



CCI 511.01
EFFECTIVE DATE: 19 January 2021

By Order of the Assistant Secretary for Health:

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SUBJECT: Awards Program

1. PURPOSE:

- 1-1. This Instruction prescribes the awards established under the Public Health Service (PHS) Commissioned Officers' Awards Program (COAP). It also prescribes the authorities and responsibilities for administering this program.
- 1-2. COAP provides a means to give formal recognition to deserving officers in the Commissioned Corps of the U.S. Public Health Service (Corps) and to members of the other uniformed services whose accomplishments or achievements are of outstanding or unique significance to the missions of the Corps, or to the Department of Health and Human Services (HHS) and non-HHS organizations to which Corps officers are detailed. The COAP normally is limited to accomplishments or achievements that are within the scope of an officer's employment with the Corps; however, PHS may recognize extraordinary acts of heroism and valor outside an officer's employment with the Corps through the COAP. This includes official activities sanctioned by SG-appointed groups according to their respective charters.
- 1-3. COAP is a criteria-based process designed to recognize documented accomplishments and achievements. It is not intended to convey any impression of officers competing with each other for recognition. There are neither minimum nor maximum numbers of nominations that may be submitted by HHS Operating Divisions (OPDIVs)/Staff Divisions (STAFFDIVs), or non-HHS organizations to which Corps officers are detailed, and the Corps assesses each award nomination on its own merits in comparison with criteria.

Note: This Instruction does not apply to the awarding of the following:

- a. For the Assistant Secretary for Health's Exceptional Service Medallion (ASHM), the Assistant Secretary for Health's Exceptional Service Medal (ASHESM), the Surgeon General's Medallion (SGM) or the Surgeon General's Exemplary Service Medal (SGESM), there is no nomination or review procedure, other than an internal review by the Office of the Assistant Secretary for Health (ASH) and/or the Office of the Surgeon General (SG), as the ASH and the SG retain the sole discretion for conferring awards bearing their respective titles.
- b. Awards granted by the other Federal uniformed services. Corps officers remain eligible for these awards through the prescribed policies and procedures of the

respective services, and may wear such awards on the uniform (see Commissioned Corps Instruction (CCI) [511.02](#), "Award of Military Decorations," and [CCI 512.01](#), "Wear of Awards and Badges");

- c. Awards issued by non-HHS organizations to which Corps officers are detailed that have been, or may in the future be, authorized by the ASH for wear on the Corps uniform (see CCI 512.01, "Wear of Awards and Badges"); and
- d. Awards approved and authorized directly by the Secretary or Deputy Secretary in recognition of classified national security performance.

2. APPLICABILITY:

- 2-1. COAP applies to all members of the Regular Corps and the Ready Reserve Corps.
- 2-2. Officers called to active duty in the Commissioned Officer Student Training and Extern Program (COSTEP) may receive awards for achievements that occur during their tours of active duty.
- 2-3. Retired officers may receive awards for achievements that occur during their tours of active duty. Retired officers are also eligible for the Associate Recruiter Badge if they meet the program requirements set forth in [CCI 373.01](#), "Associate Recruiter Program."
- 2-4. Consistent with the policies and procedures of their respective services, members of other uniformed services (officers or enlisted personnel) may receive Corps awards for documented contributions to the missions of the Department, the Corps, or non-HHS organizations to which Corps officers are detailed.
- 2-5. This Instruction does not apply to awards approved by the Secretary of HHS nor the ASH who have retained their authorities to approve awards outside the review and approval process prescribed in this Instruction.

3. AUTHORITY: The Secretary of HHS has delegated the authority necessary to administer the Corps to the ASH (See memorandum dated 24 July 2003 and Statements of Organizations, Functions, and Delegations of Authority dated 18 December 2003, [68 FR 70507](#)). The SG is responsible for the day-to-day management of Corps operations, force readiness, and field command of deployments. The ASH has delegated the authority for daily administration of the Corps' personnel system to the Director, Commissioned Corps Headquarters (CCHQ).

- 3-1. The ASH has delegated to the SG the authority to:
 - a. Approve, without further re-delegation, the award of the:
 - (1) Distinguished Service Medal (DSM)
 - (2) Meritorious Service Medal (MSM)
 - (3) Surgeon General's Medallion (SGM)
 - (4) Surgeon General's Exemplary Service Medal (SGESM)
 - (5) Outstanding Unit Citation (OUC)
 - (6) Any award or decoration awarded under conditions of "With Valor"

- b. Approve, without further re-delegation, the specific event or activity for the awarding of campaign medals or service awards related to any deployment, response operation, or activation of the Corps. Approval of the campaign medal is limited to those initiatives that are declared as an urgent or emergency public health care need by the President or Secretary, and are international campaigns that are aimed at mitigating specific health or humanitarian crisis, eradicating or reducing spread of diseases, or significantly improving the health and well-being of a targeted population.
 - c. Approve, without further re-delegation, the Outstanding Service Medal (OSM), Commendation Medal (CM), Achievement Medal (AM), PHS Citation (CIT), and Unit Commendation (UC) under the following circumstances:
 - (1) Nominations when there may be a potential conflict of interest for the delegated authority to approve the award.
 - (2) Nominations for officers who are assigned to an organization where the approval authority is not clear.
 - (3) Nominations from within the Office of the Surgeon General (OSG), including awards submitted by a Chief Professional Officer (CPO) for officers whose achievements are related to professional category activities conducted under a recognized CPO function.
 - (4) Nominations for officers detailed to an organization that does not have delegated approval authority.
 - (5) When a timely decision to approve or disapprove a nomination is not made within an OPDIV/STAFFDIV or non-HHS organization within established timeframes (Section 8-3.).
 - d. Approve the AM and CIT during designated events that are eligible for the Crisis Response Service Award (CRSA), Global Response Service Award (GRSA), and Response Service Award (RSA). With the approval of the ASH, this authority may be re-delegated to Team Commanders of deployed forces in deployment and response circumstances, but re-delegation below this level cannot be authorized.
 - e. Present, without further re-delegation, except to the Deputy Surgeon General (DSG), the DSM, SGM, and SGESM.
- 3-2. The ASH has delegated certain authorities under the COAP:
- a. To the following officials:
 - (1) Heads of HHS OPDIVs;
 - (2) Principal Deputy Assistant Secretary for Health, Office of the Secretary (OS), HHS, as executive agent for OS;
 - (3) Assistant Secretary for Preparedness and Response (ASPR), OS, HHS;
 - (4) Administrator, Environmental Protection Agency (EPA) for EPA Regional Offices, and Assistant Administrators, EPA;
 - (5) Director, National Oceanic and Atmospheric Administration (NOAA);

- (6) Assistant Director/Medical Director, Health Services Division, Bureau of Prisons (BOP);
 - (7) Director, United States Marshals Service (USMS); and
 - (8) Other officials in charge of non-HHS organizations to which Corps officers are detailed under a long-term blanket Memorandum of Understanding (MOU) for the detail of officers where the MOU identifies the position that is granted award authorities.
 - b. The above officials in Section 3-2.a. have the delegated authority to:
 - (1) Approve the OSM, CM and UC, without authority to re-delegate;
 - (2) Approve the AM and CIT with the authority to re-delegate to Center, Institute, Bureau, Area Directors, or equivalent. Re-delegation below this level is not authorized. All delegated authorities will be documented in writing and provided to CCHQ.
 - (3) Present the MSM, OSM, and OUC with authority to re-delegate to Center/Institute/Bureau/Area Directors or equivalent level without further re-delegation; and
 - (4) Present the CM, AM, CIT, and UC with authority to re-delegate to the appropriate level within the OPDIV/STAFFDIV or non-HHS organization to which Corps officers are assigned.
 - c. The ASH may delegate certain specific limited authority to other officials on an event-by-event basis.
- 3-3. The SG has the authority to approve all Service awards and campaign medals. The SG may re-delegate these authorities, without further delegation authorized, to the Director, CCHQ.
- 3-4. The Director, CCHQ, has the authority to authorize the wearing of awards from other uniformed services, as specified in [CCI 511.02](#), "Award of Military Decorations."
4. PROPONENT: The proponent of this Instruction is the ASH. The responsibility for ensuring the day-to-day management of the Corps belongs to the SG.
5. SUMMARY OF REVISIONS AND UPDATES: This Instruction replaces Commissioned Corps Instruction (CCI) 511.01, "Awards Program," dated 28 July 2020. This version:
 - 5-1. Authorizes the Presidential Unit Citation (PUC) for the USPHS Commissioned Corps' response to the COVID-19 pandemic.

