

MANUAL: Personnel
Chapter Series CC--Commissioned Corps Personnel Manual
Part 2--Commissioned Corps Personnel Administration

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Chapter CC22--Pay and Allowance Administration
Subchapter CC22.2--Special Pays
Personnel INSTRUCTION 9--Multiyear Retention Bonus

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Section A. Purpose and Scope

This INSTRUCTION states the conditions and circumstances under which medical and dental officers of the Public Health Service (PHS) Commissioned Corps may be paid Multiyear Retention Bonus (MRB). The purpose of MRB is to aid the Department of Health and Human Services (HHS) in recruiting and retaining competent medical and dental officers with clinical specialty skills training.

Section B. Authority

1. Medical officers in the Armed Forces are authorized MRB by 37 U.S.C. 301d and dental officers are authorized MRB by 37 U.S.C. 301e. The PHS Act (42 U.S.C. 210(a)(2)) specifies that medical and dental officers on active duty in the PHS Commissioned Corps are authorized special pay in the same amounts as, and under the same terms and conditions which apply to, the special pay paid to commissioned medical and dental officers of the Armed Forces under Chapter 5 of Title 37, U.S. Code.
2. The authority to administer the PHS Commissioned Corps is prescribed in 42 U.S.C. 216 of the PHS Act. The authority for daily administration of the PHS Commissioned Corps has been delegated to the Director, Division of Commissioned Personnel (DCP), Human Resources Service (HRS), Program Support Center (PSC).

Section C. Definitions

For the purpose of this INSTRUCTION, the following definitions shall apply:

1. Multiyear Retention Bonus. A special pay for physicians and dentists with clinical skills training in shortage specialties.
2. Multiyear Retention Bonus Contract. A written agreement, which has been properly signed and notarized, by which an officer agrees to remain on active duty for a specified number of years, beginning on the effective date of the agreement. An agreement to serve under the MRB program shall be executed on Form PHS-6300-1, "Medical Special Pay (MSP) Contract" or Form PHS-6289, "Dental Special Pay (DSP) Contract" (see Exhibit I of this INSTRUCTION).
3. Call to Active Duty (CAD) For Not Less Than 2 Years. An order to active duty by personnel order which specifies either:
 - a. No terminal date for the tour of duty; or

- b. A terminal date for the tour of active duty that is at least 2 years after the effective date of CAD.

- 4. Creditable Service. The officer's years of active duty as a medical or dental officer in the Uniformed Services, and the years such officer spent participating in a medical internship and/or residency training program while not on active duty with a Uniformed Service. [See INSTRUCTION 3, Subchapter CC22.2, "Retention Special Pay," of the Commissioned Corps Personnel Manual (CCPM) for medical officers, or INSTRUCTION 2, Subchapter CC22.2, "Additional Special Pay," of the Commissioned Corps Personnel Manual (CCPM) for dental officers].

- 5. Creditable Service Entry Date. The service entry date used to determine the rates of special pay for medical and dental officers.

- 6. Retention Special Pay (RSP). A lump-sum bonus payable on an annual basis to medical officers who contract to serve on active duty in the commissioned corps for 1, 2, 3, or 4 years. (See INSTRUCTION 3, Subchapter CC22.2, of the CCPM.)

- 7. Additional Special Pay (ASP). A lump-sum bonus payable on an annual basis to dental officers who contract to serve on active duty in the commissioned corps for 1, 2, 3, or 4 years. (See CCPM INSTRUCTION 2, Subchapter CC22.2.)

- 8. Board Certified. For the purposes of MRB, "board certified" is defined in Section C.3. for medical officers and Section H for dental officers, INSTRUCTION 1, Subchapter CC22.2, "Monthly Special Pays for Medical, Dental, Optometry, and Veterinary Officers," of the CCPM.

- 9. Board Certified Equivalency (BCE). For the purposes of MRB, "board certified equivalency" for dental officers is defined in Section I., INSTRUCTION 1, Subchapter CC22.2, "Monthly Special Pays for Medical, Dental, Optometry, and Veterinary Officers," of the CCPM.

- 10. Fully Trained in a MRB Specialty. For the purposes of MRB, "fully trained in a medical specialty" is defined as satisfactory completion of an accredited residency training program approved by the Accreditation Council for Graduate Medical Education or the Advisory Board for Osteopathic Specialists of the American Osteopathic Association. "Board eligible" is not synonymous with "fully trained."

For the purposes of MRB, "fully trained in a dental specialty" is defined as satisfactory completion of a residency or training program accredited or accepted by the Commission on Dental Accreditation of the American Dental Association, but excluding the 12-month general practice residency (GPR) or 12-month advanced education in general dentistry (AEGD). "Fully trained" in a dental specialty also includes a residency or training program provided by

the Department of Defense which meets its Dental MRB criteria for "fully trained." Note: "Board eligible" is not synonymous with "fully trained."

11. Research Officer Group (ROG). Officers who are members of ROG (independent of tenure status) as defined in CCPM, INSTRUCTION 1, Subchapter CC23.6, "Research Officer Group," who are involved with basic research.
12. Clinical Pharmacology. To be designated as a clinical pharmacologist for the purpose of this special pay, a medical officer must provide written proof of board certification in clinical pharmacology by the American Board of Clinical Pharmacology, or must complete a 2-year postdoctoral fellowship training in clinical pharmacology with or without board certification in another clinical specialty.
13. Dental Research. To receive Dental MRB in this specialty, an officer must qualify for Board Certification Equivalency as a Dental Scientist per Section I.3., INSTRUCTION 1, Subchapter CC22.2, "Monthly Special Pays for Medical, Dental, Optometry, and Veterinary Officers," of the CCPM.

Section D. Eligibility

To be eligible for MRB, a medical or dental officer must:

1. Be entitled to RSP (referred to as "additional special pay" in the United States Code) under 37 U.S.C. 302(a)(4) or ASP under 37 U.S.C. 302b;
2. Be in pay grade 0-6 or below;
3. Not be participating in HHS-supported long-term training as defined in INSTRUCTION 1, Subchapter CC25.2, "Extramural Training," of the CCPM;

NOTE: Half-time Training. For those medical or dental officers who are enrolled in a 2-year training program which requires only half-time training and is designed to lead to a certificate which allows 1 year of training credit for the 2 years of half-time training, such officers will be ineligible for MRB for the first full year of half-time training; however, they will be deemed eligible for MRB for the second year of such half-time training provided they have successfully completed the first year. If an officer has not successfully completed the first year of half-time training, then he/she shall remain ineligible until he/she can provide proof of successful completion of that year. For example, a medical officer who has completed a master's in Public Health undertakes a residency program which will lead to eligibility for board certification in another specialty. The training period begins July 1996 and ends June 1998. He/she begins the training on a half-time basis in July 1996. At the time of entry into training, the officer loses eligibility for MRB for one full year, even though he/she was working as a medical officer for half-time during that

year. However, in July 1997, the officer would regain eligibility for MRB even though he/she was in training on a half-time basis.

