Table Of Contents

IDES GUIDEBOOK

With Reference Guide

An Overview of the
Integrated Disability Evaluation System
(IDES)

Approved by
U.S. ARMY G-1
AUG 2013

Note: Change Sheet in Attachments

Reference Guide

Table Of Contents

Integrated Disability Evaluation System
GUIDEBOOK

PURPOSE

In 2007, the Department of Veterans Affairs (VA) and Department of Defense (DoD) received presidential direction to conduct a joint program to modernize and improve the disability evaluation and compensation process for wounded, ill, and injured Soldiers. VA and DoD collaborated to develop the Integrated Disability Evaluation System (IDES).

The goals of IDES are to:

- Reduce the overall time it takes a Soldier to progress through the IDES process, starting at the time of referral to the Medical Evaluation Board (MEB) and ending upon receipt of VA benefits or return to duty (RTD);
- Utilize a single examination process that meets the needs of VA and DoD; and
- Increase transparency of both the military disability evaluation system and VA claims processes for wounded, ill, and injured Soldiers and their families.

The IDES process identifies all medical and/or psychological conditions that impact military occupational function for the purposes of determining fitness for duty and entitlement to military and/ or VA disability compensation. The core IDES process is standardized to ensure that each Soldier, Command, and the Army Staff understand their critical contributions to case processing. Accountability measures based on the minimum necessary standards are in place at all levels across the Army. This guidebook clarifies the processes, roles and responsibilities, and standards measured at each IDES step.

The IDES Guidebook is intended solely to provide MTFs and their personnel with a description of IDES practices and procedures. The IDES Guidebook should not be construed or referenced as an authoritative source for IDES regulations or policy. In-text citations refer to authoritative IDES policy and regulations. Readers should always seek out these authoritative sources when necessary and should not, in any case, cite to the IDES Guidebook as Department of the Army policy. This Guidebook will expire 1 July 2014. Developed by MEDCOM IDES SL.

Throughout this document hotlinks* are provided (curser should turn from an arrow to a hand*) that were functional at the time of publication. Updates to remove/replace links, where appropriate, will be made to online versions of this document and/or in future issuances as quickly as possible. The references provided following the numbered pages of the guidebook are reference documents only - and provide links to the official source documents.

* Example: If you click on this area, you will skip to the Reference Guide section. You can return to the table of contents of the guidebook by clicking the box at the UPPER left corner of any page. You can also go to the Reference Guide's table of contents by clicking the box in the LOWER left corner of any page.

TABLE OF CONTENTS

CHAPTER ONE
IDES Process Steps……. PAGE 4
Case Processing by Component…….. 4
Case Processing by Duty Location…….. 6
Case Processing by Phase and Stage…….. 7
Treatment ……..... 7
Medical Evaluation Board Phase…….. 9
Physical Evaluation Board Phase…… 17
Transition Phase…… 21

CHAPTER TWO
Roles and Responsibilities……..…….. PAGE 23
Soldier…….…….…….…… 24
Soldier's Unit Commander…….. 25
Military Treatment Facility Commander……..…….. 26
Senior Mission Commander…….. 27
Physical Evaluation Board Liaison Officer…..…… 28
Contact Representative ……..……..… 29
Administrative Assistant ……...…… 29
VA Military Services Coordinator…..……..…… 30
Office of Soldiers' Counsel……..……..…… 31
Medical Treatment Provider……...…… 32
Medical Evaluation Board Provider……...……...…… 33
Medical Evaluation Board Approval Authority..…… 34

CHAPTER THREE
Standards and Compliance.....….. PAGE 35
Timeliness Standards……..……... 35
DMHRSi Coding Requirements..……..…… 37
Provider Productivity Standards…..……..…… 37

CHAPTER FOUR
Glossary…….……..… PAGE 39

FIGURES
Figure 1 Overall IDES Process and Timeliness Goals……**PAGE 4**
Figure 2 IDES Medical Evaluation Board (MEB) Phase…..…**PAGE 9**
Timeliness Goals and VTA Calculations
Figure 3 IDES Physical Evaluation Board (PEB) Phase……**PAGE 17**
Timeliness Goals and VTA Calculations
Figure 4 IDES Transition and Reintegration Phases..……**PAGE 21**
Timeliness Goals and VTA Calculations

APPENDICES
Appendix - Reference Guide.....after page 46

In-text citations refer to authoritative IDES policy and regulations.