6. POLICY:

6-1. Individual Honor Awards.

a. General.

(1) There are six individual honor awards for which Corps officers may be nominated: DSM, MSM, OSM, CM, AM, and CIT. There are four additional awards for which there is no nomination process: ASHM, ASHESM, SGM, and SGESM. There is no progression or order in which an officer must receive these awards. Rather, the individual award criterion determines the appropriate level of an award, in conjunction with the following:

(a) Scope of Impact. The scope of the achievement's impact on the mission of the Corps at the international, national, regional, HHS OPDIV/STAFFDIV, non-HHS organization to which Corps Officers are assigned, or local level (e.g., Center/Institute, Division, Immediate Office).

(b) Level of Achievement. The extent to which the achievement is above and beyond that normally expected of an officer in the nominee's grade or position. This encompasses the complexity of the achievement and degree of innovation and specialized or unique skill required.

(c) Leadership. The degree of demonstrated initiative and/or level of the program managed or directed.

(d) Length of Time. The time period covered by the award nomination.

(2) The DSM, MSM, and OSM may also be awarded "With Valor," with a bronze "V" for recognizing acts of courage and bravery. The designation "With Valor" is not to be used to recognize hazardous assignments or exposure to dangerous and life threatening environments. The officer must exhibit a positive and particular act, or actions, of bravery and courage, and/or heroism, resulting in the saving or preserving of the life or health of others. The degrees of risk to personal safety, the level of bravery, and the demonstration of courage, are determining factors that must be clearly displayed.

(3) The examples given in the criteria for the individual awards are illustrative only, and are meant to be construed broadly as general guidance.

b. Distinguished Service Medal (DSM). This is the highest award granted to a Corps officer. The Corps presents this award in recognition of an exceedingly high level of achievement by an officer who possesses a genuine sense of public service and who has made exceptional contributions to the mission of the Corps. Such achievements must result in a major impact on Global and/or National health. The award can also be conferred for an act of heroism resulting in the saving of life or the protection of health.

c. Meritorious Service Medal (MSM). This award is the second highest recognition granted to Corps officers for outstanding or meritorious levels of achievement. The Corps presents this award in recognition of: (1) meritorious service of a single, particularly important achievement; (2) a career notable for significant

accomplishments in technical or professional fields; or (3) unusually high quality and initiative in leadership. The levels of accomplishment meriting this award may include a highly significant achievement in research, program direction, or program administration; a series of significant contributions; a continuing period of meritorious service; or an exhibition of great courage and heroics in an emergency.

- d. Assistant Secretary for Health's Exceptional Service Medallion (ASHM). The ASHM is awarded at the sole discretion of the ASH to a member of any uniformed service or a civilian for exceptional contributions to initiatives of the ASH. As the award is bestowed at the discretion of the ASH, there is no nomination procedure. The OASH administers this award.
- e. Assistant Secretary for Health's Exceptional Service Medal (ASHESM). The ASH ESM is awarded at the sole discretion of an ASH who serves in uniform to a member of any uniformed service for the highest level of contribution to initiatives of the ASH. As the award is bestowed at the discretion of an ASH who serves in uniform, there is no nomination procedure. The OASH administers this award.
- f. Surgeon General's Medallion (SGM). The SG awards the SGM at his/her sole discretion to a member of any uniformed service or a civilian for the highest level of contribution to initiatives of the SG. As the award is bestowed at the discretion of the SG, there is no nomination procedure. The OSG administers this award.
- g. Surgeon General's Exemplary Service Medal (SGESM). The SG awards the SGESM at his/her sole discretion, for exemplary contributions of a member of any uniformed service to initiatives of the SG. As the award is bestowed at the discretion of the SG, there is no nomination procedure. The OSG administers this award.
- h. Outstanding Service Medal (OSM). The Corps grants the OSM to an officer who has demonstrated continuous outstanding leadership in carrying out the mission of the Corps, performed a single accomplishment that has had a major effect on the health of the Nation, or has performed a heroic act resulting in the preservation of life or health.
- i. Commendation Medal (CM). The Corps grants the CM to an officer who has exhibited a level of proficiency and dedication distinctly greater than that expected of an officer. The CM recognizes: (1) sustained high quality achievements in scientific, managerial, or other professional fields; (2) application of unique skill or creative imagination to the approach or solution of problems; or (3) noteworthy technical and professional contributions that are significant to a limited area.
- j. Achievement Medal (AM). PHS grants the AM to an officer for superior efforts or outcomes in accomplishing a program's mission. This could include recognition of the advancement of program objectives, sustained above-average accomplishment, or superior dedication to duty over a relatively short period of time.
- k. PHS Citation (CIT). The Corps grants the CIT to an officer in recognition of a specific and noteworthy achievement, generally for a short period of time. This could include contributions toward accomplishing a program objective or high quality achievement, but at a lesser level than is required for the AM.

6-2. Unit Honor Awards.

a. General.

- (1) The Corps grants unit awards typically for specific actions over a relatively short and defined period of time, marked by discrete beginning and ending dates. The determinants of the appropriate level of recognition are the importance and significance of the actions in furthering the mission of the Corps and the extent to which the achievement exceeds that which is normally expected of such officers.
- (2) Officers receive a unit award because of their collective contributions to the cited action(s) of the unit. Although all officers in the unit are eligible to receive the award, the appropriateness of inclusion of each officer should be considered individually by the nominator and at the initial review levels. However, the nomination does not need to cite the specific role of each officer unless it is a useful clarification that strengthens the total nomination package.
- (3) The Corps can grant an Individual Honor Award to an officer who has demonstrated a level of accomplishment that significantly exceeds the efforts of other members of the unit. However, the individual honor award nomination must specify and clarify the unique achievements.
- (4) The Corps may recognize an officer who is a member of a unit that also includes civilians with either the Outstanding Unit Citation (OUC) or the Unit Commendation (UC), as appropriate. While civilian members of the unit will be recognized through the civilian awards system, the civilian members will be listed on the award nomination.

b. Presidential Unit Citation (PUC). The POTUS directly awards the PUC to a group of officers for accomplishments and achievements deemed to be of the highest level and importance, in national or international arenas, to protecting, promoting, and advancing the health and safety of the citizens of the United States of America. There is no nomination procedure for the PUC.

- (1) All PHS Corps officers who served satisfactorily on active duty for any period between 9 September 2014, and 1 May 2015, qualify for the PUC that was awarded for the Corps' Ebola response efforts.
- (2) All PHS officers who served satisfactorily on active duty for any period between 31 January 2020 and the end date of the Public Health Emergency declaration for Coronavirus Disease 2019 (COVID-19) qualify for the PUC that is awarded for the USPHS Commissioned Corps' highest-level of performance of duty in protecting, promoting, and advancing the health and safety of the nation during the COVID-19 pandemic.
- (3) The USPHS Commissioned Corps will award a gold frame device, in lieu of a second award, to all eligible officers who previously qualified for the PUC awarded for the USPHS Commissioned Corps' Ebola response efforts.

c. Outstanding Unit Citation (OUC). The Corps grants the OUC to a group of officers who exhibit outstanding contributions toward achieving the goals and objectives of

the Corps. To merit this award, the unit must have provided outstanding service, often of national significance.

- d. Unit Commendation (UC). The Corps grants the UC to acknowledge significant contributions and achievements well above that normally expected in accomplishing the goals and objectives of the OPDIV/STAFFDIV or non-HHS organizations to which Corps officers are detailed. To merit this award, rather than the OUC, the unit's accomplishment would be at a lesser level than that required for the OUC, often at the State or regional level of significance.

6-3. Service Awards.

