Reserve Support

The Marine Corps' Wounded Warrior Regiment (WWR) facilitates non-medical and medical care to the total Marine force: active duty, reserve, retired, and veteran Marines. Whether drilling, on annual training or serving on orders, the WWR supports reserve Marines who are wounded, become ill or are injured in the line of duty. The Reserve Medical Entitlements Determination (RMED) Section is responsible for supporting all wounded, ill or injured (WII) Marine reservists and their unique needs.

When a reserve Marine is wounded, becomes ill or is injured while in a duty status, the WWR is available to support them. The reservist must report the illness, injury, or disease immediately.

Reserve Medical Entitlements Determination (RMED)

The WWR's RMED section is the commandant-directed entity that oversees all cases of WII reservists who require medical care for aggravated medical issues incurred in the line of duty. Those who require retention on active duty are placed into the Medical Hold (MedHold) Program. Those who do not require extension on active duty, or who wish to return to their civilian life, have their medical needs addressed through line of duty (LOD) benefits.

Reserve Medical Procedures

Once a reservist reports the illness, injury, or disease, the unit then submits the appropriate request via Marine Corps Medical Entitlements Data System (MCMEDS), regardless of the member's intent to use benefits. Once in MCMEDS, the Defense Health Agency-Great Lakes (DHA-GL) authorizes treatment and settles claims for medical care related to the specific illness, injury or disease on the LOD authorization letter.

When seeking care, the reservist should use one of the following in order of precedence: military treatment facility (MTF), Department of Veterans Affairs (VA) hospital, or civilian health care providers authorized by DHA-GL. MTFs require a LOD authorization letter to allow the member to receive treatment. Program benefits are only authorized for medical conditions reported via MCMEDS.

Reserve Status Reporting Requirements:

Reservists on a MedHold or LOD status must provide monthly physical status reports from their physician via the MCMEDS system, which includes:

- Detailed recent treatment
- Planned interventions for the upcoming month
- Prognosis of the injury/illness/ disease

Related Fact Sheets

- Care Team
- Careers and Education
- District Injured Support Coordinators
- Medical Section
- Recovery Care Coordinator
- Religious Ministry Team
- Servicemembers' and Veterans' Group Life Insurance
- TRICARE
- Warrior Athlete Reconditioning Program
- Wounded Warrior Call Center



Wounded Warrior Call Center 24/7—1.877.487.6299

Stay Connected—www.woundedwarriors.marines.mil



Applies to

For reservists on active duty for more than 30 days who must be retained beyond their Expiration of Active Service (EAS) / Expiration of Current Contract (ECC) due to a need for ongoing medical treatment.

Guidelines

- To be placed on medical hold, reservists must be in a limited duty status (LIMDU) with a valid NAVMED 6100/5 and must CONSENT in writing to stay on MedHold beyond original EAS/ECC.
- After two periods of limited duty, Marines on MedHold status will be referred to a Medical Evaluation Board (MEB).
- Marines may be immediately directed to the MEB depending on severity of illness or injury.
- WII Reservists on MedHold receive their full active duty pay and benefits.

LOD benefits include medical and/or dental care, as well as pay benefits. There are two types of pay that may apply:

- Non-Drilling 204(g): Members in an inpatient status, sick in quarters status, or a convalescent leave status following surgery can receive their full pay and entitlements minus any earned income (i.e. income protection plan, vacation pay, or sick leave).
- 2. **Drilling 204(h):** Members may be reimbursed for lost wages, not to exceed the military pay for which they qualify, while recovering or to attend medical appointments. In this situation, they must have had a civilian job when the illness, injury or disease occurred and they must provide proof of the lost income.

*If the injury prevents the reservist from returning to their civilian work, may be eligible for incapacitation pay. Drilling vs. non-drilling status is determined.

**A MEB may be initiated at the direction of RMED if the condition is not or will not be resolved within 90 days.

aggravated ailments and reservists who are directed to demobilize by an RMED Senior Medical Officer are also

eligible for LOD benefits.

For reservists injured during

drill weekend, annual training,

or on active duty 30 days or

less. Reservists on active duty

for more than 30 days who

demobilize but need care for

Services Available to WII Reservists

WII reserve Marines have access to all programs available to active duty WII Marines. These include:

- Limited Duty Coordinator (LDC)
- Recovery Care Coordinator (RCC)
- WWR Medical Section
- Sergeant Merlin German Wounded Warrior Call Center
- Non-Medical Care Manager
- District Injured Support Coordinators (DISC) / Field Service Representatives (FSR)

- Family Support Staff
- WWR Transition Specialist
- Warrior Athlete Reconditioning Program (WAR-P)
- Disability Evaluation System (DES) Liaison
- Religious Ministry Services
- WWR Sponsored Camps and Events
- VA Liaison/Veteran Service Organization Coordinator