



DEPARTMENT OF THE AIR FORCE
WASHINGTON DC 20330-1000

AUG 17 2022

Message to Total Force Airmen and Guardians on Reproductive Health Care Services

Airmen and Guardians,

The Department of the Air Force is committed to ensuring that our beneficiaries have access to critical reproductive health care services and information necessary to make well-informed health care decisions. As you may have seen, the Department of Defense (DoD) published "Questions from the Force on Essential Women's Health Care Services for Service Members, Dependents, Beneficiaries, and Department of Defense Civilian Employees"ⁱ on August 12, 2022, which provides essential information about existing reproductive health care resources, and clarifies existing policies covering access to those resources following the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization*.

This message summarizes the most critical pieces of information to ensure Airmen and Guardians are informed about the full suite of reproductive health care services offered by the Department. We encourage you to also reference the comprehensive list of DoD questions and answers.

1. **Contraception.** DoD Military Treatment Facilities (MTFs) provide multiple forms of free contraceptives to beneficiaries. Please see the enclosed chart for more information about types of contraceptives available, as well as information on prescription and co-pay requirements for beneficiaries. As of July 28, 2022, Airmen and Guardians no longer have co-pays associated with off-base care for long-acting, reversible contraceptives, like IUDs, injections, and subdermal implants. Effective January 2023, tubal ligation co-pays will also be removed.
2. **Covered Abortions.** Covered abortions are abortions where the life of the mother would be endangered if the fetus were carried to term, or if the pregnancy is the result of rape or incest. DoD performs or pays for covered abortions for beneficiaries.ⁱⁱ DoD will continue to provide necessary medical services to treat ectopic or molar pregnancies, and DoD providers at MTFs will continue to provide services as part of their federal duties if medically appropriate, even if those services are restricted or prohibited by state law.ⁱⁱⁱ
3. **Privacy.** Your senior leaders recognize that reproductive health care decisions often involve deeply personal health and medical decision-making. Airmen and Guardians are not required to inform anyone in their chain of command that they have received and/or intend to receive a covered or non-covered abortion. Commanders will be informed of any aftercare plans or limitations post procedure; however, medical providers will not inform commanders of the specific medical condition/procedure.^{iv} Additionally, there is no requirement for a patient to report or participate in a formal investigation of a sexual assault for the patient to access abortion services at an MTF for a pregnancy resulting from rape or incest.^v
4. **Leave.** There are various options regarding leave requests for covered and non-covered abortions. If an absence from duty is required for an abortion, then an Airman or Guardian must be in an approved leave status or on medical orders.

For a covered abortion, absence from duty is handled through the medical orders process as overseen by military medical providers. Absences for Active Duty Airmen and Guardians obtaining a covered abortion for themselves or their dependents will be handled through MTFs. Active Duty Airmen and Guardians will notify their supervisor that they are traveling on medical orders. Active Duty Airmen and Guardians who need to travel to receive a covered abortion are eligible for government-funded official travel. Further, beneficiaries who need a covered

abortion—but do not want to utilize MTFs—can, if they desire, follow procedures for a non-covered abortion.

Airmen and Guardians seeking a non-covered abortion for themselves or their dependents must request regular leave. While Airmen and Guardians are not required to provide a reason for leave, supervisors can deny leave requests in support of mission requirements. However, Airmen and Guardians may choose to share that the leave request is for a reproductive health procedure, which will be considered time sensitive, consistent with AFGM 2022-01, AFI 44-102, *Medical Care Management*.^{vi} Leave approval authorities should approve leave requests for reproductive health procedures.^{vii}

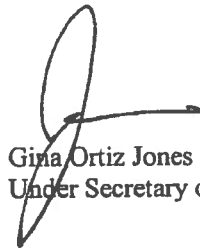
Unit commanders, unless otherwise specified, normally approve convalescent leave consistent with the recommendations from a medical provider and in accordance with guidance provided by DAFI 36-3003, *Military Leave Program*.^{viii} Active Duty Airmen and Guardians do not have to tell commanders that they had an abortion to receive convalescent leave, but may seek a recommendation for convalescent leave from a military medical provider. All DoD beneficiaries are encouraged to follow up with a healthcare professional as soon as possible after undergoing a medical procedure.^{ix} This follow-up care is available regardless of whether the abortion service was a covered or non-covered procedure.^x

We share Secretary Austin’s commitment to prioritizing the health and well-being of our Service members, the civilian workforce, and DoD families. If you experience challenges with obtaining reproductive health care services, to include contraception, at your MTF, we encourage you to call your local patient relations representative or patient relations manager. Patient advocate contact information is available directly at local MTFs. If your concerns are not adequately resolved, patients also have the right to contact The Joint Commission at 1-800-994-6610. The Department of the Air Force will continue to communicate additional information as it becomes available, and we encourage you to reach out through your chain of command with any concerns regarding access to essential health care.

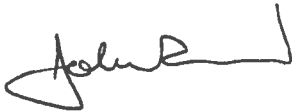
One Team, One Fight!



Frank Kendall
Secretary of the Air Force



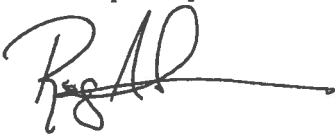
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ⁱ *Questions from the Force on Essential Women's Health Care Services for Service Members, Dependents, Beneficiaries, and Department of Defense Civilian Employees*, August 12, 2022, <https://health.mil/Reference-Center/Publications/2022/08/12/Questions-from-the-Force-on-Essential-Womens-Health-Care-Services> ("DoD FAQs").

ⁱⁱ USD Cisneros Memo, 28 June 2022; 10 U.S. Code 1093 – Performance of abortion; restrictions.

ⁱⁱⁱ DoD FAQs.

^{iv} AFGM 2022-01, AFI 44-102, *Medical Care Management*.

^v DoD FAQs.

^{vi} AFGM 2022-01, AFI 44-102, *Medical Care Management*.

^{vii} AFGM 2022-01, AFI 44-102, *Medical Care Management*.

^{viii} DAFGM 2022-01, DAFI36-3003, *Military Leave Program*.

^{ix} This follow-up should be consistent with AFGM 2022-01, AFI 44-102, *Medical Care Management* on reproductive health procedures.

^x DoD FAQs.