Reference Guide

Table Of Contents

CHAPTER ONE
IDES PROCESS STEPS

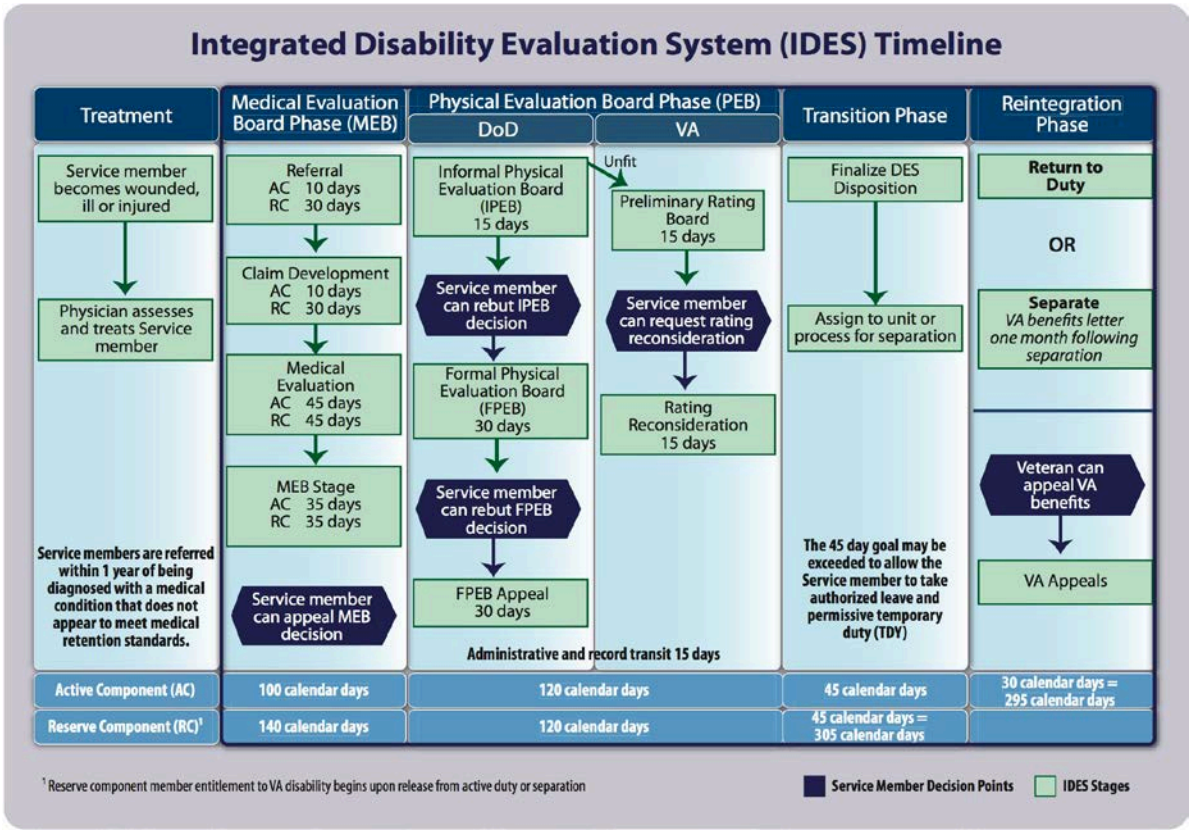

FIGURE 1
Overall IDES Process and Timeliness Goals

Case Processing By Component

1-1. There is no difference between the IDES process for an Active Component (AC) Soldier and a Reserve Component (RC) Soldier serving on Active Duty. Each Soldier on Active Duty orders has access to the same staff and resources as other Soldier on Active Duty during both the Medical Evaluation Board (MEB) and Physical Evaluation Board (PEB). (AR 40-400 Section 1)

