

**U.S. COAST GUARD AUXILIARIST
SUPPORT TO COAST GUARD
HEALTH CARE FACILITIES**



**COMDTINST 6010.2F
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COMMANDANT INSTRUCTION 6010.2F

Subj: U.S. COAST GUARD AUXILIARIST SUPPORT TO COAST GUARD HEALTH CARE FACILITIES

- Ref:
- (a) Coast Guard Medical Manual, COMDTINST M6000.1 (series)
 - (b) Auxiliary Manual, COMDTINST M16790.1 (series)
 - (c) Coast Guard Aviation Medicine Manual, COMDTINST M6410.3 (series)
 - (d) Coast Guard Auxiliary Healthcare Participant Sponsorship Program Standard Operating Procedure, COMDT (CG-1121) SOP 6010.2 (series)
 - (e) Coast Guard Trusted Associate Sponsorship System (TASS), COMDTINST5500.18 (series)

1. PURPOSE. This Instruction establishes requirements and guidance for healthcare personnel participation in Auxiliary Healthcare Services (AUXHS) Program.
2. ACTION. All Coast Guard unit commanders, commanding officers, officers-in-charge, deputy/assistant commandants, and chiefs of headquarters staff elements will comply with the provisions of this Instruction.
3. AUTHORIZED RELEASE. Internet release is authorized.
4. DIRECTIVES AFFECTED. Coast Guard Auxiliarist Support to Coast Guard Health Care Facilities, COMDTINST 6010.2E, is cancelled.
5. DISCUSSION.
 - a. The Coast Guard Auxiliary is composed of volunteers, some of whom are trained, qualified, licensed, certified, or registered to perform many of the same health care activities as are performed by active duty and reserve personnel. Some Auxiliarists are willing to perform health care activities on a volunteer basis for the Coast Guard.
 - b. For the purpose of this Instruction, Auxiliary healthcare personnel includes all personnel types as defined in Reference (a), whether certified, licensed, credentialed, and/or privileged. These healthcare personnel are authorized to volunteer in Coast Guard clinics, sickbays, and staff offices (including at the depot, command, and headquarters levels, such as the Health, Safety, and Work-Life Service Center (HSWL SC), Personnel Services Center (PSC), Coast Guard

Recruiting Command (CGRC), the USCG Academy (USCGA), Force Readiness Command (FORCECOM), and the Directorate of Health, Safety, and Work-Life, Commandant (CG-11)), to deploy in support of training or operational Coast Guard missions, to backfill healthcare functions as are normally covered by HSWL SC staff, and to provide telehealth services as approved by HSWL SC. This authorization and associated activities constitute the AUXHS Program.

- c. As the missions and responsibilities of the Coast Guard have expanded, so has the need for healthcare personnel to not only perform their usual clinical activities, but also be available for telehealth consultation, administrative support, emergency mobilization, and/or deployment. Auxiliarists are a force multiplier during steady-state and contingency operations. During surge operations, Auxiliarist participation may augment healthcare capabilities of existing Coast Guard clinics, sickbays, and staff functions, and potentially create opportunity for active duty healthcare personnel to be released for operational response or deployment. These personnel will adhere to all pertinent Commandant Instructions and Instruction Manuals, HSWL SC Technical Directives, and other Instructions relating to healthcare services.
6. DISCLAIMER. This guidance is not a substitute for applicable legal requirements, nor is it itself a rule. It is intended to provide administrative guidance for Coast Guard personnel and is not intended, nor does it, impose legally binding requirements on any party outside the Coast Guard.
 7. MAJOR CHANGES. This Instruction clarifies the mechanism of accession, the privileging and credentialing process, and increases flexibility in assigning Auxiliary health care personnel to duty in support of Coast Guard clinics, sickbays, operations, and depot/command/staff functions.
 8. ENVIRONMENTAL ASPECT AND IMPACT CONSIDERATIONS. The Office of Environmental Management, Commandant (CG-47) reviewed this Commandant Instruction and the general policies contained within, and determined that this policy falls under the Department of Homeland Security (DHS) categorical exclusion A3. This Commandant Instruction will not result in any substantial change to existing environmental conditions or violation of any applicable federal, state, or local laws relating to the protection of the environment. It is the responsibility of the action proponent to evaluate all future specific actions resulting from this policy for compliance with the National Environmental Policy Act (NEPA), other applicable environmental requirements, and the U.S. Coast Guard Environmental Planning Policy, COMDTINST 5090.1 (series).
 9. DISTRIBUTION. No paper distribution will be made of this Instruction. An electronic version will be located in the Coast Guard Directives System Library internally and, if applicable, on the Internet at www.dcms.uscg.mil/directives , and

CGPortal: cg.portal.uscg.mil/library/directives/SitePages/Home.aspx .