If the officer changes his/her residency and enters a program which requires an additional 3 years of full-time training for board eligibility, then the officer working half time would lose MRB eligibility for the initial 3 years of such training.

If an officer who has lost eligibility for the first year of half-time training does not complete the second year of half-time training, there shall be no pro rata payment for the initial year of training, nor shall the officer be considered eligible for MRB during any portion of that training year completed.

4. Not be serving obligated service pursuant to participation in a HHS-supported scholarship or training program;
5. Not be serving obligated service to HHS by virtue of transfer from another Uniformed Service. However, if the officer has 8 years of creditable service, he/she is eligible regardless of obligation;
6. Not be serving under a Medical Officer Retention Bonus (MORB) or Incentive Special Pay-Research Officer Group (ISP-ROG) contract;
7. Be eligible to remain on active duty for the specified term of the contract;

NOTE: MRB contracts will not be processed for medical or dental officers who have or will attain 30 years of active service prior to the expiration date of the contract unless approved for an extension of service beyond 30 years. For example, a medical or dental officer who has 26 or more years of retirement credit will not be permitted to enter a MRB contract with an expiration date beyond his/her mandatory retirement date. A medical or dental officer will be permitted to renegotiate his/her special pay contract on the anniversary of 26 years of retirement credit in order to provide receipt of the special pays for the remaining 4 years of expected service.

8. Submit documentation of a current unrestricted licensure or approved waiver consistent with the licensure policy which is found in CCPM, INSTRUCTION 4, Subchapter CC26.1, "Professional Licensure/Certification Requirements for Commissioned Officers in the Public Health Service," of this manual. All licensure waivers will expire on December 31, 1999. Officers who are not in compliance with this policy will face involuntary separation from active duty;

9. Be board certified, board certified equivalent (dental officers), or fully trained, as defined in Section C., above, in a medical or dental specialty specified in Section F., below;
10. Be capable of undertaking the clinical practice of his/her specialty, which may be verified by assignment to a clinical practice billet, by being credentialed to practice at a Federal health care facility, or by being credentialed to practice by a recognized health care facility. If an officer is not in full-time clinical practice, as reflected in his/her billet, the officer must submit documentation of current or planned involvement in clinical practice or in the application of their advanced training skills for the equivalent of 14 days (112 hours) per year. This practice activity must be reflected in the officer's billet if it is completed at a federally owned facility; and
11. Provide information supporting the practice of their MRB specialty in other than Federal facilities. Such outside work activities must be approved in advance by the Operating Division, Agency, or Program to which the officer is assigned. At the time of recertification for payment, documentation such as a letter from the health care facility granting clinical privileges and dates of clinical activities shall be provided before an anniversary payment is authorized. Medical officers who are members of ROG, who are in appropriate ROG billets and engaged in biomedical research, and who meet the requirements of 1 through 7 of this section are eligible for MRB at the ROG rate.

Section E. Responsibilities

DCP is responsible for:

1. Certifying that medical and dental officers receiving MRB meet the eligibility requirements specified in Section D., above;
2. Issuing implementing instructions for administering the MRB program, and
3. Awarding MRB payments in accordance with the needs of the Service.

Section F. Rates of Multiyear Retention Bonus

1. The annual amount of MRB to which a medical or dental officer is entitled shall be based on the officer's specialty training and the needs of the Service. Rates for contracts are included in Exhibit II.
2. Officers presently serving under RSP or ASP contracts, who are eligible to receive MRB, shall terminate the current RSP or ASP contract and shall execute a new RSP or ASP contract with dates concurrent with the MRB

contract. A payback for the unserved portion of the RSP or ASP contract shall be calculated based on 1/360 for each day not served. The payback shall be collected from the new RSP or ASP contract amount at the time of payment for the new RSP or ASP and MRB contracts.

3. MRB contracts will be payable in equal annual installments. The initial annual installment will be paid upon acceptance of the MRB service agreement and issuance of personnel orders. Payments of subsequent installment amounts will be made on the anniversary date of the contract contingent upon written verification of completion of the previous year's required clinical practice requirement and current licensure as appropriate. Payment will normally be made within 90 days after the effective date or the anniversary date of the contract. Payments for MRB are payable only in the regular monthly payroll.
4. Officers who become eligible to receive MRB at a higher rate as a result of certification (or additional training to become "fully trained"), will be entitled to the new rate of MRB at the time of the next annual installment provided documentation is received and approved prior to the issuance of the annual payment.
5. Unless otherwise precluded by law, medical and dental officers who sign MRB contracts who would be eligible for larger payments under future special pay legislation, will have the option of executing an agreement under the new legislation only if the new agreement would extend beyond the officer's current MRB obligation. Officers in specialties with a zero rate of MRB and an ISP rate that is greater than their current MRB or MRB/ISP bonus(es), may renegotiate into an ISP contract for the higher amount. In these cases, the new agreement would not extend beyond the current MRB obligation; however, renegotiation would be allowed under this special circumstance.
6. Officers are not eligible for voluntary retirement for the duration of their contracts.
7. Officers currently under MORB contracts or ISP-ROG contracts may terminate their current contracts and enter a MRB contract provided the duration of the new MRB contract is equal to or greater than the duration of their current contracts or the new agreement extends beyond the officer's current MORB or ISP-ROG contract obligation.