- a. General. The Corps grants service awards in recognition of a specific type of service, activity, and/or for service during a specific time period.
- b. Hazardous Duty Award (HDA).
 - (1) An officer who served in a position requiring frequent and significant risk to his/her safety, qualifies for this award. For full-time assignments, this requires a minimum of 180 consecutive days exposure to the risk factors.
 - (2) Additionally, the Director, CCHQ, may consider other assignments for this award on a case-by-case basis if the assignment exposes the officer to sufficient risk to his/her safety. Assignments associated with the treatment of Hansen's disease or assignments where the professional knowledge of the officer should significantly reduce or remove the risk do not qualify an officer to receive this award.
 - (3) The officer's supervisor must certify that the officer has met the designated criterion before forwarding the award nomination through appropriate channels for submission to CCHQ. An officer qualifies only once for a particular type of duty. Specific duty assignments that qualify for the HDA include the following:
 - (a) Frequent Light Aircraft Flights. An officer completing 8 round trips or 16 duty site destinations qualifies for this award. One round trip is considered 2 duty site destinations. As an additional example, a circuit trip, visiting 3 sites, and requiring a fourth leg to return home, would count as 4 duty site destinations. A light aircraft is defined as an airplane or helicopter that seats 10 or fewer passengers;
 - (b) Contact with inmates and/or detainees. An officer completing 180 consecutive days of full-time contact hours with inmates and/or detainees qualifies for the HDA. An officer not assigned to full-time contact with inmates and/or detainees (such as officers who occupy Central Office or Regional Office positions), but who serves a total of at least 1,000 non full-time duty contact hours (portal to portal), also qualifies. Each of the specific assignments that qualify for the HDA include: the BOP, Forensic Hospital at St. Elizabeth's, Immigration and Customs Enforcement (ICE), and USMS.
 - (c) Industrial Hygiene Surveys of Mine Sites. An officer completing a total of at least 200 non full-time exposure hours while conducting mine site surveys qualifies for the HDA.

- (d) Hazardous Duty/Imminent Danger Pay. An officer who receives hazardous duty pay or imminent danger pay qualifies for the HDA.
 - (e) Dive Certification. An officer who completes and maintains certified diver training as required for their agency and receives dive pay for 180 consecutive days qualifies for the HDA.
- c. Foreign Duty Award (FDA).
- (1) An officer who has served outside the United States at least 30 consecutive days or 90 non-consecutive days in a foreign duty station while on temporary or permanent assignment (other than while in training), qualifies for the FDA. Any period of 30 or more consecutive days is not included in the computation of the 90 non-consecutive days.
 - (2) Qualification for this award does not include service in any State of the United States. As defined in [42 U.S.C. §201](#), the term "State" includes the 50 States and the District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, American Samoa, and all other areas formerly encompassed in the Trust Territories of the Pacific Islands.
 - (3) An officer may qualify for one FDA for each tour of 30 or more consecutive days provided the officer returns to the United States (as defined in Section 6-3. c.(2)) for a minimum of 30 days, at the conclusion of a Temporary Duty or Permanent Change of Station (PCS) assignment between different overseas tours.
 - (4) An officer assigned to a specific ship for 30 or more consecutive days only (not eligible for 90 non-consecutive days) that transits through international waters with stops in international ports, qualifies for the FDA.
 - (5) Each period of consecutive days in a foreign assignment/duty station is considered as a unit and "extra" days are not used in calculating the number of days for a subsequent FDA.
- d. Special Assignment Award (SAA).
- (1) An officer detailed via official personnel orders (as set forth in [CCI 323.01](#), [CCI 323.02](#) or [CCI 323.03](#)), for a minimum of 30 consecutive days to a special program initiative of a Federal or State Agency, or to other organizations, qualifies for the SAA. An assignment effected via memorandum or other official mechanism as set forth in the above Instructions is eligible, unless the assignment is a routine function of the officer's position or is specifically included in the officer's position description. Qualifying periods do not include the following:
 - (a) Assignments or activities between components of HHS, or details to organizations with which the Corps has a "blanket" detail agreement; or
 - (b) Assignments or details, for the purpose of training the officer.
 - (2) Officers on assignments of 30 or more non-consecutive days may qualify for the SAA. In addition to the criteria and restrictions stated in

Section 6-3.d. the non-consecutive assignment must be in the same organizational entity, and must be a part of an ongoing activity with a clearly defined objective.

- (3) Assignments to special initiatives or activities of the Secretary, ASH, and/or SG qualify for this award; this includes the role of the Chief Professional Officer and organizations or entities which are chartered by the SG. Membership on a subcommittee or subgroup of those organizations or entities does not qualify for the SAA. The SG validates special initiatives and activities, as well as required timeframes, under this paragraph.
- e. Isolated/Hardship Award (ISOHAR).
- (1) An officer who has served a minimum of 180 consecutive days in an area designated as isolated, remote, insular, or constituting a hardship duty assignment, qualifies for the ISOHAR. Appendix A lists currently qualified sites.
 - (2) An officer qualifies for an ISOHAR for service at the same designated site for each separate tour of a minimum of 180 consecutive days under a PCS order. Tours must have at least one intervening PCS, of at least 180 consecutive days at a separate duty station.
 - (3) In addition to the locations listed in Appendix A, officers who are paid Hardship Duty Pay for 180 consecutive days while OCONUS, are qualified for an ISOHAR award.
 - (4) An officer permanently assigned to a ship classified as "Unusually Arduous Sea Duty (UASD)," i.e., absence from its home port for at least 180 consecutive days, qualifies for the ISOHAR.
 - (5) The SG, or if Service award approval is delegated, the Director, CCHQ, may consider other assignments for this award on a case-by-case basis if the assignment meets the minimum 180 consecutive day requirement. Examples of such assignments may include unaccompanied tours and receipt of hardship duty pay.
- f. Crisis Response Service Award (CRSA). The CRSA recognizes an officer's direct participation in a Corps deployment to a designated domestic response. An officer must meet the force readiness standards to be eligible for the CRSA (see [CCI 241.01](#)). An officer may receive only one award of the CRSA for participation in the same crisis response.
- (1) Officer must participate in a domestic Corps deployment, that is:
 - (a) A natural or man-made disaster that is determined to be a 'crisis' response with eligibility for the CRSA by the SG; and
 - (b) Away from the officer's regular duty assignment.
 - (2) Officer must be deployed for not less than 14 consecutive days.
 - (3) Officer must be deployed in the designated PHS uniform, unless exempted by the SG.

- g. Global Response Service Award (GRSA). The GRSA recognizes an officer's direct participation in a Corps deployment to a designated non-domestic or international response. An officer must meet the force readiness standards to be eligible for the GRSA (see [CCI 241.01](#)). An officer may receive only one award of the GRSA for participation in the same response.
- (1) Officer must participate in a non-domestic Corps deployment that is:
 - (a) A natural or man-made disaster that is determined to be a 'crisis' response with eligibility for the GRSA by the SG; and
 - (b) Away from the officer's regular duty assignment.
 - (2) Officer must be deployed for not less than 14 consecutive days.
 - (3) The GRSA will be awarded for service completed after 1 October 2004.
 - (4) Officer must be deployed in the designated PHS uniform, unless exempted by the SG.
- h. Response Service Award (RSA). The RSA recognizes an officer's direct participation in a Corps deployment to a designated public health need or National Special Security Event. An officer must meet the force readiness standards to be eligible for the RSA (see [CCI 241.01](#)). An officer may receive only one award of the RSA for participation in the same response.
- (1) Officer must participate in a Corps deployment that is classified as one of the following:
 - (a) An all-hazards public health emergency as declared by the President or Secretary;
 - (b) An urgent public health need as determined by the Secretary or the ASH; or
 - (c) A National Special Security Event (e.g., Winter Olympics).
 - (2) To meet this service award criterion the event must:
 - (a) Not be designated as a CRSA or GRSA response; and
 - (b) Be designated a Corps deployment with eligibility for the RSA by the Secretary, ASH, or SG.
 - (3) Officer must be deployed for not less than 7 consecutive days.
 - (4) Officer must be deployed in the designated PHS uniform, unless exempted by the SG.
- i. Recruitment Service Ribbon (RSR).
- (1) The RSR recognizes an officer's continued service to the ongoing recruitment efforts of the Corps. An officer is eligible for the RSR upon completion of 3 consecutive years:

- (a) In a position in which recruitment is a primary duty and responsibility. Duties may include policy development, establishment of goals and strategies, and coordination of recruitment programs and initiatives; or
 - (b) Of maintaining a current status in the Associate Recruiter Program (ARP) as set forth in [CCI 373.01](#).
- (2) An officer may earn an additional award for meeting the criteria in Section 6-3.i.(1) for an additional 3-year period.
- (3) The RSR will be awarded for recruitment service completed after 3 April 2006.
- j. Bicentennial Unit Commendation (BUC). All Corps officers who served satisfactorily on active duty for any period between 1 January 1998, and 16 July 1999, qualify for the BUC.
- k. Global Health Initiatives Service Medal (GHISM).
 - (1) Any officer who supported a Global Health Initiative Assignment, for at least 30 consecutive days or 60 non-consecutive days while on temporary or permanent assignment after 26 January 2005 qualify for the GHISM. Any period of 30 or more consecutive days is not included in the computation of the 60 non-consecutive days.
 - (2) Support is defined as deploying and/or providing direct administrative, logistical, financial, or operational support to any Global Health Initiative or mission that is CONUS and/or OCONUS.
 - (3) An officer may receive only one award of the GHISM for participation in the same Global Health Initiative or mission.
 - (4) Officers eligible for the Global Health Campaign Medal are not eligible for the GHISM.
 - (5) Qualifying Global Health Initiatives and missions are determined by the SG.
- l. National Emergency Preparedness Award (NEPA). The NEPA recognizes officers who have served in an organizational entity, from 19 December 2006 through 31 December 2019, whose mission is to provide emergency medical/support services.
 - (1) Officers who successfully serve a minimum of two consecutive years as active members on a Corps managed Rapid Deployment Unit or previously recognized Tier 1 or Tier 2 team are eligible if they meet the eligibility criteria for the NEPA as defined by the SG.
 - (2) Officers detailed and/or assigned by personnel orders to the Assistant Secretary for Preparedness and Response (ASPR) or the CCHQ Readiness and Deployment Branch for one consecutive year, are eligible for the NEPA.
 - (3) Only one NEPA may be awarded during an officer's career and subsequent award devices are not authorized. Therefore, officers who

were awarded the NEPA under the former eligibility criteria are not authorized an additional NEPA for service on a Corps managed response team.

6-4. Campaign Medals.

a. General.

- (1) Campaign medals recognize a formal Corps operation that has a specific and stated objective. Campaigns are specific Departmental objectives aimed at eradicating specific health crisis or diseases and/or significantly improving the health and well-being of a targeted population.
- (2) The Corps grants campaign medals in recognition of an officer's substantial contribution to an approved campaign for a specific type of service or activity, or for service during a specific time period.

b. Smallpox Eradication Campaign Ribbon (SPEC). An officer who has served 90 days or more cumulative service in the Centers for Disease Control and Prevention's (CDC) Bureau of Smallpox Eradication or Smallpox Laboratory, in the World Health Organization's (WHO) Smallpox Eradication Program, or in a temporary duty assignment in a smallpox effort abroad, qualifies for the SPEC. The service must have occurred between 1 January 1966 and 26 October 1977.

c. Global Health Campaign Medal (GHCM).

- (1) Any Corps officer, who has been deployed to support a Global Health Initiative mission, outside of the United States in a foreign duty assignment, temporary or permanent, qualifies for the GHCM.
- (2) Qualification for this award does not include service in any State of the United States. As defined in [42 U.S.C. §201](#), the term "State" includes the 50 States and the District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, American Samoa, and all other areas formerly encompassed in the Trust Territories of the Pacific Islands.
- (3) An officer may receive only one award of the GHCM for participation in the same Global Health Initiative or mission.
- (4) Officers eligible for the Global Health Campaign Medal are not eligible for the FDA or SAA after 26 January 2005.
- (5) Qualifying Global Health Initiatives and missions are determined by the SG.

d. Ebola Campaign Medal (ECM).

- (1) The ECM recognizes a Corps officer who served on or after 31 March 2014, for a period of not less than 30 consecutive days or 60 non-consecutive days in support of an international Ebola activation of the Corps by the President or Secretary. The SG shall determine which assignments qualify for the ECM.
- (2) An officer may receive only one award of the ECM for participation in the same Ebola Initiative or mission.

- (3) The SG may authorize other response service awards in conjunction with the ECM. Officers must meet the established criteria for awarding of the FDA and HDA during an Ebola mission; no other service awards are authorized.
- e. Coronavirus Disease 2019 (COVID-19) Pandemic Campaign Medal (C-19PCM)
- (1) All Corps officers on active duty between 1 March 2020 and the end date of the Public Health Emergency declaration for COVID-19 and who are eligible to receive an award in accordance with Section 6-9., qualify for the C-19PCM.
 - (2) An officer may receive only one award of the C-19PCM regardless of the number of tours of active duty between 18 March 2020 and the end date of the Public Health Emergency declaration for COVID-19.
 - (3) Eligibility for Other Awards.
 - (a) The SG may authorize the issuance of the Expeditionary Attachment (EA), service awards (e.g., GHISM, SAA, FDA), and service response awards (e.g. CRSA, GRSA) to an officer in conjunction with the C-19PCM provided that the officer meets the eligibility criteria of the respective service award.
 - (b) The Corps will not issue the GHCM in conjunction with the C-19PCM.
 - (4) An Award to Civilians. The SG may authorize the issuance of the C-19PCM to civilians who supported of the Department's COVID-19 response for a period of not less than 30 consecutive days or 60 non-consecutive days. The officials in Section 3-2., as well as other appropriate officials, may request that the ASH delegate the authority to approve the issuance of the C-19PCM to civilians to them.
- f. Expeditionary Attachment (EA). The EA is an attachment worn on campaign medals or service awards that recognizes service in a specific location or theater of operation in direct support of the campaign initiative or mission and in which officers operated under circumstances which, after full consideration, shall be deemed to merit special recognition. The SG shall determine which assignments qualify for the EA.
- (1) The award of the EA is for service after 31 March 2014.
 - (2) The Corps can award the EA to any member of the Corps who:
 - (a) Deployed outside of the United States for a period of not less than 30 consecutive days or 60 non-consecutive days in direct support of an international Ebola activation of the Corps by the President or Secretary.
 - (b) Deployed for a period of not less than 30 consecutive days or 60 non-consecutive days in direct support of the Department's COVID-19 Pandemic response.
 - (3) An officer can receive only one EA for participation in the same campaign initiative or mission.

- 6-5. Training Ribbons.
- a. General. The Corps grants training awards in recognition of satisfactory completion of a specified course of study.
 - b. Commissioned Corps Training Ribbon (CCTR). The Corps awards the CCTR to officers upon satisfactory completion of Corps' Officer Basic Course (OBC).
 - c. Officers who successfully completed the former Basic Officer Training Course (BOTC)/Independent Officer Training Course (IOTC) were awarded the CCTR. Officers who separated and returned to the Corps and meet the requirements of Section 6-5.b. are eligible for a second CCTR (no device authorized).
- 6-6. Regular Corps Ribbon (RCR).
- a. The Corps will award the Regular Corps Ribbon to a Regular Corps officer, called to active duty after 23 March 2010, upon successful completion of OBC.
 - b. The Corps will award the Regular Corps Ribbon to an officer who was on active duty on 23 March 2010.
 - c. An officer who was assimilated into the Regular Corps prior to 23 March 2010, qualified for the Regular Corps Ribbon.
- 6-7. Badges and Insignia.
- a. Assistant Secretary for Health / Principal Deputy Secretary for Health Officer-In-Charge Insignia (ASHOICI).
 - (1) The ASHOICI identifies a Corps officer who is assigned by personnel orders to either the position of ASH or PDASH. Eligibility for the ASHOICI is restricted to incumbents of those positions, when filled by a Corps officer.
 - (2) Once an officer has been duly authorized to wear the ASHOICI, he/she may wear the miniature ASHOICI during all subsequent assignments of his/her career as an officer. If an officer has earned the ASHOICI as well as an OICI, however, only one of these may be worn on the uniform regardless of the number of times an officer may have qualified for either insignia. The miniature device is also authorized on civilian attire as a lapel pin.
 - b. Surgeon General Insignia (SGI). The SGI is a badge of office. Wearing of the SGI is restricted to the SG. An officer permanently assigned as the SG shall wear the SGI. Once an officer has been duly authorized to wear the SGI, he/she may wear the miniature SGI during all subsequent assignments of his/her career as a Corps officer.
 - c. Deputy Surgeon General Insignia (DSGI). The DSGI is a badge of office. Wearing of the DSGI is restricted to the DSG. An officer permanently assigned as the DSG shall wear the DSGI. Once an officer has been duly authorized to wear the DSGI, he/she may wear the miniature DSGI during all subsequent assignments of his/her career as a Corps officer.