10. RECORDS MANAGEMENT CONSIDERATIONS. Records created as a result of this Instruction, regardless of format or media, must be managed in accordance with the records retention schedule located on the Records Resource Center CGPortal site: cg.portal.uscg.mil/units/cg61/CG611/SitePages/Home.aspx .

11. AUTHORITY.

- a. The Coast Guard Authorization Act for Fiscal Year 1996, Title VIII, Sec 802 as codified in 14 U.S.C. § 3902, provides the “purpose of the Auxiliary is to assist the Coast Guard as authorized by the Commandant, in performing any Coast Guard function, duty, role, mission, or operation authorized by law.”
- b. In accordance with References (a-c), the Commandant authorizes the use of Auxiliarists in the performance of health care activities for which they are already trained and found qualified, licensed, registered, or certified.
- c. Auxiliarist healthcare professionals trained at the doctoral level who complete the accession, credentialing, and privileging process contained in Reference (a) are authorized to wear three stripes with a red “A” (or the corresponding metal/cloth silver oak leaf with red “A”, as appropriate with uniform type). Auxiliarist healthcare professionals trained at the master’s degree level who complete the accession, credentialing, and privileging process contained in Reference (a) are authorized to wear two and a half stripes with a red “A” (or the corresponding metal/cloth gold oak leaf with red “A”, as appropriate with uniform type). Auxiliarist healthcare professionals trained at the bachelor’s degree level are authorized to wear two stripes with a red “A” (or the corresponding metal/cloth joined silver bars with red “A”, as appropriate with uniform type). These stripe assignments are unique to the AUXHS program and appropriately represent the graduated levels of professional skill and specialization among AUXHS program participants. Except as described below, they neither imply nor impart any degree of administrative authority in the Auxiliary.
 - (1) In accordance with Reference (b), and in consultation with the Auxiliary Chief Medical Officer (CMO) and the Auxiliary Deputy National Commodore for Mission Support (DNACO-MS), the National Commodore may assign one Auxiliary health care professional as a Branch Chief to each of the three Auxiliary areas. Branch Chiefs and the CMO are authorized to wear four stripes with a red “A” (or the corresponding metal/cloth silver eagle with red “A”, as appropriate with uniform type).
 - (2) Like all Auxiliarists, Auxiliarist health care professionals are authorized to wear the insignia of the highest office to which they have been elected or appointed, as long as they held that office for at least half of the regular term.

- d. The Auxiliary Health Care Device (CADUCEUS with Letter A) is authorized after two years of clinical service.

12. MECHANISM OF ACCESSION.

- a. Auxiliarists who desire to volunteer their health care skills to the Coast Guard, or who desire more information, should contact the Coast Guard Auxiliary CMO /Division Chief for Health Services (DVC-HM). Auxiliary health care personnel who will be providing in-person, face-to-face care will be matched to a local Coast Guard clinic or sickbay according to their clinical training and competencies. Auxiliary health care personnel who will be providing care via telehealth or who will be providing staff functions will be matched to HSWL SC or COMDT (CG-11), as appropriate. If an appropriate match is neither available nor possible, they must be advised of such.
- b. For health care personnel seeking Auxiliary membership to provide health services, a review of the applicant's competencies and suitability to the Coast Guard health care program will be performed prior to their Auxiliary enrollment. Auxiliary entry-level Personnel Security Investigations (PSI) are also completed prior to enrollment, consist of a Federal Bureau of Investigation (FBI) National Crime Information Center and Interstate Identification Index (NCIC-III) check, and are performed on an annual basis. Therefore, the cognizant District Director of Auxiliary (DIRAUX, dpa) should be immediately contacted to perform the entry-level PSI as quickly as possible. Prior to formal acceptance into the AUXHS program to provide health services, the applicant must be made aware of the expectations defined in paragraphs 12.c-h.
- c. The review of the prospective Auxiliarist's medical qualifications will proceed according to the relevant HSWL SC Technical Directive for Auxiliarists who will volunteer at a Coast Guard clinic, sickbay, or HSWL SC. For Auxiliarists who will provide volunteer services at PSC, CGRC, or Commandant (CG-11), the review will proceed according to Reference (d).
- d. The Auxiliarist will be expected to provide, on average, a minimum of 16 hours over the course of two (2) days of duty per month during normal clinic hours and/or weekends when the clinic needs to provide health care services to various units such as reserve units being activated. Telemedicine and administrative support count for total clinical hours. Up to 48 hours can be banked; these hours do not expire until used. It is expected that medical Auxiliarists will generally provide services at least once per quarter.
- e. The local clinic/sickbay Health Services Administrator (or designee) will serve as the command sponsor for initiating the process of obtaining the Auxiliary Logical Access Card (ALAC). This is performed in accordance with Reference (d) and in close coordination with the servicing ALAC Trusted Agent (TA) in the DIRAUX office. This is a requirement to access the Electronic Healthcare Record and other functions

within the .mil domain. The servicing ALAC TA should be immediately contacted by the ALAC applicant whenever a question or issue arises in the ALAC process. The applicant should also contact the ALAC TA upon receipt of email notification from the Trusted Associate Sponsorship System (TASS) that their ALAC application has been approved (i.e., prior to proceeding to the RAPIDS site for ALAC pick-up) as well as upon actual receipt of their ALAC.