Section G. Voluntary Termination of Multiyear
Retention Bonus Contracts

1. MRB shall be terminated if the officer requests release from active duty or upon completion of the contract period.
2. An officer who requests release from active duty prior to the expiration of the MRB contract shall have his/her commission terminated and shall be divested of entitlements for travel and transportation allowances for himself/herself and his/her dependents, shipment of household goods, use of, transfer of, or payment for unused annual leave upon release from active duty. The officer shall pay back all amounts received for longevity (amounts in excess of the 2-year contract rate) and a pro rata amount for his/her specialty and RSP based on 1/360 for each day not served. For example, if an officer with a specialty in family practice enters a 4-year MRB contract and then separates from active duty after serving only 3 years and 9 months of the contract, the officer's MRB will be reduced to the 2-year contract rate. Since the officer in this example will have received four MRB payments of \$14,000 each, totaling \$56,000, the officer will have to pay back \$41,000. The officer would be entitled to 3 years of MRB at the 2-year rate plus 9/12 of the third year ($\$4,000 \times 3 = \$12,000 + 9/12$ of \$4,000) totaling \$15,000.
3. Medical and dental officers who enter 2, 3, or 4-year contracts may be given the opportunity to extend the period covered by the contracts under certain conditions. For example, if the rates of special pay increase, the medical or dental officer may renegotiate a new contract to obtain a higher rate. However, for purposes of computing a medical or dental officer's indebtedness if he/she fails to complete the full service obligation incurred under the initial contract, the new contract shall be considered an extension of the initial contract.

For example, if a medical or dental officer entered a 4-year contract effective January 1, 1997, and the rates for a 4-year contract increased on January 1, 1999, the officer would be permitted to sign another contract for four additional years effective January 1, 1999, so that he/she could receive higher rates. However, if the officer separated from active duty prior to December 31, 2000 -- the termination date of the initial contract, the officer's indebtedness would be computed on the basis of the 2-year pay rate in effect on January 1, 1997, for the 1997 and 1998 contract years, and the 2-year rate in effect on January 1, 1999, for the contract year 1999 and subsequent years.

4. The MRB payment of officers promoted to pay grade 0-7 or above or officers who enter a HHS-supported long-term training program shall be recouped at a pro rata amount based upon the effective date of promotion or date of entrance into long-term training.
5. An officer with fewer than 30 years of creditable service shall not be

permitted to retire prior to the expiration date of the current contract. The effective date of retirement shall be no earlier than the first of the month subsequent to the expiration date of the contract.

Section H. Involuntary Termination of MRB Contracts

1. Misconduct. If an officer is disciplined for misconduct while under an MRB contract, the officer shall be referred to a special pay review board. A special pay review board will be convened within 30 days of the disciplinary action or as directed by the Director, DCP. A special pay review board will recommend to the Director, DCP, when the officer will be next eligible for special pay consideration.

2. Deterioration of Performance. If there is deterioration in an officer's performance, the Director, DCP, may at any time, refer the officer's record to the Medical Officer Special Pay (MOSP) or Dental Officer Special Pay (DOSP) Review Board for recommendations regarding continuance of MRB. If the MOSP or DOSP Review Board finds that the officer's performance has deteriorated to a level at which no premium should be placed on continued service, and the appropriate HHS official concurs, the officer's MRB contract shall be terminated within 30 days of such recommendation. The officer shall be required to repay a pro rata portion of the last annual payment as specified in Section F., above. In addition, such officer shall not again be considered for MRB for at least 1 year after the date the contract is terminated.
 - a. If the MOSP or DOSP Review Board approves the officer's continued eligibility and the appropriate HHS official concurs, then the officer and the program liaison official will be so notified by DCP.

 - b. If the MOSP or DOSP Review Board finds that the officer's performance is at a level or has deteriorated to a level at which no bonus should be paid for the officer's current service and the appropriate HHS official concurs, then the officer and the program liaison official will be notified by DCP. The effective date for contract termination will be the date the appropriate HHS official concurs with the MOSP or DOSP Board's recommendation. This officer shall be ineligible for MRB for one full year of active duty from the date of contract termination. The officer shall be required to repay a pro rata portion of the last annual payment as specified in Section F., above. If, after the MOSP or DOSP Review Board's recommendation to approve payment of MRB, the program subsequently submits another COER citing poor performance, then the next MOSP or DOSP Review Board may evaluate only that performance which is subsequent to the date of the original MOSP or DOSP Review Board's recommendation. Subsequent to denial of MRB by a MOSP or DOSP Review Board and termination of the existing MRB contract, if an

- officer requests separation from the Corps, there shall be no divestiture action taken against an officer for breaking a contract, provided the separation occurs prior to the next MRB contractual agreement. If an officer under contract submits a request for separation prior to a recommendation by the MOSP or DOSP Review Board, then he/she shall be treated as having broken a contract and divestiture of lump-sum leave, travel, and transportation entitlements shall apply. An officer, who has been denied MRB by a MOSP or DOSP Review Board, shall not again be eligible for MRB until a satisfactory COER, covering at least a 6-month period of time, has been received by DCP.
3. Failure to be Recommended for Promotion. If a promotion board recommends against either a permanent or temporary promotion while under a special pay contract, the officer shall be referred to a special pay review board at the time of renewal or subsequent annual payment for consideration. If the officer separates prior to the completion of his/her current contract, the officer shall be required to repay a pro rata for the unserved portion of the payment.
 4. Failure of Annual Recertification. An officer serving under a multiple-year contract who is not recertified for the second or subsequent year(s), will have the contract terminated as of the last day of the period for which the last payment was received. There are to be no repayments of any amounts already paid. Such officer shall not again be considered for MRB for at least 1 year after the date the contract is terminated.
 5. Entry into Training. If a medical or dental officer serving under an MRB contract enters into a medical or dental internship or into initial residency training as defined in Section C.2. and 3., above, respectively, the contract shall be terminated as of the effective date of assignment to training. An officer whose MRB contract is terminated under this provision shall be required to repay a pro rata portion of the last annual payment as specified in Section F., above.
 6. LWOP Status. A medical or dental officer who enters LWOP status shall have his/her contract terminated as of the effective date of the LWOP. An officer whose MRB contract is terminated under this provision shall be required to repay a pro rata portion of the last annual payment as specified in Section F., above. The officer shall not again be eligible for MRB until his/her return to pay status.
 7. Involuntary Retirement. A medical or dental officer who is involuntarily retired under the provisions contained in Subchapter CC23.8, INSTRUCTION 3 or 4, of the CCPM, shall have his/her MRB contract terminated on the effective date of the officer's retirement. An officer whose MRB contract is terminated under this provision shall be required to repay a pro rata portion of the last annual payment as specified in Section F., above.

