

UNITED STATES AIR FORCE BOARD FOR CORRECTION OF MILITARY RECORDS

RECORD OF PROCEEDINGS

IN THE MATTER OF:

DOCKET NUMBER: BC-2022-00781

Work-Product

COUNSEL: NONE

HEARING REQUESTED: YES

APPLICANT'S REQUEST

He receive retroactive Incentive Pay (IP) at the full rate of \$53,000 per annum from 1 Oct 20 to 28 Feb 22.

APPLICANT'S CONTENTIONS

He was paid as a resident during the period of 1 Oct 20 until 28 Feb 22. However, during this period he was eligible for otolaryngology staff pay (45N). The resident specialty pay is \$8,000 per year while the general otolaryngologist pay is \$53,000 per year. He graduated from his military residency training in June 2020 at Work-Prod... Army Medical Center during the pandemic, when most non-essential staff were sent home, including his program coordinator and many of the residency program support staff. During the last few months of his residency, he had little direct contact with the support staff that usually assist in the transition from residency to attending duty. In July 2020, he completed his permanent change of station (PCS) to Work-Product for his first post-residency assignment. He was quarantined for two weeks and completed many of his in-processing tasks, including financial briefings in the form of e-mailed PowerPoints. His first PCS to an outside the continental United States location on its own was challenging but under the difficulties and confusion everything was intensified. He reviewed the medial specialty pay PowerPoint and, at that time, was not board certified. As a new staff physician, he did not complete the IP contract request form due to his misunderstanding of the timeline for payment increases and the documentation required. In addition, he spent a year trying to settle reimbursements with the finance office because he was unable to find a military pay specialist who was familiar with medical specialty pay. He was alerted in Feb 2022 that his IP was still as a resident and not staff otolaryngology physician when he submitted his board certified Pay contract. He had very little face-to-face guidance on many aspects of his first PCS and transition out of training, as many offices were closed or only remotely accessible. It is his belief that had things been different, he may have experienced better access to support personnel for guidance during such an overwhelming process as a new graduate.

He has worked as hard as any surgeon at <u>Work-Product</u> and has been paid significantly less than his counterparts. Specifically, he fully committed to the care of patients through the height of the pandemic, cared for casualties from Operation ALLIES REFUGE, performed complex trauma and cancer surgeries, and partook in multidisciplinary conferences. This is only highlighted to express his dedication to his career and the military population. He hopes that this unfortunate situation is understood, the military supports him through this challenging circumstance, and he receives the proper reimbursement.

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Controlled by: SAF/MRB

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Limited Dissemination Control: N/A

POC: SAF.MRBC.Workflow@us.af.mil

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In support of his appeal, the applicant provides memoranda from his chain of command supporting his request for retroactive IP pay at the full rate.

The applicant's complete submission is at Exhibit A.

STATEMENT OF FACTS

The applicant is a currently serving Air Force Medical Corps major (0-4).

On 1 Jan 18, according to AFPC/DP2N, the applicant began receiving IP in the amount of \$8,000 annually in equal monthly installments.

On 29 Jul 20, according to Military Personnel Database System (MilPDS) Officer Personnel Brief, he arrived at OCONUS duty location in accordance with Special Order No: Work-Product Request and Authorization for Permanent Change of Station-Military., dated 14 Jul 20.

On 1 Mar 22, according to his FY22 Consolidation of Special Pays (CSP) Incentive Pay (IP) Contract Request (Non-GMO, he began receiving IP in the amount of \$53,000 annually in equal monthly installments.

For more information, see the excerpt of the applicant's record at Exhibit B and the advisory at Exhibit C.

APPLICABLE AUTHORITY/GUIDANCE

According to *United States Air Force Fiscal Year 2021 Medical Corps Consolidated Special Pay Plan (CSP)*:

- All CSP pay types require a contract to initiate pay.
- Each officer is responsible for requesting/monitoring his/her Medical Special Pays and obligations.
- Residency Trained Physicians. Once an IP-only contract is processed, the IP will continue to be paid monthly until a renegotiated contract (IP/RB or higher rate IP) is submitted/processed.
- Contracts may be effective as early as the first day of the month in which the officer signed the contract (no backdating to the previous month or further).