1-2. The process for an RC Soldier *not* on Active Duty, but who has *conditions that are duty-related* (i.e. injuries and/or illnesses incurred in the line of duty) is similar to the process for a Soldier on Active Duty. However, the timeliness standards for the Referral and Claim Development Stages are different. Under the non-duty-related (NDR) process, an RC Soldier not on Active Duty who has (only) non-service-connected conditions may be referred directly to the PEB for a determination of fitness. (AR 40-501, Chapters 3, 9, and 10)

In-text citations refer to authoritative IDES policy and regulations.

Reference Guide

1-3. The Reserve Component Soldier Medical Support Center (RC-SMSC) (or designated regulating office) will generate the MEB case file during the Referral Stage for each Soldier not on Active Duty orders. The RC-SMSC collects all medical and occupational documentation in coordination with relevant medical authorities authorized to create a permanent profile and then refers the Soldier into IDES. For the ARNG, the state is the authority; for the USAR, the authority is the Army Reserve Medical Management Center (ARMMC); and for the IRR/ IMA/ DIMA Soldier, the authority is Human Resources Command (HRC). In accordance with the treatment responsibilities outlined below, the appropriate medical authority verifies the Soldier has at least one condition that, individually or collectively with others, does not appear to meet medical retention standards, creates and signs the P3/P4 Profile, completes Section 1 of the VA 21-0819 and transmits the case file to the RC-SMSC and the Medical Evaluation Board Tracking Office (MEBTO) on a standard MEBTO Request Form. (AR 40-501) (MEDCOM Policy Memo 11-046)

1-4. The MEBTO will assign the case to the appropriate IDES MEB processing site and track the case at the MEB Remote Operating Center (MEBROC) or the Military Treatment Facility (MTF) for the duration of the disability evaluation process. Each case assigned to an MTF or MEBROC must meet administrative and clinical MEB packet requirements. The MEBROC or MTF-based PEBLO must document and attempt to resolve concerns (i.e. missing files, expired documents) *before* the case is referred back to the MEBTO. Within **72 hours** of receiving the PEBLO's documentation, the MEBTO will make a determination: the MTF/ MEBROC must resolve the issue locally, reassign the case to an MTF from a MEBROC, or recommend disenrollment from IDES. An incomplete case will not be returned to the RC-SMSC. (OPORD 12-54) (MEDCOM Policy Memo 11-046)

Case Processing by Duty Location

1-5. A Soldier based outside the Continental United States (OCONUS) who has one or more medical conditions that do not appear to meet medical retention standards must be assigned to a CONUS-based Warrior Transition Unit (WTU) on a permanent or temporary basis. An OCONUS-based Soldier will travel to the receiving CONUS WTU, be assigned a PEBLO, and attend all necessary appointments including the VA C&P exam(s). Once enrolled, IDES administrative process steps are the same for all Soldiers, regardless of the original duty station. (OTSG/MEDCOM Policy Memo 11-103)

