lose. Soldiers will take their accrued leave within the RCMC-M/T order date.
- o. If a Soldier requests to be removed from the RCMC program, the Soldier must complete a Memorandum of

Declination to withdraw. The PM will update DAMPS to request the termination of orders. NGB will terminate the RCMC orders releasing the Soldier from the program back to their parent unit.

p. Within 14 days of discharge from the program, the Soldier's S1 will generate an Active-Duty Report (DD Form 220) if the Soldier has been in the program for less than 90 days and a Certificate for Release or Discharge from Active Duty (DD Form 214) for 90 days or more.

q. Upon completion of orders, the Soldier will return to duty or if the Soldier has reached the MRDP, will be referred to the Integrated Disability Evaluation System (IDES).

Appendix A References

AR 600-8-4

Line of Duty Policy, Procedures, and Investigations, dated 12 November 2020

AR 600-8-10

Personnel-General Leaves and Passes, dated 3 June 2020

PPOM # 19-039

Implementation Guidance for the Reserve Component Managed Care-Mobilization and Training, dated 4 September 2019

RCMC-M/RCMC-T program Unit Cover Memo, OCT 2025

RCMC Referral Memo, OCT 2025

RCMC Validation Memo, OCT 2025

RCMC Extension Request, OCT 2025

RCMC Minimum Medical Requirements and Criteria, OCT 2025

RCMC-M/RCMC-T Statement of Medical Condition and Treatment Plan, OCT 2025

RCMC-M/RCMC-T Initial Application Checklist, OCT 2025

DA Form 4187

Personnel Action, dated DEC 2022

DA Form 5960

Basic Allowance for Housing (BAH) Authorization and Dependency Declaration, dated JAN 2022

Appendix C

Glossary

AD

Active Duty

ADME

Active-Duty Medical Evaluation

ADOP

Active-Duty Orders Process

ADOS

Active-Duty Operational Support

AT

Annual Training

DAMPS

Department of the Army Mobilization Processing System

DEERS

Defense Enrollment Eligibility Enrollment Reporting System

DES

Disability Evaluation System

eMMPS

Electronic Medical Management System

HRC

Human Resources Command

HRR

Health Readiness Record

IADT

Initial Active Duty

IDT

Inactive Duty for Training

IET

Initial Entry Training

IPPS-A

Integrated Personnel and Pay System-Army

LOD

Line of Duty

MRDP

Medical Retention Decision Point

MRNCO

Medical Readiness NCO

NGB

National Guard Bureau

Appendix C

Glossary

PM

Program Manager

PTSD

Post-Traumatic Stress Disorder

RC-ADOS

Reserve Component Active Duty for Operational Support

RCMC M/T

Reserve Component Managed Care Mobilization/Training

RCMC PM

Reserve Component Managed Care Program Manager

RFI

Request for Information

TBI

Traumatic Brain Injury

SRU

Soldier Recovery Unit