8. Disability Retirement. If a medical or dental officer is retired (temporarily or permanently) for disability while serving under an MRB contract, the contract is automatically terminated as of the date the officer is placed in retired status. An officer whose MRB contract is terminated under this provision will not be required to repay a pro rata portion of the last annual payment provided that the disability is not the result of misconduct or willful neglect and not incurred during a period of unauthorized absence. An officer eligible for an MRB contract who is considering applying for a disability retirement may sign an MRB contract since there is no assurance that the disability retirement will be approved.

9. Involuntary Separation or Retirement for Convenience of the Government. If a medical or dental officer is released from active duty or retired because of a reduction in strength, numbers limitation, or other reasons for the convenience of the Government, while serving under an MRB contract, the contract is automatically terminated as of the date of the officer's separation or retirement. There are to be no repayments of any amounts already received.

10. Death. In the event an officer dies while serving under an MRB contract, the contract is automatically terminated as of the date of the officer's death. There are to be no repayments of any amounts already received.

Section I. Absence Without Leave (AWOL)

Under 37 U.S.C. 503(b), any period during which an officer is determined to be in an AWOL status shall not be credited toward fulfillment of an active-duty obligation incurred under an MRB contract, and shall serve to extend the period of active duty required by the contract.

J. Privacy Act Provisions

Payroll records are subject to the Privacy Act of 1974. The applicable systems of records are 09-40-0001, "PHS Commissioned Corps General Personnel Records," HHS/PSC/HRS; and 09-40-0003, "PHS Commissioned Corps Board Proceedings," HHS/PSC/HRS.

EXHIBIT I

MEDICAL SPECIAL PAY CONTRACT

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE

MEDICAL SPECIAL PAY (MSP) CONTRACT REQUEST <small>(Privacy Act Notice on Reverse)</small>			DCP USE ONLY
			DATE REC.:
IDENTIFICATION			
a. NAME (Last, First, Middle Initial)	b. GRADE/RANK	c. PHS SERIAL NUMBER	CT. DATE:
d. ORGANIZATION	e. DUTY PHONE NUMBER	f. SSAN	EXP. DATE:
SPECIAL PAY(S) REQUESTED <small>(Check appropriate box(es))</small>			
<input type="checkbox"/> RETENTION SPECIAL PAY (RSP) <small>(1, 2, 3, or 4 year contracts)</small>	<input type="checkbox"/> MULTIYEAR RETENTION BONUS (MRB) <small>(2, 3, or 4 year contracts, concurrent with RSP)</small>	<input type="checkbox"/> INCENTIVE SPECIAL PAY (ISP) <small>(1 year--if MRB contract, rate of concurrent ISP fixed for duration of MRB)</small>	
CONDITIONS OF CONTRACT			
<p>In consideration of payment of the above requested special pay for which I qualify under 42 U.S.C. 210(a)(2), 37 U.S.C. 302(a)(4), 302(b), and 301d, and implementing policies prescribed in INSTRUCTIONS 3, 9, and/or 10, Subchapter CC22.2, of the Commissioned Corps Personnel Manual (CCPM), I hereby agree to the following:</p> <p>A. To remain on active duty in the Public Health Service (PHS) Commissioned Corps for 12, 24, 36, or 48 consecutive months from the effective date of this contract. (CHECK ONLY ONE) <input type="checkbox"/> 12 MONTHS <input type="checkbox"/> 24 MONTHS <input type="checkbox"/> 36 MONTHS <input type="checkbox"/> 48 MONTHS</p> <p>B. That the EFFECTIVE date shall be the DATE THE NOTARIZED CONTRACT IS RECEIVED in the Compensation Branch (CB), Division of Commissioned Personnel (DCP), except for conditions listed below: (1) Effective date for initial contracts shall be the: (a) Date I attain eligibility for MSP provided the completed contract is received in CB, DCP, within 60 days after I am initially eligible, and the contract bears my signature, notarized within 30 days after I am initially eligible for MSP; or (b) Date the completed contract is notarized if received in CB, DCP, within 60 days of the date of eligibility but has not been notarized within 30 days of the date of initial eligibility; or (c) Later date, if eligible, specified by me, which is _____ / ____ / ____ (2) Effective date for subsequent contracts shall be the: (a) Date following the date the preceding contract expires, provided the completed contract is received in CB, DCP, within 60 days after the date of expiration of the previous contract, and the contract bears my signature, notarized on or before the date following the date the preceding contract expired; or (b) Date the completed contract is notarized if received in CB, DCP, within 60 days after the date of expiration of the previous contract, but has not been notarized on or before the date the previous contract expired.</p> <p>C. If this contract is terminated prior to its expiration date for reasons other than as identified in F. below: (1) I shall be required to refund a pro rata portion of any payments received pursuant to this contract. (For 1-year RSP and/or ISP and 2-year MRB contracts, that portion that represents 1/360 of the annual payment for each day of the year not served. In the case of 3-year and 4-year MRB contracts, the amount prorated will be the minimum bonus (2-year bonus amount)). The additional bonus amount for 3-year and 4-year contracts will not be prorated and must be repaid in its entirety; (2) I shall be divested of entitlements for travel and transportation allowances for myself and my dependents, shipment of household goods, use of, transfer of, or payment for unused annual leave to my credit upon separation from the PHS Commissioned Corps; (3) Any amount which I am obligated to refund because this contract is terminated shall be a debt due to the United States which I hereby agree to pay in full as directed by the appropriate collection officials. In accordance with Treasury Fiscal Requirements Manual (1 TFRM 6-8000, Cash Management), late charges may be assessed for payments made after the due date on amounts owed to the United States Government; and (4) I shall have my commission terminated.</p> <p>D. That a period of Absence Without Leave (AWOL) shall not be credited to fulfillment of the active-duty obligation incurred pursuant to this contract and that the period of such active-duty obligation shall be extended by the number of days of AWOL.</p> <p>E. That the policies (INSTRUCTIONS 3, 9, and/or 10, Subchapter CC22.2, of the CCPM) which implement the MSP provisions of 42 U.S.C. 210(a)(2) and 37 U.S.C. 302(a)(4), 302(b), and 301d are incorporated into and made part of this contract.</p> <p>F. That if I enter a long-term training program (i.e., training which is creditable toward board certification) this contract shall be terminated and I shall repay an amount as specified in C.(1) above.</p> <p>G. That I am NOT ELIGIBLE for voluntary retirement for the duration of this contract.</p>			
CERTIFICATION			
I certify that I understand and agree to the terms of this contract as stated above.			
SIGNATURE			DATE
NOTARIZATION			
Subscribed and sworn before me this _____ day of _____, A.D. _____			
at City _____ State _____ Zip Code _____			
SIGNATURE			Date Commission Expires