OCONUS Referral Process

- The OCONUS Medical Treatment Provider will complete an OCONUS Provisional Integrated Narrative Summary (OPIN) to provide clinical information necessary for NARSUM production during the MEB Phase.
- Movement to CONUS locations for IDES is coordinated by the Soldier Transfer and Regulating Tracking Center (START-C) typically via a Permanent Change of Station (PCS). Temporary Duty (TDY) will be approved by the OCONUS Regional Medical Command (RMC) in coordination with the Soldier's Chain of Command. TDY may be granted in cases where the Soldier wishes to separate from the Army while overseas or the Soldier has pending administrative or legal actions rendering them unauthorized for PCS. Soldiers on TDY orders from European Command (EUCOM) will be assigned to the WTU at Fort Bragg or Fort Eustis. Soldiers on TDY orders from Pacific Command (PACOM) will be assigned to the WTU at Schofield Barracks.
- The OCONUS WTU submits a Patient Movement Request (PMR) in TRANSCOM Regulating and Command and Control Evacuation System (TRAC2ES) to initiate movement coordination.
- The OCONUS RMC will request PCS and/or TDY orders from the Soldier's servicing Military Personnel Division for a departure date within **90 days** of the PMR. Unit-funded, two-week medical TDY orders for initiation of MEB and completion of C&P exams must have a departure date within **30 days** of the PMR. Non-transferable Soldiers must travel with a unit escort as determined by a medical authority in coordination with the Soldier's Command.
- START-C coordinates the Soldier's destination and report date with each gaining and sending WTU and notifies the assigned Physical Evaluation Board Liaison Officer (PEBLO).
- Upon arrival at the gaining WTU, the Soldier is assigned a PEBLO and officially enrolled into IDES.
- The WTU will document causes for delay and/or identify issues during the movement process by submitting to START-C a written OCONUS IDES Incident Report.

In-text citations refer to authoritative IDES policy and regulations.

Case Processing By Phase and Stage

Treatment

Step 1. Soldier is wounded, ill or injured
Step 2. Medical Treatment Provider assesses and coordinates Soldier's care
Step 3. Medical Treatment Provider determines Soldier has at least one condition that, individually or collectively with others, does not appear to meet medical retention standards
Step 4. Medical Treatment Provider writes P3/P4 Profile
Step 5. Designated Physician Profiling Authority co-signs P3/P4 Profile and initiates the VA/DoD Joint Disability Evaluation Board Claim Form (VA 21-0819, Section 1)

1-6. Treatment begins when a Medical Treatment Provider issues a Soldier a temporary (T3/T4) profile for a medical condition that causes duty limitations. All profiles greater than **30 days** are documented on a DA 3349 via eProfile, the electronic profile management system. The Medical Management Center (MMC) at most duty stations will monitor and ensure that a Soldier with a temporary profile is tracked and care is coordinated throughout treatment. (AR 40-501, Chapter 7) (AD 2012-18 (MAR2))

1-7. When a Medical Treatment Provider determines that a Soldier has *at least one* condition that has reached MRDP and does not appear to meet medical retention standards, that Soldier will be referred to the Disability Evaluation System. This decision must be made **within one year** of diagnosis of a medical condition or sooner if the Medical Treatment Provider can determine that the Soldier is unlikely to be able to return to duty. (DODI 1332.38, E3.P1.6) (AR 40-501, 7-4b.(2))

1-8. A Medical Treatment Provider will manage the Soldier's medical conditions using a temporary profile until the condition(s) does not appear to meet medical retention standards or **12 months** have passed. A provider will not continue a temporary (T3/T4) physical profile beyond 12 months for the same condition. When a Soldier is unable to return to full duty status within 12 months from the onset of the injury or illness, regardless of the Soldier's profile history, referral into IDES is appropriate. When it can be determined that a Soldier has a condition(s) that does not appear to meet medical retention standards, or when the temporary profile has been active for 12 months, the Medical Treatment Provider will write a permanent (P3/P4) profile. The MTF Commander (or his/her Designated Physician Profiling Authority) must review and approve extension of any temporary profile exceeding 12 months. (AR 40-501, Chapter 7)

1-9. The Designated Physician Profiling Authority confirms that the Soldier has a condition(s) that does not appear to meet medical retention standards by signing the second signature on the P3/P4 profile. This triggers the Soldier's referral into the IDES

In-text citations refer to authoritative IDES policy and regulations.