- f. Auxiliary health care personnel who desire to provide physical/in-person health care services are generally to be located within 50 miles of a Coast Guard clinic or sickbay.
 - (1) The 50-mile radius may be waived by Commandant (CG-11) based upon the needs of the unit as requested by the clinic and approved by HSWL SC or Commandant (CG-1121), for PSC and Headquarters units.
 - (2) Waiver Requests for Auxiliary Health Care Providers Residing Greater than 50 Miles from Assigned Clinic/Sick Bay, Form CG-6031, will be submitted by memorandum from the clinic or sickbay to Commandant (CG-11) through HSWL SC. The waiver request will include the specific needs of the clinic or sickbay that will be met by the Auxiliarist, the frequency of the needs, how travel will be funded (by the unit, HSWL SC, or at the Auxiliarist's own expense), and that the Auxiliarist agrees to provide services per the requirements noted in the waiver request.
- g. Auxiliary health care personnel who desire to primarily provide telemedicine services, such as telehealth clinical encounters, Periodic Health Assessments, and support for administrative functions such as fitness for duty determinations (waivers, Medical Evaluation Boards, etc.) and/or policy development/medical data analysis are not required to be located within 50 miles of a CG clinic or sickbay. Such personnel will be associated with the CG health services unit/command/office most appropriate to the type of support they will provide.
- h. Applicants must attain Basic Qualified (BQ) membership status and be current in Auxiliary Core Training (AUXCT) before assignment to clinical duty. All Auxiliary health care personnel must have an Auxiliary High-Risk Assessment Form on file with their cognizant DIRAUX as well as with the command of the clinic, sick bay, or staff office they support whenever required as a pre-requisite for assignment to duty (e.g., filing the Auxiliary COVID-19 High-Risk Assessment Form during the COVID-19 pandemic).

13. ASSIGNMENT.

- a. The funding authority must generate appropriate orders for each AUXHS Program assignment. Reimbursement for travel expenses will proceed IAW Reference (b), Chapter 9.

- b. Auxiliarists will have no command authority or administrative supervisory responsibility, and will at all times be responsible to the Clinic Health Services Administrator, or, for Auxiliarists assigned above the field level, the administrative leader for their unit. For physically provided care, the local medical supervisor of each Auxiliarist will decide on whether volunteer services can be rendered without, a licensed uniformed provider present based on the skill level and experience of each Auxiliarist. In all cases, the normal medical supervisory relationships between different levels and types of health services personnel apply (e.g. a Health Services Technician must follow a medical order given by an Auxiliarist physician unless there is concern that the order is unsafe, unethical, or unlawful).
- c. Professional liability. A Coast Guard Auxiliary health care professional who is assigned to duty shall be deemed a federal employee for purposes of 14 U.S.C. § 3904 for medical liability purposes only. An Auxiliarist health care professional is required to disclose to the Coast Guard a full description of his or her professional background and health care qualifications (including any adverse or disciplinary action taken against the member), the member's medical license, or any credential by any medical board or governing agency. While performing official duties, Auxiliarist health care personnel acknowledge they will perform only those operational/primary health care activities for which they have been approved, credentialed, and/or privileged. Auxiliarists may be subject to civil liability for conduct beyond the scope of their license. Performance of tasks outside the scope of written authorization (as defined by Request of Clinical Privileges) or beyond the scope of the assigned duties authorized by Commandant (CG-11) may subject the Coast Guard Auxiliary health care professional to civil liability and disciplinary action in accordance with Reference (b). An Auxiliarist's assignment to duty determination will be made in accordance with Reference (b).