PHS-6300-1 (FRONT)
Rev. 4/89

1st Copy DCP

2nd Copy OPERATING DIVISION/ PROGRAM

3rd Copy OFFICER

EXHIBIT I (continued)

DENTAL SPECIAL PAY CONTRACT

U.S. Department of Health and Human Services Public Health Service DENTAL SPECIAL PAY (DSP) CONTRACT REQUEST (Privacy Act Notice on Reverse)			DCP USE ONLY
			DATE REC.
1 IDENTIFICATION			CT. DATE
a. NAME (Last, First, Middle Initial)	b. GRADE/RANK	c. PHS SERIAL NUMBER	DCP. DATE
d. ORGANIZATION	e. DUTY PHONE NUMBER	f. SSAN	
2 SPECIAL PAY(S) REQUESTED (Check appropriate box(es))			
<input type="checkbox"/> ADDITIONAL SPECIAL PAY (ASP) (1 year contract, or 2, 3, 4 year contracts with MRB)		<input type="checkbox"/> MULTIYEAR RETENTION BONUS (MRB) (2, 3, or 4 year contracts, concurrent with ASP)	
3 CONDITIONS OF CONTRACT			
<p>In consideration of payment of the above requested special pay for which I qualify under 42 U.S.C. 210(a)(2) and 37 U.S.C. 302b and 301d, and implementing policies presented in INSTRUCTIONS 2 and 9, Subchapter CC22.2, of the Commissioned Corps Personnel Manual (CCPM), I hereby agree to the following:</p> <p>A. To remain on active duty in the Public Health Service (PHS) Commissioned Corps for 12, 24, 36, or 48 consecutive months from the effective date of this contract. (CHECK ONLY ONE) <input type="checkbox"/> 12 MONTHS <input type="checkbox"/> 24 MONTHS <input type="checkbox"/> 36 MONTHS <input type="checkbox"/> 48 MONTHS</p> <p>B. That the EFFECTIVE date shall be the DATE THE NOTARIZED CONTRACT IS RECEIVED in the Compensation Branch (CB), Division of Commissioned Personnel (DCP), except under the conditions listed below:</p> <p>(1) Effective date for initial contracts shall be the:</p> <p>(a) Date I attain eligibility for DSP provided the completed contract is received in CB, DCP, within 60 days after I am initially eligible, and the contract bears my signature, notarized within 30 days after I am initially eligible for DSP; or</p> <p>(b) Date the completed contract is notarized if received in CB, DCP, within 60 days of the date of eligibility but has not been notarized within 30 days of the date of initial eligibility; or</p> <p>(c) Later date, if eligible, specified by me, which is _____ (Month) (Days) (Year)</p> <p>(2) Effective date for subsequent contracts shall be the:</p> <p>(a) Date following the date the preceding contract expires, provided the completed contract is received in CB, DCP, within 60 days after the date of expiration of the previous contract, and the contract bears my signature, notarized on or before the date following the date the preceding contract expired; or</p> <p>(b) Date the completed contract is notarized if received in CB, DCP, within 60 days after the date of expiration of the previous contract, but has not been notarized on or before the date the previous contract expired.</p> <p>C. If this contract is terminated prior to its expiration date for reasons other than as identified in F. below:</p> <p>(1) I shall be required to refund a pro rata portion of any payment received pursuant to this contract. (For 1-year ASP and 2-year MRB contracts, that portion that represents 1/360 of the annual payment for each day of the year not served. In the case of 3-year and 4-year MRB contracts, the amount prorated will be the minimum bonus (2-year bonus amount)). The additional bonus amount for 3-year and 4-year contracts will not be prorated and must be repaid in its entirety;</p> <p>(2) I shall be divested of entitlements for travel and transportation allowances for myself and my dependents, shipment of household goods, use of, transfer of, or payment for unused annual leave to my credit upon separation from the PHS Commissioned Corps;</p> <p>(3) Any amount which I am obligated to refund because this contract is terminated shall be a debt due to the United States which I hereby agree to pay in full as directed by the appropriate collections officials. In accordance with Treasury Fiscal Requirements Manual (1) TRFM 5-8000, Cash Management, late charges may be assessed for payments made after the due date on amounts owed to the United States Government; and</p> <p>(4) I shall have my commission terminated.</p> <p>D. That a period of Absence Without Leave (AWOL) shall not be credited toward fulfillment of the active-duty obligation incurred pursuant to this contract and that the period of such active-duty obligation shall be extended by the number of days of AWOL.</p> <p>E. That the policies (INSTRUCTIONS 2 and 9, Subchapter CC22.2, of the CCPM) which implement the DSP provisions of 42 U.S.C. 210(a)(2) and 37 U.S.C. 302b and 301d are incorporated into and made part of this contract.</p> <p>F. That if I enter a long-term training program as defined in INSTRUCTION 1, Subchapter CC25.2, of the CCPM, or a dental residency training program, (i.e., training which is creditable toward board certification) the contract shall be terminated and I shall repay an amount as specified in C.(1) above.</p> <p>G. That I am NOT ELIGIBLE for voluntary retirement for the duration of this contract.</p>			
4 CERTIFICATION			
I certify that I understand and agree to the terms of this contract as stated above.			
SIGNATURE			DATE
5 NOTARIZATION			
Subscribed and sworn before me this _____ day of _____, A.D., _____ (month) (year)			
at City _____ State _____ Zip Code _____			
SIGNATURE		Date Commission Expires	

PHS-6289 (FRONT)
(Rev. 4/98)