process. Within **72 hours**, the Physician Profiling Authority will initiate the VA/DoD Joint Disability Evaluation Board Claim Form (VA 21-0819, Section 1), refer the case to the PEBLO supervisor, and notify the Soldier's Command of the initiation of the IDES process. The Physician Profiling Authority may be a designated MTF physician, (such as the Deputy Commander for Clinical Services (DCCS) or the IDES Medical Director), the State Surgeon for the National Guard, or a Regional Support Command (RSC) Surgeon for Army Reserve Soldiers. (AR 40-501, 7-6)

1-10. Each Profiling Authority is responsible for following component-specific profiling guidelines (AR 40-501, Chapter 7) and Department of the Army orders (DA EXORD 185-11 MOD 1) to ensure visibility of all T3/T4 and P3/P4 profiles to the Chain of Command and other senior leaders. (AR 40-501, Chapter 7) (EXORD 037-13)

Medical Evaluation Board (MEB) Phase

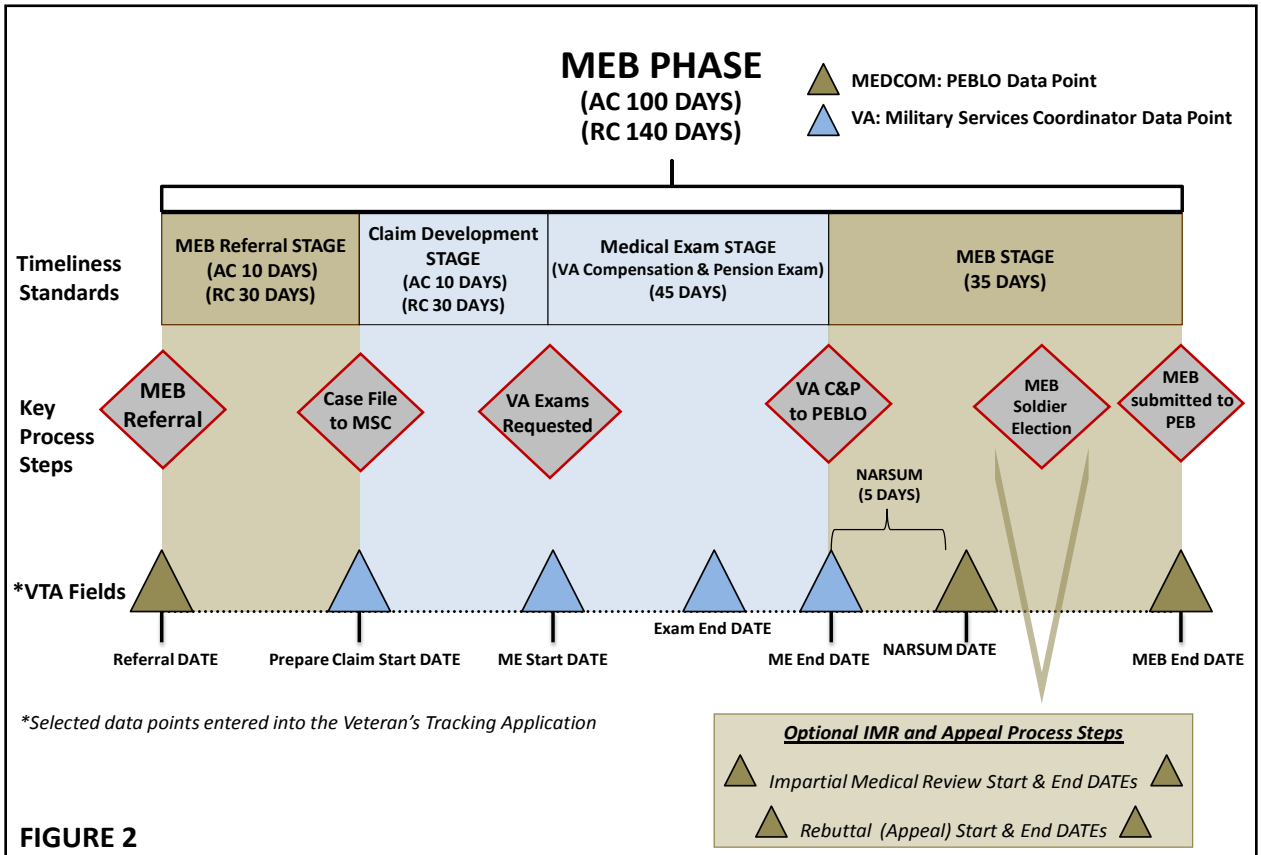

FIGURE 2
IDES Medical Evaluation Board (MEB) PHASE
Timeliness Goals and VTA Calculations

Referral Stage (AC 10 days / RC 30 days)

Step 1. PEBLO counsels Soldier to review Section 1 of the VA 21-0819 for accuracy and completeness
Step 2. Soldier attends Multi-Disciplinary Orientation Briefing
Step 3. PEBLO collects Service Treatment Record (STR) and administrative documents
Step 4. PEBLO sends Soldier's case file, including hardcopy STR, to VA Military Services Coordinator (MSC)
Step 5. Soldier receives legal briefing on rights and responsibilities during IDES and access to legal representation from the Soldiers' MEB Counsel (SMEBC) prior to meeting with the MSC

In-text citations refer to authoritative IDES policy and regulations.