AIR FORCE EVALUATION

AFPC/DP2N recommends denying the application. Based upon the analysis of the facts, there is no evidence of an error or injustice on the part of the government. All Consolidated Special Pay (CSP) types require a contract to initiate pay and members must submit a new IP contract to receive the higher rate. On 1 Jan 18, the applicant started receiving the Medical Special Pay (MSP) IP resident rate of \$8,000/annually. On 1 Oct 20, the applicant became eligible for the full IP rate of \$53,000/annually; however, he did not submit an IP-only contract. At the time he submitted his contract to receive his board certification pay (BCP), he was still receiving the IP resident rate of \$8,000. On 29 Mar 22, the applicant submitted the IP-only contract and started receiving IP for \$53,000/annually, effective 1 Mar 22.

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Moreover, it is the member's responsibility to submit contracts on time, to read the Medical Corps Special Pay Plan, and ask questions if they are unsure about their contract. Additionally, 37 USC 335, contains no retroactive language to allow for backdating/retroactive special pay. The complete advisory opinion is at Exhibit C.

APPLICANT'S REVIEW OF AIR FORCE EVALUATION

The Board sent a copy of the advisory opinion to the applicant on 29 Apr 22 for comment (Exhibit D), and the applicant replied on 2 May 22. In his response, the applicant reiterated the paperwork process was unclear and the availability of support staff was limited. His request is for the Board to take these facts into consideration, review all the material submitted, and determine he worked hard to contribute to the progress of the military and support of service members through his position. He has proudly served in the military since 2010 and does not want to feel like the military is not willing to assist a service member due to a paperwork error that was committed in such a unique global health environment. He put the military near the top of is priority list; however, he is now prioritizing his family by advocating for this reimbursement. He asks the Board to look past the rigidity of the denial recommendation and see his case as a manifestation of the human challenges of navigating a significant life transition in an unprecedented global health crisis. He further acknowledges this is not a legal decision for the Board, but rather an ethical, practical, and human decision.

The applicant's complete response is at Exhibit E.

FINDINGS AND CONCLUSION

- 1. The application was timely filed.
- 2. The applicant exhausted all available non-judicial relief before applying to the Board.
- 3. After reviewing all Exhibits, the Board majority concludes the applicant is not the victim of an error or injustice and concurs with the rationale and recommendation of AFPC/DP2N. While the applicant's contentions were noted and his circumstances may have been challenging, the applicant has presented no evidence of an error on the part of the Air Force. It was further noted that it is the applicant's responsibility to apply for Incentive Pay and submit a timely contract. While the applicant contends navigating through the medical pay process was challenging amidst the unprecedented global health crisis, he has not presented any evidence that he was treated any differently than those similarly situated. Therefore, in the absence of such evidence, the Board majority finds no compelling basis to recommend granting the relief sought in this application.
- 4. The applicant has not shown a personal appearance, with or without counsel, would materially add to the Board's understanding of the issues involved.

RECOMMENDATION

The Board majority recommends informing the applicant the evidence did not demonstrate material error or injustice, and the Board will reconsider the application only upon receipt of relevant evidence not already presented.

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CERTIFICATION

The following quorum of the Board, as defined in Air Force Instruction (AFI) 36-2603, *Air Force Board for Correction of Military Records (AFBCMR)*, paragraph 1.5, considered Docket Number BC-2022-00781 in Executive Session on 31 May 22:



A majority of the panel voted against correcting the record. Work-Product voted to correct the record but did not provide a minority opinion. The panel considered the following:

Exhibit A: Application, DD Form 149, w/atchs, dated 16 Mar 22.

Exhibit B: Documentary evidence, including relevant excerpts from official records.

Exhibit C: Advisory Opinion, AFPC/DP2N, w/atchs, dated 26 Apr 22.

Exhibit D: Notification of Advisory, SAF/MRBC to Applicant, dated 29 Apr 22.

Exhibit E: Applicant's Response, dated 2 May 22.

Taken together with all Exhibits, this document constitutes the true and complete Record of Proceedings, as required by AFI 36-2603, paragraph 4.11.9.