14. CLINICAL UTILIZATION.

- a. Auxiliary healthcare personnel supporting Coast Guard clinics may provide the full complement of clinical services consistent with their credentials provided they are appropriately privileged (if applicable) and the appropriate facilities/resources are available.
- b. With regard to staff functions, such as those that exist at HSWL SC, PSC, CGRC, USCGA, FORCECOM, and Commandant (CG-11), Auxiliary health care personnel are permitted to support any and all administrative, data analytic, and policy development functions, as long as final products are signed/executed by the appropriate CG uniformed or civil service personnel.
- c. Per Reference (b), medical support to the Coast Guard Academy Introduction Mission (AIM) program is an official mission of the Coast Guard Auxiliary. While Auxiliary/uniformed healthcare professionals are not authorized to provide routine or primary health care services to non-beneficiaries, Auxiliary/uniformed health care professionals participating in the Coast Guard Academy AIM program are authorized to provide common first aid (for example, that which a parent would provide), and/or emergency care and

stabilization for transport, to AIM participants.

- d. Auxiliary dentists who choose to provide Coast Guard services in their private dental office when assigned to Coast Guard duty and when authorized by their Senior Dental Executive may provide routine dental examinations and dental treatments at no cost to the government or to the Coast Guard service.
- e. Auxiliary health care professionals are not authorized to provide health care afloat without a formal request approved by HSWL SC.
- f. Auxiliary healthcare personnel are highly experienced and educated professionals. As such, they are authorized to provide proficiency training to clinic staff complimenting training schedules developed by the Health Services Administrator and SHSO.
- g. Auxiliary healthcare personnel are eligible to participate in Advanced Life Support/Advanced Cardiac Life Support (ALS/ACLS) and Basic Life Support (BLS) certification courses funded by clinics and/or HSWL SC. They may also attend centrally funded "C" school training courses on a space available basis.

15. CREDENTIALING AND PRIVILEGING.

- a. Auxiliary health care professionals will meet and maintain all applicable credentialing and privileging requirements as specified in Reference (a). Commandant (CG-11) is the final authority for any variations from policy regarding the privileging of Auxiliary health care professionals.
 - (1) Once Auxiliary healthcare professionals are fully credentialed and are approved for utilization within a designated Coast Guard location, they may apply for clinical privileges as appropriate and in accordance with Reference (a).
 - (2) Auxiliary healthcare professionals are subject to the same credentialing review process and privileging standards as established for U.S. Public Health Service and Coast Guard healthcare professionals currently assigned to work in Coast Guard clinics per Reference (a).

16. AUXILIARIST HEALTH CARE PERSONNEL RESPONSIBILITIES.

- a. The Auxiliarist must adhere to Coast Guard administrative policies at all times.
- b. The Auxiliarist is responsible, at his/her own expense, to perform all activities required to maintain certifications, licenses, and qualifications, including but not limited to, Healthcare Provider ALS/ACLS/BLS Certifications (unless provided through HSWL SC or a clinic), Drug Enforcement Administration Licenses (only if prescribing controlled medications), and continuing professional education. All Auxiliarist health care personnel serving within a CG clinical facility must have a current BLS health care provider level certification per Reference (a). This certification is not required if

all duties are performed via telemedicine/remotely. Auxiliarist health care providers are eligible for a fee-exempt federal DEA registration, which may only be used while providing clinical services to Coast Guard beneficiaries in support of a Coast Guard facility.

- (1) Any incident or circumstance that might impact the Auxiliarist's credentials or professional status, cause the cessation of membership in the Coast Guard Auxiliary, or any mental or physical condition or impairment that develops which may impact the performance of assigned activities, must be reported within one duty day to the administrative leadership of the clinic or staff office where the Auxiliarist is assigned, as well as to the cognizant professional supervisor and the Auxiliary CMO.
- c. By accepting orders for participation in Coast Guard health care activities, the Auxiliarist agrees to abide by the conditions and policies contained within this Instruction, Reference (b), and as promulgated by authorities empowered to do so by the Coast Guard.
- d. Auxiliary Health Care Personnel must take appropriate steps to ensure protection of patients' privacy rights IAW U.S. privacy law and policy, including the Privacy Act of 1973, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and the CG Freedom of Information Act (FOIA) and Privacy Acts Manual, COMDTINST M5260.3.
17. **FORMS/REPORTS.** The forms referenced in this Instruction are available on the Coast Guard Standard Workstation or on the Internet: www.dcms.uscg.mil/Our-Organization/Assistant-Commandant-for-C4IT-CG-6/The-Office-of-Information-Management-CG-61/Forms-Management/ .
18. **SECTION 508.** This Instruction adheres to Accessibility Guidelines and Standards as promulgated by the U.S. Access Board. If changes are needed, please communicate with the Coast Guard Section 508 Program Management Office at: Section.508@uscg.mil .
19. **REQUESTS FOR CHANGES.** Units and individuals may recommend changes by emailing Commandant (CG-112) at HQS-DG-1st-CG-112@uscg.mil.

/DANA. L. THOMAS/
Rear Admiral, U.S. Coast
Guard Director, Health, Safety,
and Work-Life