1st Copy DCP 2nd Copy OPERATING DIVISION / PROGRAM 3rd Copy OFFICER

EXHIBIT II

1. Critical Specialty Amount effective January 1, 1991:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
Orthosur	1000	\$4,000	\$8,000	\$14,000
Ophthalm	5800	\$4,000	\$8,000	\$14,000
Radiology	1800	\$4,000	\$8,000	\$14,000
Dia Radio	1803	\$4,000	\$8,000	\$14,000
Nuclear	2400	\$4,000	\$8,000	\$14,000
Obst&Gyn	0800	\$4,000	\$8,000	\$14,000
Dermatol	0300	\$4,000	\$8,000	\$14,000
Card Dis	0602	\$4,000	\$8,000	\$14,000
EmerMed	6200	\$4,000	\$8,000	\$14,000
Psychiat	1701	\$4,000	\$8,000	\$14,000
ROG	9997/9998	\$4,000	\$8,000	\$14,000
Urology	2000	\$4,000	\$8,000	\$14,000
Group II				
Surgery	5400	\$3,000	\$6,000	\$10,000
Anesthes	0100	\$3,000	\$6,000	\$10,000
Otolaryn	1200	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
FmlyPrac	0501	\$3,000	\$6,000	\$10,000
Phy&Rehb	1600	\$3,000	\$6,000	\$10,000
Neurology	1702	\$3,000	\$6,000	\$10,000
Prevtive	1900	\$3,000	\$6,000	\$10,000
Aospace	2200	\$3,000	\$6,000	\$10,000
Occupatl	2300	\$3,000	\$6,000	\$10,000
Group III				
Allergy	0601	\$2,000	\$4,000	\$8,000
Pulm-Dis	0606	\$2,000	\$4,000	\$8,000
Endo&Met	0607	\$2,000	\$4,000	\$8,000
Hematolo	0608	\$2,000	\$4,000	\$8,000
Infctdis	0609	\$2,000	\$4,000	\$8,000
Nephrolo	0610	\$2,000	\$4,000	\$8,000
Oncology	0611	\$2,000	\$4,000	\$8,000
Rheumato	0612	\$2,000	\$4,000	\$8,000
Immun	0613	\$2,000	\$4,000	\$8,000

EXHIBIT II (continued)

EXHIBIT II (continued)

Geriatric	0614	\$2,000	\$4,000	\$8,000
CritCare	0615	\$2,000	\$4,000	\$8,000
PedCardi	1502	\$2,000	\$4,000	\$8,000
PedHmonc	1503	\$2,000	\$4,000	\$8,000
PedNephr	1504	\$2,000	\$4,000	\$8,000
PedGastro	1505	\$2,000	\$4,000	\$8,000
PedEndo	1506	\$2,000	\$4,000	\$8,000
Neonatal	1507	\$2,000	\$4,000	\$8,000
PedNeuro	1509	\$2,000	\$4,000	\$8,000
ClinPhrm	8000	\$2,000	\$4,000	\$8,000
Patholgy	1400	\$2,000	\$4,000	\$8,000
ClinPath	1408	\$2,000	\$4,000	\$8,000
Pediatrics	1500	\$2,000	\$4,000	\$8,000

2. Critical Specialty Amount effective January 1, 1993:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
EmerMed	6200	\$4,000	\$8,000	\$14,000
Group II				
Dermatol	0300	\$3,000	\$6,000	\$10,000
Surgery	5400	\$3,000	\$6,000	\$10,000
Card Dis	0602	\$3,000	\$6,000	\$10,000
ROG	9997/9998	\$3,000	\$6,000	\$10,000
Obst&Gyn	0800	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
Neonatal	1507	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
Group III				
Orthosur	1000	\$2,000	\$4,000	\$ 8,000
Urology	2000	\$2,000	\$4,000	\$ 8,000
Psychiat	1701	\$2,000	\$4,000	\$ 8,000
Ophthalm	5800	\$2,000	\$4,000	\$ 8,000
Radiology	1800	\$2,000	\$4,000	\$ 8,000

EXHIBIT II (continued)

Dia Radio	1803	\$2,000	\$4,000	\$ 8,000
Nuclear	2400	\$2,000	\$4,000	\$ 8,000
Otolaryn	1200	\$2,000	\$4,000	\$ 8,000
Phy&Rehb	1600	\$2,000	\$4,000	\$ 8,000
Neurology	1702	\$2,000	\$4,000	\$ 8,000
Prevtive	1900	\$2,000	\$4,000	\$ 8,000
Aospace	2200	\$2,000	\$4,000	\$ 8,000
Occupatl	2300	\$2,000	\$4,000	\$ 8,000

NO MULTIYEAR SPECIAL PAY

Allergy	0601		\$	0
Endo&Met	0607		\$	0
Hematolo	0608		\$	0
Infctdis	0609		\$	0
Nephrolo	0610		\$	0
Oncology	0611		\$	0
Rheumato	0612		\$	0
Immun	0613		\$	0
Geriatr	0614		\$	0
PedCardi	1502		\$	0
PedHmonc	1503		\$	0
PedNephr	1504		\$	0
PedGastro	1505		\$	0
PedEndo	1506		\$	0
PedNeuro	1509		\$	0
ClinPhrm	8000		\$	0
Patholgy	1400		\$	0
ClinPath	1408		\$	0
Anesthes	0100		\$	0
Pediatrs	1500		\$	0

3. Critical Specialty Amount effective January 1, 1994:

Critical Specialty	Spec Code	2-Year Ann Amount	3-Year Ann Amount	4-Year Ann Amount
Group I				
Dia Radio	1803	\$4,000	\$8,000	\$14,000
EmerMed	6200	\$4,000	\$8,000	\$14,000
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
Nuclear	2400	\$4,000	\$8,000	\$14,000

EXHIBIT II (continued)

Obst&Gyn	0800	\$4,000	\$8,000	\$14,000
Orthosur	1000	\$4,000	\$8,000	\$14,000
Radiology	1800	\$4,000	\$8,000	\$14,000
Group II				
Card Dis	0602	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
Neonatal	1507	\$3,000	\$6,000	\$10,000
Otolaryn	1200	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
ROG-Unten	9999	\$3,000	\$6,000	\$10,000
Surgery	5400	\$3,000	\$6,000	\$10,000
Group III				
Anesthes	0100	\$2,000	\$4,000	\$ 8,000
Aospace	2200	\$2,000	\$4,000	\$ 8,000
ClinPath	1408	\$2,000	\$4,000	\$ 8,000
Dermatol	0300	\$2,000	\$4,000	\$ 8,000
Neurology	1702	\$2,000	\$4,000	\$ 8,000
Occupatl	2300	\$2,000	\$4,000	\$ 8,000
Ophthalm	5800	\$2,000	\$4,000	\$ 8,000
Pathology	1400	\$2,000	\$4,000	\$ 8,000
Pediatrs	1500	\$2,000	\$4,000	\$ 8,000
Phy&Rehb	1600	\$2,000	\$4,000	\$ 8,000
Prevtive	1900	\$2,000	\$4,000	\$ 8,000
Psychiat	1701	\$2,000	\$4,000	\$ 8,000
Urology	2000	\$2,000	\$4,000	\$ 8,000
NO MULTIYEAR SPECIAL PAY				
Allergy	0601		\$	0
ClinPhrm	8000		\$	0
Endo&Met	0607		\$	0
Geriatrc	0614		\$	0
Hematolo	0608		\$	0
Immun	0613		\$	0
Infctdis	0609		\$	0
Nephrolo	0610		\$	0
Oncology	0611		\$	0
PedCardi	1502		\$	0