- d. Officer-In-Charge Insignia (OICI). The OICI identifies a Corps officer who is assigned by personnel orders to the highest level of leadership within the Office of the Secretary; a specific position that is the highest level of authority over an HHS OPDIV; or a specific position in a non-HHS organization for which there is a statutory basis for the relationship, which is the highest level of authority over an organizational component which contains Corps officers. Eligibility for the OICI is restricted to incumbents of the following designated positions, when filled by a Corps officer:
- (1) Secretary, Deputy Secretary, Chief of Staff, Immediate Office of the Secretary (IOS), HHS;
 - (2) Associate Deputy Secretaries and Heads of OS operational offices, OS, HHS;
 - (3) Assistant Secretaries, Deputy Assistant Secretaries, OS, HHS;
 - (4) Chief officials and deputies in assistant secretarial level STAFFDIVs, OS, HHS;
 - (5) HHS OPDIV Heads;
 - (6) Chief Medical Officer and Director of Health and Safety, USCG; and
 - (7) Medical Director and Assistant Director, Health Services, BOP.

Once an officer has been duly authorized to wear the OICI, he/she may wear the miniature OICI during all subsequent assignments of his/her career as an officer. No more than one OICI shall be worn on the uniform, regardless of the number of times an officer may have qualified for the insignia.

- e. Chief Professional Officer Insignia (CPOI). The CPOI is a badge of office. Wearing of the CPOI is restricted to officers who are assigned by personnel orders to be the Chief Professional Officer (CPO) of one of the eleven professional categories. (i.e., Medical, Dental, Nurse, Engineer, Scientist, Environmental Health, Veterinary, Pharmacy, Dietitian, Therapist, and Health Services). An officer who is assigned as an Acting CPO is not authorized to wear the CPOI. Once an officer has been duly authorized to wear the CPOI, he/she may wear the miniature CPOI during all subsequent assignments of his/her career as a Corps officer. Officers on active duty as of the date of this Instruction, who previously were assigned as a CPO, are authorized to wear the miniature CPOI.
- f. Office of the Secretary of HHS Identification Badge (OSIB). Officers assigned on a permanent basis to a position located within any of the organizational components of the OS, HHS, including STAFFDIVs, qualify to wear the OSIB. Authorization to wear this badge is effective with assignments on or after 22 June 1999, and is not retroactive to any assignment to any element of OS prior to this date.
- (1) An officer may temporarily wear the badge upon initial assignment to a position within the OS.
 - (2) Upon completion of one continuous year of duty in a position within the OS, an officer may permanently wear the badge. Time spent on a detail or temporary duty outside the OS does not count in this computation.

- (3) An officer detailed or on temporary duty from the OS, to activities located in other OPDIVs or non-HHS organizations located outside the OS, is not eligible to wear this badge during the period of detail or temporary duty, unless he/she has previously met the criteria for permanent authorization.
- g. Recruiter Badge (RB). An officer who is assigned to a position in which the primary duties and responsibilities relate to recruitment will wear the RB as recognition of his/her standing as a recruiter. An officer can wear the RB only while assigned to a recruitment position.
- h. Associate Recruiter Lead Badge (ARLB). Upon meeting the eligibility criteria as set forth in [CCI 373.01](#) to serve as an Associate Recruiter Lead (ARL) and approval by the respective CPO, an ARL will be issued a certificate and corresponding badge to signifying his/her standing as a volunteer in the ARP. The ARLB may be worn only while an individual maintains current status in the ARP in his/her respective role as set forth in CCI 373.01.
- i. Associate Recruiter Badge (ARB). Upon meeting the eligibility criteria as set forth in CCI 373.01 to serve as an Associate Recruiter (AR) and approval by the respective CPO, an AR will be issued a certificate and corresponding badge to signifying his/her standing as a volunteer in the ARP. The AR may wear the ARB only while an individual maintains current status in the ARP in his/her respective role as set forth in CCI 373.01.
- j. Field Medical Readiness Badge (FMRB). The FMRB recognizes officers who have met criteria beyond the required basic force readiness standards. It is awarded on the basis of proven knowledge and skill related to force readiness and performance while engaged in Corps deployment(s). To qualify for the FMRB, an officer must meet the force readiness standards (see CCI 241.01) in addition to the following eligibility criteria:
 - (1) Physical Readiness Requirement. Must achieve a minimum overall Excellent rating on the Annual Physical Fitness Test (APFT).
 - (2) Training Requirement. Complete the compulsory modules online training for FMRB as defined by the SG. These may include required modules from the 'core', 'clinical' (if applicable), and 'optional' curricula of the online Readiness and Deployment Branch (RDB) modules. The CCMIS RDB page contains the details of the FMRB training requirements.
 - (3) Deployment Requirement. Officers must participate in one or more Corps deployments consisting of a minimum of 7 days within 3 years of FMRB application; the 7 days do not have to be consecutive. The Corps will only consider agency deployments when the Corps has been officially activated for the same response, per SG authorization in Section 3-1.b.
 - (4) Once an officer has been duly authorized to wear the FMRB, he/she may continue to wear the FMRB throughout his/her career as an officer.
- k. Insignia or badges of the ASH/PDASH (ASHOIC), SG, DSG, Officer-in-Charge (OIC), and CPO are not authorized for issuance to or wear by officers who are in an acting or temporary position or role.
- l. Music Ensemble Badge (MEB). The MEB recognizes officers who are active members of the Music Ensemble (both choir and band). It is awarded on the basis of active participation in organized Music Ensemble events (no less than 5 per

year) and active participation in rehearsals (no less than 10 per year). Officers can wear the MEB while he/she is actively participating in the Music Ensemble.

6-8. Limitations on Awards.

- a. An award shall be based on documentation of actions and achievements. No award shall be based solely upon achievements recognized through a prior Corps honor award, however, in accordance with Section 6-2.(a)(3), an officer may be nominated for an individual honor award in addition to a unit award, if the officer's achievement is significant and can be differentiated from the efforts of the group as a team and the other efforts of members of the unit.
- b. Nominations for an individual or unit honor award must be formally initiated and submitted 90 days prior to an officer's separation or retirement from active duty or within 13 months after the noteworthy act or specific period of service to be recognized, whichever is earlier. The OPDIV, STAFFDIV, or non-HHS organization Awards Coordinator is responsible for assuring that nominations are processed within the OPDIV, STAFFDIV, or non-HHS organization, and submitted to CCHQ in a timely manner.
- c. Service awards must be initiated within 13 months after the criteria for the award has been met. The OPDIV, STAFFDIV, or non-HHS organization Awards Coordinator is responsible for assuring that submissions are processed within the OPDIV, STAFFDIV, or non-HHS organization, and submitted to CCHQ in a timely manner.