1-11. Within **72 hours** of a referral to the MEB, the assigned PEBLO will create the case in the Veterans Tracking Application (VTA) and eMEB databases, contact the Soldier by phone for introductions, schedule an introductory meeting and prepare orientation materials. During the initial PEBLO counseling session, the PEBLO will review Section 1 of VA 21-0819 and answer any questions the Soldier may have. The Soldier must initial the MEB/PEB Counseling Checklist (DA 5893) at each step of the IDES process to verify that the Soldier comprehends his/her role and responsibilities and that they are aware that Family members are welcome to accompany them in the process. Soldiers will attend a mandatory legal briefing prior to meeting with their VA MSC. After the final PEB Counseling session with the PEBLO, the Soldier must sign the DA 5893 (digitally or on hard copy). The PEBLO will upload and route the signed DA 5893 through eMEB to the PEB along with the DA 199 (see PEB Phase). (OPORD 12-31) (DTM 11-015 Appendix 4 to Attachment 4)

1-12. The MEB case for a National Guard and Army Reserve Soldier not on Active Duty orders will be prepared by the RC-SMSC and regulated to an appropriate MEB processing site as outlined in the Case Processing by Component section. (AR 40-400, 7-5b(5) and MEDCOM Policy Memo 11-046)

1-13. Within **5 days** of the PEBLO's request, the Soldier's Commander must assess the Soldier's duty limitations using the Commander's Performance and Functional Statement Form (DA 7652). The Commander should provide detailed performance information specifying what, if any, issues the Soldier has in performing specific physical activities (including specific PMOS activities) and discuss manifestations of a behavioral, emotional or cognitive nature that impact the Soldier's ability to function in the unit. The Commander is not required to link any noted performance issues to a medical diagnosis. In anticipation of the PEBLO's request, each Commander should observe the Soldier at the time the Soldier is assigned to the Commander. (DA Form 7652 is used to implement DODI 1332.38, para E3.P1.2.7.2, DTM 11-015 Appendix 7 to attachment 4, and AR 635-40 para 4-15e.)