EXHIBIT II (continued)

PedEndo	1506	\$	0
PedGastro	1505	\$	0
PedHmonc	1503	\$	0
PedNephr	1504	\$	0
PedNeuro	1509	\$	0
Rheumato	0612	\$	0

4. Critical Specialty Amount effective January 1, 1995:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
EmerMed	6200	\$4,000	\$8,000	\$14,000
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
Int Med	0600	\$4,000	\$8,000	\$14,000
Orthosur	1000	\$4,000	\$8,000	\$14,000
Urology	2000	\$4,000	\$8,000	\$14,000
Group II				
Card Dis	0602	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
Dia Radio	1803	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Neo Natal	1507	\$3,000	\$6,000	\$10,000
Nuclear	2400	\$3,000	\$6,000	\$10,000
Neurology	1702	\$3,000	\$6,000	\$10,000
Obst&Gyn	0800	\$3,000	\$6,000	\$10,000
Otolaryn	1200	\$3,000	\$6,000	\$10,000
Psychiat	1701	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
Radiology	1800	\$3,000	\$6,000	\$10,000
ROG-Unten	9997/9998	\$3,000	\$6,000	\$10,000
Surgery	5400	\$3,000	\$6,000	\$10,000
Group III				
Aerospace	2200	\$2,000	\$4,000	\$8,000
ClinPath	1408	\$2,000	\$4,000	\$8,000
Dermatol	0300	\$2,000	\$4,000	\$8,000
Occupatl	2300	\$2,000	\$4,000	\$8,000
Ophthalm	5800	\$2,000	\$4,000	\$8,000

EXHIBIT II (continued)

Pathology	1400	\$2,000	\$4,000	\$8,000
Pediatrs	1500	\$2,000	\$4,000	\$8,000
Phy&Rehb	1600	\$2,000	\$4,000	\$8,000
Prevtive	1900	\$2,000	\$4,000	\$8,000
Surg Sub		\$2,000	\$4,000	\$8,000

NO MULTIYEAR SPECIAL PAY

Allergy	0601		\$	0
Anesthes	0100		\$	0
ClinPhrm	8000		\$	0
Endo&Met	0607		\$	0
Geriatr	0614		\$	0
Hematolo	0608		\$	0
Immun	0613		\$	0
Infctdis	0609		\$	0
Nephrolo	0610		\$	0
Oncology	0611		\$	0
PedCardi	1502		\$	0
PedEndo	1506		\$	0
PedGastro	1505		\$	0
PedHmonc	1503		\$	0
PedNephr	1504		\$	0
PedNeuro	1509		\$	0
Rheumato	0612		\$	0
ROG-TENU	9999		\$	0

5. Critical Specialty Amount effective January 1, 1997:

Critical Specialty	Spec Code	2-Year Ann Amount	3-Year Ann Amount	4-Year Ann Amount
Group I				
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
Orthosur	1000	\$4,000	\$8,000	\$14,000
Urology	2000	\$4,000	\$8,000	\$14,000
Group II				
Aerospace	2200	\$3,000	\$6,000	\$10,000
Card Dis	0602	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
EmerMed	6200	\$3,000	\$6,000	\$10,000

EXHIBIT II (continued)

Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
Neo Natal	1507	\$3,000	\$6,000	\$10,000
Obst&Gyn	0800	\$3,000	\$6,000	\$10,000
Occupatl	2300	\$3,000	\$6,000	\$10,000
Phy&Rehb	1600	\$3,000	\$6,000	\$10,000
Prevttive	1900	\$3,000	\$6,000	\$10,000
Psychiat	1701	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
ROG-Unten	9997/9998	\$3,000	\$6,000	\$10,000
Surgery	5400	\$3,000	\$6,000	\$10,000

Group III

ClinPath	1408	\$2,000	\$4,000	\$8,000
Dermatol	0300	\$2,000	\$4,000	\$8,000
Dia Radio	1803	\$2,000	\$4,000	\$8,000
Nuclear	2400	\$2,000	\$4,000	\$8,000
Neurology	1702	\$2,000	\$4,000	\$8,000
Otolaryn	1200	\$2,000	\$4,000	\$8,000
Pathology	1400	\$2,000	\$4,000	\$8,000
Pediatrs	1500	\$2,000	\$4,000	\$8,000
Radiology	1800	\$2,000	\$4,000	\$8,000
Surg Sub	5499	\$2,000	\$4,000	\$8,000

NO MULTIYEAR SPECIAL PAY

Allergy	0601		\$	0
Anesthes	0100		\$	0
ClinPhrm	8000		\$	0
Endo&Met	0607		\$	0
Geriatr	0614		\$	0
Hematolo	0608		\$	0
Immun	0613		\$	0
Infctdis	0609		\$	0
Nephrolo	0610		\$	0
Oncology	0611		\$	0
Ophthalm	5800		\$	0
PedCardi	1502		\$	0
PedEndo	1506		\$	0
PedGastro	1505		\$	0
PedHmonc	1503		\$	0
PedNephr	1504		\$	0
PedNeuro	1509		\$	0

EXHIBIT II (continued)

Rheumato	0612	\$	0
ROG-TENU	9999	\$	0

6. Critical Specialty Amount effective January 1, 1998:

Critical Specialty	Spec Code	2-Year Ann Amount	3-Year Ann Amount	4-Year Ann Amount
Group I				
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
Orthosur	1000	\$4,000	\$8,000	\$14,000
Group II				
Aerospace	2200	\$3,000	\$6,000	\$10,000
Card Dis	0602	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
EmerMed	6200	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
Neo Natal	1507	\$3,000	\$6,000	\$10,000
Obst&Gyn	0800	\$3,000	\$6,000	\$10,000
Occupatl	2300	\$3,000	\$6,000	\$10,000
Pediatrs	1500	\$3,000	\$6,000	\$10,000
Phy&Rehb	1600	\$3,000	\$6,000	\$10,000
Prevtive	1900	\$3,000	\$6,000	\$10,000
Psychiat	1701	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
ROG-Unten	9997/9998	\$3,000	\$6,000	\$10,000
Surgery	5400	\$3,000	\$6,000	\$10,000
Urology	2000	\$3,000	\$6,000	\$10,000
Group III				
ClinPath	1408	\$2,000	\$4,000	\$8,000
Dermatol	0300	\$2,000	\$4,000	\$8,000
Dia Radio	1803	\$2,000	\$4,000	\$8,000
Nuclear	2400	\$2,000	\$4,000	\$8,000
Neurology	1702	\$2,000	\$4,000	\$8,000
Otolaryn	1200	\$2,000	\$4,000	\$8,000
Pathology	1400	\$2,000	\$4,000	\$8,000
Radiology	1800	\$2,000	\$4,000	\$8,000
Surg Sub		\$2,000	\$4,000	\$8,000

