

ARMY BOARD FOR CORRECTION OF MILITARY RECORDS

RECORD OF PROCEEDINGS

IN THE CASE OF: [REDACTED]

BOARD DATE: 6 August 2024

DOCKET NUMBER: AR20230002647

APPLICANT REQUESTS: retroactive Health Professions Officer Board Certification Pay (HPOBCP) pay from 1 April 2017 to 30 September 2022.

APPLICANT'S SUPPORTING DOCUMENT(S) CONSIDERED BY THE BOARD:

- DD Form 149 (Application for Correction of Military Record)
- Orthopedic Physical Therapy Certification, 18 May 2015
- Leave and Earning Statements (LES), 1-31 January 2017, 1-28 February 2017, and 1-31 March 2017
- Army Medical Department (AMEDD) Special Pay History Report, 8 February 2023

FACTS:

1. The applicant did not file within the 3-year time frame provided in Title 10, U.S. Code, section 1552(b); however, the Army Board for Correction of Military Records (ABCMR) conducted a substantive review of this case and determined it is in the interest of justice to excuse the applicant's failure to timely file.
2. The applicant states she has maintained her specialty board certification, license, and service in good standing; however, her HPOBCP was discontinued. Her spouse handles all finances in the household, but he overlooked the change in pay until she discovered this error on 18 January 2023, and has now exhausted all local administrative remedies. She is authorized the amount of \$2,000 annual HPOBCP from 18 May 2015 to 20 June 2025. She previously received HPOBCP monthly installments of \$166 from 18 May 2015 to 31 March 2017. She is now requesting \$6,000 in annual HPOBCP pay from 1 April 2017 to 30 September 2022. Her failure to correct this error in a timely manner was not done intentionally, and relief of her request would demonstrate the Board's commitment to the Army's values.
3. A review of the applicant's service record shows:
 - a. On 25 May 2007, she was appointed as a Reserve commissioned officer and she entered active duty on 19 September 2007.

b. On 18 May 2015, she was granted certification as a board certified specialist in orthopedic physical therapy.

4. On 15 July 2024, the Department of the Army Office of the Surgeon General, Chief, Special Pay Branch, provided an advisory opinion.

a. It has been determined the officer was not eligible for the requested period from 1 April 2017 to 30 September 2022 due to the termination of the legacy plan and requirement of the officer to initiate a new HPOBCP agreement under the guidance of the new pay plan. The officer's failure to initiate this agreement rendered her ineligible.

b. The officer is eligible to receive \$28,033.33:

- \$33.33 for the period 29 January 2018 to 30 January 2018
- \$5,500 for the period 1 February 2018 to 31 December 2018
- \$6,000 for the period 1 January 2019 to 31 December 2019
- \$6,000 for the period 1 January 2020 to 31 December 2020
- \$6,000 for the period 1 January 2021 to 31 December 2021
- \$4,500 for the period 1 January 2022 to 30 September 2022

c. The Defense Finance and Accounting Service (DFAS) determines the exact arrears payment.

5. On 30 July 2024, the applicant was provided with a copy of the advisory opinion for an opportunity to respond. On 31 July 2024, she responded.

a. In 2017, her family moved to Lexington, KY to complete a PhD she was selected for. The unit she was assigned managed hundreds of officers completing the programs. She attempted to resolve the HPO BCP issue with her assigned manager. She contends that although the contract was not signed, it was at no fault of her own.

b. She provides email communication with her assigned manager on 8 September 2017 indicating she believed she needed to initiate a new contract.

BOARD DISCUSSION:

After reviewing the application, all supporting documents, and the evidence found within the military record, the Board found that partial relief was not warranted. The applicant's contentions, the military record, and regulatory guidance were carefully considered. According to the Office of The Surgeon General, Special Pay Branch, the applicant was not eligible for the requested period from 1 April 2017 to 30 September 2022 due to the termination of the legacy plan and requirement of the officer to initiate a new HPO BCP agreement under the guidance of the new pay plan. The officer's failure to initiate this

agreement rendered her ineligible. However, the applicant is eligible to receive \$6,000/year of HPO BCP from 29 January 2018 to 30 September 2022.

BOARD VOTE:

Mbr 1 Mbr 2 Mbr 3

: : : GRANT FULL RELIEF

█ █ █ GRANT PARTIAL RELIEF

: : : GRANT FORMAL HEARING

: : : DENY APPLICATION

BOARD DETERMINATION/RECOMMENDATION:

1. The Board determined the evidence presented is sufficient to warrant a recommendation for partial relief. As a result, the Board recommends that all Department of the Army records of the individual concerned be corrected by:

- showing the Health Profession Officer (HPO)/Applicant submitted timely request for HPO Board Certification Pay (BCP) for the period 29 January 2018 to 30 September 2022
- showing the HPO’s request was approved by the appropriate office and paying the applicant HPO BCP at the appropriate rate, during the same period, as a result of this correction

2. The Board further determined the evidence presented is insufficient to warrant a portion of the requested relief. As a result, the Board recommends denial of so much of the application that pertains to any relief in excess of that described above.

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I certify that herein is recorded the true and complete record of the proceedings of the Army Board for Correction of Military Records in this case.

REFERENCES:

1. Title 10, U.S. Code, section 1552(b), provides that applications for correction of military records must be filed within 3 years after discovery of the alleged error or injustice. This provision of law also allows the ABCMR to excuse an applicant's failure to timely file within the 3-year statute of limitations if the ABCMR determines it would be in the interest of justice to do so.

2. Title 37 United States Code (USC) (Special Bonus and Incentive Pay for Officers in Health Professions), section 335 states the Secretary concerned may pay HPO BCP under this section to an officer in a Regular or Reserve component of a uniformed service who is entitled to basic pay under section 204 of this title or compensation under section 206 of this title; and is serving on active duty in a designated health profession specialty or skill. To receive a bonus under this section, an officer determined to be eligible for the bonus shall enter into a written agreement with the Secretary concerned that specifies, the amount of the bonus; the method of payment of the bonus under subsection (e)(2) (lump sum or installments); the period of obligated service; whether the service will be performed on active duty in an active status in or in a Reserve Component. HPO BCP under subsection (c) may not exceed \$6,000.00 for each 12-month period an officer remains certified in the designated health profession specialty or skill. Requests for discretionary category of HPOBCP are initiated by the officer through their command's supporting personnel office. If board certification renewals are issued, they must also be submitted to ensure HPOBCP continues uninterrupted. Receipt of monthly HPOBCP can be verified by the officer by reviewing their monthly leave and earnings statement entitlements column.

3. Department of Defense 7000.14-R (Financial Management Regulation) provides that to be eligible for Board Certification Pay (BCP) payable at a rate of \$6,000.00 annually (prorated monthly), Health Professions Officers must:

- meet the eligibility criteria itemized in paragraph 050204
- be serving in an Active Component or an RC of a Military Service and entitled to basic pay under Title 37, USC, section 204, or compensation pursuant to Title 37, USC, Section 206
- be serving on active duty or in an active Reserve status in a designated health professional clinical specialty
- have a post-baccalaureate degree in a clinical specialty (a post Master's certificate acceptable to the Secretary concerned can satisfy this requirement)
- be certified by a professional board in a designated health profession clinical specialty

//NOTHING FOLLOWS//