6-9. Each officer nominated for recognition under the COAP must:

- a. Be in compliance with the Corps' licensure policy as outlined in [CCI 251.01](#), "Professional Licensure and Certification;"
- b. Have satisfactory Commissioned Officers' Effectiveness Reports (COER) on file in CCHQ for each year covered by the recognition. All COERs on file for the period covered by the recognition must be rated as satisfactory. In addition, the most recent COER must be on file and must have a satisfactory rating; and
- c. Not have any suspension of favorable personnel actions or pending or ongoing adverse actions.
 - (1) An officer is not eligible to receive recognition under the COAP during periods of misconduct or other actions that lead to an adverse action or while an adverse action is actively managed by CCHQ.
 - (2) An officer is ineligible to receive honor or service awards if the period of the award overlaps the period of misconduct or active adverse actions.
 - (3) If the officer has been subject to a suspension of favorable personnel actions or an adverse action, CCGQ will return the nomination to the OPDIV/STAFFDIV/non-HHS organization without action. However, an explanation will be provided.
- d. Meet the Corps' Basic Force Readiness requirements as follows:
 - (1) Officers nominated for an award that covers the officer's career (e.g., submitted just prior to the officer's retirement) must continuously

meet the readiness requirements for the last five years of the award period.

- (2) All other officers must continuously meet the readiness requirements, starting from the date of the award nomination through the date that the award is approved.
 - e. The Director, CCHQ, may rescind recognition when the award was inadvertently processed and should have been denied under Sections 6-9.a. b., c., or d. The Director, CCHQ, shall inform the officer, and the OPDIV, STAFFDIV, or non-HHS organization which initially approved or nominated the recognition of the rescission and its reason(s).
- 6-10. Corps officers may not participate in the civil service cash awards programs, pursuant to [5 U.S.C. Chapter 45](#).
- 6-11. Upon review and recommendation by the PHS Commissioned Corps Awards Board (PHS-CCAB), the Director, CCHQ, with the concurrence of the SG, may revoke an award, badge, or other recognition under this program if it is determined that facts pertaining to the rationale(s) for the recognition were inaccurate or suppressed, and that a reasonable assessment would conclude that if this were known the original approval of the recognition would not have occurred. The Director, CCHQ, shall inform the officer, and the OPDIV, STAFFDIV, or non-HHS organization which initially approved or nominated the recognition of the revocation and the reason(s) for this revocation.

7. RESPONSIBILITIES:

- 7-1. Surgeon General. The SG is responsible for the day-to-day management of Corps operations, force readiness, and field command of deployments. The SG shall:
- a. Establish benchmarks for the timely processing and presentation of individual and unit honor award nominations.
 - b. Establish guidelines for referral of nominations that are not acted upon within the established benchmarks.
 - c. Publish the established benchmarks and guidelines in a Personnel Operations Memorandum.
 - d. Approve all awards referred to the OSG in accordance with the published benchmarks and guidelines with recommendations provided by the OSG Awards Board.
- 7-2. The Director, CCHQ, is responsible for the daily administration of the Corps personnel system and the force readiness activities. The Director, CCHQ, or his/her designee, is responsible for the daily management of the COAP.
- 7-3. PHS Commissioned Corps Awards Board (PHS-CCAB).
- a. The PHS-CCAB is appointed by the SG.
 - b. The PHS-CCAB is responsible for periodic evaluation of the awards program including written assessment of the process and outcomes. The PHS-CCAB shall identify issues and submit recommendations for improvement of the program to the SG and CCHQ.

- c. The PHS-CCAB shall review nominations for the DSM, MSM, OUC, and all awards "With Valor."
 - d. The PHS-CCAB shall submit recommendations for the awards it reviews to the SG, who will make the final decision on each award so recommended.
- 7-4. Commissioned Corps Interagency Awards Board (CCIAB).
- a. The CPOs comprise the CCIAB.
 - b. The CCIAB shall review nominations submitted for SG approval under Section 3-1.c.
 - c. The CCIAB shall submit recommendations for the awards it reviews to the SG, who will make the final decision on each award so recommended.
8. PROCEDURES:
- 8-1. Nomination Procedures.
- a. Delegated Approval Authorities will develop written standard operation procedures (SOP) for processing nominations for individual and unit honor awards within their respective jurisdictions. Procedures will adhere to this Instruction and the benchmarks and guidelines established by the SG (see Section 7-1.). Copies of the written SOP are provided to CCHQ for approval by the Director, CCHQ.
 - b. A fellow officer, co-worker, superior, or someone outside the Corps with knowledge of the accomplishment(s) deserving recognition may initiate the nomination of an officer or a group of officers as candidate(s) for an individual or unit honor award.
 - c. The following forms are used for nominating officers for each level of individual and unit honor awards:
 - (1) For all individual honor awards, Form PHS 6342-2 – Part I.
 - (2) For all unit awards, Form PHS 6342-1 – Part I.

Note: Nominations may include no more than a one-page written narrative justification for the award. The SG, or his/her designee, may provide further limitations and guidance regarding the content of the written narrative.
 - d. A nomination shall be submitted through the officer's routine administrative review channels until either:
 - (1) It is non-endorsed by any two levels of review; or
 - (2) It is approved or disapproved by the delegated approval authority.
 - e. If a program other than his/her parent organization nominates an officer for an award, the nomination is reviewed for recommendation or approval by the program whose mission is impacted by the achievement or accomplishment being recognized. Note: concurrence from the officer's host organization must be obtained prior to submission of the award to CCHQ.
 - f. Nominations for officers assigned to organizations where the approval authority is not clear, officers detailed to an organization that does not have delegated

approval authority, or officers in cases of a potential conflict of interest for the delegated authority to approve, are directed to the CCIAB for review prior to approval by the SG. The SG serves as the approving authority of these awards.

8-2. Required Board Review.

- a. DSM, MSM, OUC, and award nominations "With Valor." Two board reviews are required for these awards. First, each OPDIV/STAFFDIV or non-HHS organizations will conduct a board review and obtain Agency head concurrence. Second, the PHS-CCAB shall review the OPDIV/STAFFDIV or non-HHS organization board results and recommend a decision to the SG.
- b. OSM, CM, AM, CIT, and UC.
 - (1) For organizations with delegated approval authority, only one board review for these awards is required within an OPDIV/STAFFDIV or non-HHS organization prior to a decision from the delegated approving authority.
 - (2) For the circumstances outlined in Section 3-1.c. the CCIAB will review the nominations and make recommendations to the SG.

8-3. Timely Action on Awards Nominations.

- a. An OPDIV/STAFFDIV or non-HHS organization will process awards in a timely manner in accordance with the benchmarks and guidelines established by the SG (see Section 7-1.). The delegated approval authority will render a decision to either approve or disapprove an award nomination within the timeframes established by the benchmarks.
- b. If the OPDIV/STAFFDIV or non-HHS organization has not made a decision to approve or disapprove an honor award nomination (i.e., DSM, MSM, OSM, CM, AM, CIT, OUC, or UC) within the timeframe established by the SG benchmarks, they will forward the award to the OSG in accordance with the SG prescribed guidelines. OSG will process these awards in accordance with OSG established procedures (see Section 8-2.a.), and the SG will render a final decision to approve or disapprove the nomination.
- c. CCHQ will process awards in a timely manner in accordance with the benchmarks and guidelines established by the SG (see Section 7-4.b.).

8-4. Certificates and Medals.

- a. CCHQ supplies a certificate for the DSM, MSM, ASHESM, SGESM, OSM, CM, AM, and CIT.
- b. CCHQ supplies the initial medal set for the DSM, MSM, ASHESM, SGESM, and OSM. OPDIV/STAFFDIV/non-HHS organizations may, at their expense, supply medal sets for the, CM, AM, and CIT, or the officer may procure these medal sets from authorized sources (e.g., military uniform shops, Navy Exchanges) using his/her personal funds.
- c. CCHQ supplies a medallion and OSG supplies a certificate for the ASHM and SGM.
- d. CCHQ does not provide Corps officers who receive 2 or more individual honor awards of the same award (e.g., second OSM) with an additional medal set upon

receipt of the award. Instead, it will provide the officer with a new award certificate in lieu of additional medal sets and/or ribbons.