EXHIBIT II (continued)

NO MULTIYEAR SPECIAL PAY

Allergy	0601	\$	0
Anesthes	0100	\$	0
ClinPhrm	8000	\$	0
Endo&Met	0607	\$	0
Geriatr	0614	\$	0
Hematolo	0608	\$	0
Immun	0613	\$	0
Infctdis	0609	\$	0
Nephrolo	0610	\$	0
Oncology	0611	\$	0
Ophthalm	5800	\$	0
PedCardi	1502	\$	0
PedEndo	1506	\$	0
PedGastro	1505	\$	0
PedHmonc	1503	\$	0
PedNephr	1504	\$	0
PedNeuro	1509	\$	0
Rheumato	0612	\$	0
ROG-TENU	9999	\$	0

7. Dental Critical Specialty Amount effective June 1, 1998:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
O-M Surg		\$4,000	\$8,000	\$14,000

8. Critical Specialty Amount effective January 1, 1999:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
FmlyPrac	0501	\$4,000	\$8,000	\$14,000
Orthosur	1000	\$4,000	\$8,000	\$14,000
Psychiat	1701	\$4,000	\$8,000	\$14,000
Surgery	5400	\$4,000	\$8,000	\$14,000

EXHIBIT II (continued)

Group II

Aerospace	2200	\$3,000	\$6,000	\$10,000
Card Dis	0602	\$3,000	\$6,000	\$10,000
CritCare	0615	\$3,000	\$6,000	\$10,000
Gastroen	0604	\$3,000	\$6,000	\$10,000
Int Med	0600	\$3,000	\$6,000	\$10,000
Neo Natal	1507	\$3,000	\$6,000	\$10,000
Occupatl	2300	\$3,000	\$6,000	\$10,000
Pediatrs	1500	\$3,000	\$6,000	\$10,000
Phy&Rehb	1600	\$3,000	\$6,000	\$10,000
Prevtive	1900	\$3,000	\$6,000	\$10,000
Pulm-Dis	0606	\$3,000	\$6,000	\$10,000
ROG-Unten	9997/9998	\$3,000	\$6,000	\$10,000
Surg Sub	5499	\$3,000	\$6,000	\$10,000

Group III

Allergy	0601	\$2,000	\$4,000	\$8,000
ClinPath	1408	\$2,000	\$4,000	\$8,000
ClinPhrm	8000	\$2,000	\$4,000	\$8,000
Dermatol	0300	\$2,000	\$4,000	\$8,000
Dia Radio	1803	\$2,000	\$4,000	\$8,000
EmerMed	6200	\$2,000	\$4,000	\$8,000
Endo&Met	0607	\$2,000	\$4,000	\$8,000
Geriatr	0614	\$2,000	\$4,000	\$8,000
Hematolo	0608	\$2,000	\$4,000	\$8,000
Immun	0613	\$2,000	\$4,000	\$8,000
Infctdis	0609	\$2,000	\$4,000	\$8,000
Nephrolo	0610	\$2,000	\$4,000	\$8,000
Neurology	1702	\$2,000	\$4,000	\$8,000
Nuclear	2400	\$2,000	\$4,000	\$8,000
Obst&Gyn	0800	\$2,000	\$4,000	\$8,000
Oncology	0611	\$2,000	\$4,000	\$8,000
Otolaryn	1200	\$2,000	\$4,000	\$8,000
Pathology	1400	\$2,000	\$4,000	\$8,000
PedCardi	1502	\$2,000	\$4,000	\$8,000
PedEndo	1506	\$2,000	\$4,000	\$8,000
PedGastro	1505	\$2,000	\$4,000	\$8,000
PedHmonc	1503	\$2,000	\$4,000	\$8,000
PedImmun	1508	\$2,000	\$4,000	\$8,000
PedInfec	1509	\$2,000	\$4,000	\$8,000
PedNephr	1504	\$2,000	\$4,000	\$8,000
Radiology	1800	\$2,000	\$4,000	\$8,000

EXHIBIT II (continued)

Rheumato	0612	\$2,000	\$4,000	\$8,000
Urology	2000	\$2,000	\$4,000	\$8,000

NO MULTIYEAR SPECIAL PAY

Anesthes	0100			\$ 0
Ophthalm	5800			\$ 0
ROG-TENU	9999			\$ 0

9. Dental Critical Specialty Amount effective October 1, 1998:

<u>Critical Specialty</u>	<u>Spec Code</u>	<u>2-Year Ann Amount</u>	<u>3-Year Ann Amount</u>	<u>4-Year Ann Amount</u>
Group I				
O-M Surg	0700	\$4,000	\$8,000	\$14,000
Endodon	0400	\$4,000	\$8,000	\$14,000
Orthodon	1100	\$4,000	\$8,000	\$14,000
Periodon	1300	\$4,000	\$8,000	\$14,000
Group II				
GenDenFSB	2320	\$3,000	\$6,000	\$12,000
GenDenAGD	2310	\$3,000	\$6,000	\$12,000
GenDnAGPR	2300	\$3,000	\$6,000	\$12,000
Oral Path	0900	\$3,000	\$6,000	\$12,000
Oral Diag	2500	\$3,000	\$6,000	\$12,000
Oral Med	2400	\$3,000	\$6,000	\$12,000
Ped Den	1600	\$3,000	\$6,000	\$12,000
Prosth	0600	\$3,000	\$6,000	\$12,000
DenPubHth	1200	\$3,000	\$6,000	\$12,000
OperatDen	0300	\$3,000	\$6,000	\$12,000
Den Resch	1700	\$3,000	\$6,000	\$12,000