- 8-5. Documentation of Approved Award. CCHQ will place a copy of all pertinent documents pertaining to an officer's approved award or badge in the officer's electronic Official Personnel File (eOPF).
- 8-6. Presentation of Awards. An officer is authorized to wear the appropriate ribbon, medal, badge, or insignia approved under this program after the recognition is processed by CCHQ and entered into the officer's record. Awards are formally presented to an officer within the guidelines established by the SG (see Section 7-1).
- 8-7. Supply of Medals, Ribbons, and Appurtenances.
 - a. Supply. Military uniform shops maintain a supply of appurtenances for medal sets and ribbons.
 - b. Requisition. Programs and officers may procure, at their expense award(s) and/or devices from the Navy Exchange or other official sources.
- 8-8. Isolated/Hardship Site Designation Criteria.
 - a. Physical location of duty station has an aggregate population less than 9100 per US Census data, and is:
 - (1) Greater than 50 miles (most direct route/major roads) to city center of an aggregate population over 9100; and
 - (2) Greater than 50 miles (most direct route/major roads) to a military installation with a Military Treatment Facility (MTF) that provides 24/7 services, using Tricare "Find a Military Hospital or Clinic" website. This is the same criteria an officer would meet to qualify for Tricare Prime Remote health care coverage.
 - b. Approved Isolated/Hardship Designated sites are attached (Appendix A).
 - c. Periodically, CCHQ, will review and verify the Isolated Hardship Sites. Requests for new sites should be submitted to the Director, CCHQ, or his/her designee, by Commissioned Corps Liaisons and should include the following:
 - (1) Duty Station Name;
 - (2) Complete Address (including Zip Code);
 - (3) Population Size; and
 - (4) Distance from nearest population as designated in Section 8-7.a.
- 9. HISTORICAL NOTES: This is the seventh issuance of this Instruction within the electronic Commissioned Corps Issuance System (eCCIS).
 - 9-1. CCI 511.01, "Awards Program," dated 28 July 2020.
 - 9-2. CCI 511.01, "Awards Program," dated 30 April 2020.
 - 9-3. CCI 511.01, "Awards Program," dated 23 July 2019.

- 9-4. CCI 511.01, "Awards Program," dated 11 January 2017.
- 9-5. CCI 511.01, "Awards Program," dated 20 February 2015.
- 9-6. CC27.1.1, "Awards Program," dated 6 August 2007.

Appendix A

Designated Isolated/Hardship Sites (as of the Policy Effective Date)

FACILITY	ADDRESS	CITY	ST	ZIP CODE
Adak Clinic	General Delivery	ADAK	AK	99546
Angoon Health Center	600 Chinook Way	ANGOON	AK	99820
Aniak Subregional Clinic	N/A	ANIAK	AK	99557
Samuel Simmonds Mem Hosp	7000 Uula St	BARROW	AK	99723
Yukon-Kuskokwim Delta Regional Hospital	900 Chief Eddie Hoffman Hwy	BETHEL	AK	99559
Brevig Mission Village Clinic	N/A	BREVIG MISSION	AK	99785
Harris Sub-Regional Clinic	N/A	CHIGNIK BAY	AK	99564
Ilanka Health Center	509 Chase Street	CORDOVA	AK	99574
Kanakanak Hospital	6000 Kanakanak Rd	DILLINGHAM	AK	99576
Yukon Flats Health Center	N/A	FORT YUKON	AK	99740
SEARHC Haines Medical Center	131 First Avenue South	HAINES	AK	99827
Seldovia Village Health Center	880 E End Rd	HOMER	AK	99603
Hoonah Medical Clinic	568 Raven Drive	HOONAH	AK	99829
Hooper Bay Subregional Clinic	N/A	HOOPER BAY	AK	99604
Hydaburg Health Center	N/A	HYDABURG	AK	99922
Iliamna (Nilavena Subregional Clinic)	101 Airport Road	ILLIAMNA	AK	99606
Dena'ina Health Clinic	416 Frontage Road	KENAI	AK	99611
Ketchikan Indian Community Tribal Health Center	3289 Tongass Dr	KETCHIKAN	AK	99901
USCG Station Ketchikan		KETCHIKAN	AK	99901
King Cove Clinic	N/A	KING COVE	AK	99612
Alicia N. Roberts Medical Center	830 Craig-Klawock Hwy	KLAWOCK	AK	99925
Alutiiq Enwia Medical Clinic	402 Center Avenue	KODIAK	AK	99615
USCG Base Kodiak		KODIAK	AK	99615
Manilaq Health Center	436 5th Avenue	KOTZEBUE	AK	99752
McGrath Sub-Regional Health Center	N/A	MCGRATH	AK	99627
Metlakatla (Annette Island SU Health Center)	Brendible Street	METLAKATLA	AK	99926
Ninilchik Community Clinic	N/A	NINILCHIK	AK	99639
Norton Sound Regional Hosp	1000 Greg Kruschek Avenue	NOME	AK	99762
Sand Point Medical Clinic	172 Red Cove Rd	SAND POINT	AK	99661
Seldovia Village Health Center	206 Main St	SELDOVIA	AK	99663
Seward North Star Health Clinic	201 3rd Avenue	SEWARD	AK	99664
Mt. Edgecumbe Hospital	222 Tongass Dr	SITKA	AK	99835
USCG Station Sitka		SITKA	AK	99835
St. Mary's Sub-Regional Clinic	General Delivery	ST MARYS	AK	99658
Tanana Health Center	N/A	TANANA	AK	99777
Togiak Sub-Regional Clinic	General Delivery	TOGIAC	AK	99678

Toksook Bay Subregional Clinic	N/A	TOKSOOK BAY	AK	99637
Unalakleet Health Center	General Delivery	UNALAKLEET	AK	99684
Oonaska Wellness Center	205 Broadway	UNALASKA	AK	99685
Yakutat Health Center	712 Ocean Cape Road	YAKUTAK	AK	99689
Clarence Wesley Health Center (San Carlos)	101 Medical Dr	BYLAS	AZ	85530
Chinle Comprehensive Health Care (Navajo)	Off Highway 191, PHS/IHS Dr	CHINLE	AZ	86503
Cibecue Health Center (Fort Apache)	2 W 3rd St	CIBECUE	AZ	85911
Dennehotso Health Station (Navajo)	Highway 160	DENNEHOTSO	AZ	86535
Kayenta Health Center	Highway 163, PHS/IHS Dr	KAYENTA	AZ	86033
Many Farms Dental Center (Chinle CHC)	Highway 191, PHS/IHS Dr	MANY FARMS	AZ	86538
Peach Springs Health Center	943 HUALAPAI WAY	PEACH SPRINGS	AZ	86434
Apache Healthcare Corporation (San Carlos)	102 Medicine Way Road	PERIDOT	AZ	85542
Pinon Health Center (Navajo)	Navajo Route 4	PINON	AZ	86510
Hopi Health Care Center	Hwy 264, Mile Marker 388	POLACCA	AZ	86042
Rock Point Health Station (Navajo)	Hwy 191	ROCK POINT	AZ	86545
San Carlos Service Unit		SAN CARLOS	AZ	85550
Sells Service Unit		Sells	AZ	85634
Supai Clinic (Havasupai)	Main Street	SUPAI	AZ	86435
Inscription House Health Center (Navajo)		SHONTO	AZ	86054
Four Corners Regional Health Center	US Hwy 160 & Navajo Route 35	TEEC NOS POS	AZ	86514
Inscription House Health Center (Navajo)	Hwy 98 & Navajo Route 1	TONALEA	AZ	86044
Tsaile Health Center (Navajo)	Route 64 @ Indian Road 12, (NCC) (COLLEGE)	TSAILE	AZ	86556
Tuba City Regional Health Care	167 N Main Street	TUBA CITY	AZ	86045
Whiteriver Hospital (Fort Apache)	HWY 73 MILE POST 342	WHITERIVER	AZ	85941
Yosemite National Park	5083 FORESTA ROAD B 759	EL PORTAL	CA	95318
Yosemite National Park	9000 LOST ARROW DRIVE	YOSEMITE NATL	CA	95389
Ute Mountain Ute Health Center (Ute)	232 Rustling Willow Street	TOWAOC	CO	81334
Kootenai Health Station	100 Circle Dr	BONNERS FERRY	ID	83805
Kamiah Health Center (Nez Perce)	313 3rd St	KAMIAH	ID	83536
USP Big Sandy	1197 AIRPORT ROAD	INEZ	KY	41224
FCI Manchester	805 FOX HOLLOW ROAD	MANCHESTER	KY	40962
USP McCreary	330 FEDERAL WAY	PINE KNOT	KY	42635
Passamaquoddy Tribe Indian Township	401 Peter Dana Point Road	PRINCETON	ME	04668
Manistique Tribal Community Health Center	698 W Hwy US-2	MANISTIQUE	MI	49854
Little River Band of Ottawa Indians	310 9th Street	Manistee	MI	49660
Newberry Tribal Community Health Center	4935 Zeez-ba-tik Lane	NEWBERRY	MI	49868
Lac Vieux Desert Health Center (Lac Vieux)	E23970 Pow Wow Trail	WATERSMEET	MI	49969
Grand Portage Chippewa Indians (Grand Portage)	62 Upper Road	GRAND PORTAGE	MN	55605
Bois Forte Band of Chippewa Indians (Bois Fort)	13071 Nett Lake Road	NETT LAKE	MN	55771

White Earth Health Center (White Earth)	40520 County Highway 34	OGEMA	MN	56569
Blackfeet Community Hospital (Blackfeet)	760 Hospital Circle	BROWNING	MT	59417
Crow-Northern Cheyenne Hospital	1 HOSPITAL ROAD	CROW AGENCY	MT	59022
Fort Belknap Service Unit	669 Agency Rd	HARLEM	MT	59526
Eagle Child Health Station (Fort Belknap)	123 Whitecow Canyon Road	HAYS	MT	59527
Heart Butte Health Station	81 Disney	HEART BUTTE	MT	59448
Lame Deer Health Center (N. Cheyenne)	100 Cheyenne Avenue	LAME DEER	MT	59043
Polson Health Center (Flathead)	#5 4th Ave East	POLSON	MT	59860
Verne E. Gibbs Clinic (Fort Peck)	107 H. Street	POPLAR	MT	59255
FDA/U.S. CUSTOMS PORT OF ENTRY	HIGHWAY 15	SWEETGRASS	MT	59484
Chief Redstone Clinic (Fort Peck)	550 6th Avenue North	WOLF POINT	MT	59201
Quentin N. Burdick Memorial Health Care Facility	Moonlight Drive Highway 5	BELCOURT	ND	58316
Dunseith Health Location (Turtle Mountain)	215 Main Street NE	DUNSEITH	ND	58329
Spirit Lake Health Center (Spirit Lake)	3883 74th Avenue, NE	FORT TOTTEN	ND	58335
Fort Yates Hospital	N/A	FORT YATES	ND	58538
Mandaree Health Station (Fort Berthold)	305 Main Street	MANDAREE	ND	58757
Minni-Tohe Health Center (Fort Berthold)	1 Minne-Tohe Drive	NEW TOWN	ND	58763
Trenton Community Clinic (Fort Berthold)	Highway 1804 West	TRENTON	ND	58853
Twin Buttes Health Station (Fort Berthold)	N/A	TWIN BUTTES	ND	58636
White Shield Health Station (Fort Berthold)	2 Central Main Street B	WHITE SHIELD	ND	58775
Alamo Health Center (Navajo)	Indian Service Route 54	ALAMO	NM	87825
Crownpoint Healthcare Facility		CROWNPOINT	NM	87313
Jicarilla Service Unit (Jicarilla)	500 Mundo Road	DULCE	NM	87528
Pine Hill Health Center (Ramah Navajo)	BIA Route 125	PINE HILL	NM	87357
Toadlena Health Station (Navajo)	N/A	TOADLENA	NM	87324
Yomba Shoshone Alcohol Center	N/A	AUSTIN	NV	89310
Battle Mountain Health Station	N/A	BATTLE MOUNTAIN	NV	89820
Duckwater Shoshone Tribe of Nevada	511 Duckwater Falls Road	DUCKWATER	NV	89314
Newe Medical Clinic (Shoshone)	400-B Newe View	ELY	NV	89301
Fort McDermitt Clinic (Fort McDermitt)	112 North Reservation Road	MCDERMITT	NV	89421
Owyhee Community Health Facility (Duck Valley)	1623 Hospital Loop	OWYHEE	NV	89832
FCI Ray Brook	128 RAY BROOK ROAD	RAY BROOK	NY	12977
Broken Bow-Choctaw Nation Hlth Ctr	205 E. 3rd	BROKEN BOW	OK	74728
FCI Estill		ESTILL	SC	29918
Allen Health Station (Pine Ridge)	100 West Main St	ALLEN	SD	57714
Bullhead Health Station (Standing Rock)	102 Tasunka Street	BULLHEAD	SD	57621
Cherry Creek Health Station (Cheyenne)	N/A	CHERRY CREEK	SD	57622
Cheyenne River Health Center (Cheyenne)	24276 166th Street, Airport Rd	EAGLE BUTTE	SD	57625
Fort Thompson Indian Health Center (Crow Creek)	1323 BIA Route 4	FORT THOMPSON	SD	57339

Kyle Health Center (Pine Ridge)	1000 Health Center Road	KYLE	SD	57752
Swiftbird (LaPlante) Health Station (Cheyenne)	N/A	LA PLANT	SD	57652
Lower Brule Indian Health Center (Crow)	601 Gall Street	LOWER BRULE	SD	57548
Manderson Health Station (Pine Ridge)	Wounded Knee Dist	MANDERSON	SD	57756
IHS Martin Field Office (Pine Ridge)	N/A	MARTIN	SD	57551
McLaughlin Health Center (Standing Rock)	701 East Sixth St	MCLAUGHLIN	SD	57642
Great Plains Area Youth Rgn Tx Center	12451 Highway 1806	MOBRIDGE	SD	57601
Pine Ridge Hospital (Pine Ridge)	East Highway 18	PINE RIDGE	SD	57770
Porcupine Clinic (Pine Ridge)	101 Main Street	PORCUPINE	SD	57772
Rosebud Service Unit (Rosebud)	BIA Route 1, Solder Creek Road	ROSEBUD	SD	57570
Woodrow Wilson Keeble Memorial Health Care Center	100 Lake Traverse Drive	SISSETON	SD	57262
Wagner Health Center (Yankton)	111 Washington Street, NW	WAGNER	SD	57380
Wakpala Health Station (Cheyenne)	N/A	WAKPALA	SD	57658
Wanblee Health Center (Pine Ridge)	100 Clinic Road	WANBLEE	SD	57577
Utah Navajo Health System (Navajo)	East Highway 262 Next to LDS Chapel	MONTEZUMA CREEK	UT	84534
Navajo Mountain Community Health Center (Navajo)	N/A	NAVAJO MOUNTAIN	UT	86044
Monument Valley Community Health Center	30 W Medical Dr	OLJATO-MONUMENT VALLEY	UT	84536
Inchelium Tribal Health Clinic (Colville)	39 Short Cut Rd	INCHELIUM	WA	99138
Sophie Trettevick Indian Health Center-Makah	250 Fort St	NEAH BAY	WA	98357
Colville Tribes Indian Health (Colville)	19 Lakes Street	NESPELEM	WA	99155
Omak Indian Health Clinic (Colville)	617 Benton St	OMAK	WA	98841
IHS Ashland Field Office (Bad River)	2800 Lake Shore Dr E	ASHLAND	WI	54806
Red Cliff Health Services (Red Cliff)	88455 Pike Rd	BAYFIELD	WI	54814
Forest County Potawatomi Community/Sokaogon Chippewa Indian Community		CRANDON	WI	54520
Lac Courte Oreilles Tribe of Wisconsin (Lac Courte Oreilles)	13380 West Trepania Road	HAYWARD	WI	54843
Pete Christensen Center	129 Old Abe Road	LAC DU FLAMBEAU	WI	54538
Bad River Health Services (Bad River)	315 Oak St	ODANAH	WI	54861
St. Croix Health Services	4404 State Road 70	WEBSTER	WI	54893
FPC Alderson	GLEN RAY RD. BOX A	ALDERSON	WV	24910
FCI Gilmer	201 FCI LANE	GLENVILLE	WV	26351
Yellowstone National Park		YELLOWSTONE	WY	82190
Pacific Trust Territories		SAIPAN		