1-14. When a Soldier is in the IDES process, the Commander must ensure that each Soldier attends all scheduled appointments and that *any* approved leave is communicated with the PEBLO, ideally by sharing a copy of the signed Request and Authority for Leave (DA 31). In order to prevent unnecessary delays, the Commander should only approve leave during the MEB Phase when absolutely necessary. (AR 600-8-10 pg. 78). The Commander should encourage each Soldier to use accrued leave during the PEB Phase when a Soldier's in-person requirements are reduced (i.e. *after* the MEB Phase and *before* the Transition Phase). Missed appointments create unnecessary delays in the Soldier's disability evaluation. Therefore, the unit command is responsible for coordinating transportation to assist the Soldier in reporting to scheduled appointments and examinations on time. Further, when a Soldier misses (i.e. "no-shows") any appointment without prior notification to the unit command and PEBLO, the unit must assign an escort to accompany the Soldier to all future IDES appointments. (DTM 11-015, Attachment 4 Appendix 4)

Referral Stage Deliverables (AC 10 days / RC 30 days):

- STR and Administrative Documents
  The PEBLO is responsible for compiling all medical documents, including complete STR (with TRICARE referrals and civilian medical records, when applicable) within **10 days (AC) or 30 days (RC)** of MEB Referral Date.
- Line of Duty (LOD) (DA 2173)
  If LOD is required, the Soldier's Commander must send the DA 2173 (and DD 261, if required) to the PEBLO within **5 days** of request (or no later than the next drill period for RC Soldiers).
- Commander's Performance and Functional Statement (DA 7652)
  The Soldier's Commander is responsible for providing a current non-medical assessment within **5 days** of receiving the PEBLO's request.
- VA/DoD Joint Disability Evaluation Board Claim (VA 21-0819)
  The PEBLO will review Section 1 of the VA 21-0819 with the Soldier and forward to the VA MSC within **10 days (AC) or 30 days (RC)** of the MEB Referral Date.
- VA MSC Initial Interview Coordination
  The PEBLO coordinates with the Soldier to schedule an initial interview with the assigned VA MSC within **20 days** of the MEB Referral Date.

Claim Development Stage (AC 10 days / RC 30 days)

Step 1. MSC counsels Soldier and completes Sections 2-7 on the VA 21-0819
Step 2. MSC requests VA C&P exam from either Veteran's Health Administration (VHA) Examining Facility or VA contracted C&P Examiner
Step 3. VHA Examining Facility or VA contracted C&P Examiner schedules exam appointments
Step 4. VHA Examining Facility or VA contracted Examiner notifies MSC of C&P exam appointments with simultaneous notification to Soldier, PEBLO and Commander

Note: Above steps may vary according to the local IDES Site Memorandum of Agreement (MOA) or Memorandum of Understanding (MOU) with the VA.

1-15. The MSC will contact the Soldier to further explain VA's role in the IDES disability rating process. The MSC explains VA's service connection policy specifying that compensation will be awarded only for chronic illnesses, injuries and diseases that were incurred during or aggravated by service. The MSC will coordinate with the Soldier regarding any additional conditions the Soldier wants to claim (on Section 2 of VA 21-0819). If the Soldier wants to add claimed conditions at any point after this meeting, the MSC will accept the claim. However, the MSC will advise the Soldier that, except for conditions suddenly and unexpectedly arising, conditions raised after the initial interview may not be evaluated until after separation. Neither the MEB nor the PEB will consider these conditions for purposes of retention or fitness decisions (i.e., military disability compensation).The MSC requests the necessary C&P examinations and the Veteran's Health Administration (VHA) Examining Facility or VA contracted C&P Examiner, notifies the MSC of C&P examination appointments with simultaneous notification to the Soldier, PEBLO and Commander (if Commander's contact information is available). (DTM 11-015, Appendix 6 to Attachment 4)

Claim Development Stage Deliverables (AC 10 days / RC 30 days):

- <u>VA C&P Exam Appointments</u>
  After counseling the Soldier, the MSC is responsible for requesting all necessary medical appointments within **10 days (AC) or 30 days (RC).**
  VHA Examining Facility or VA contracted Examiner notifies MSC of C&P exam appointments with simultaneous notification to Soldier, PEBLO and Commander
- <u>VA/DOD Joint Disability Evaluation Board Claim (VA 21-0819)</u>
  The MSC will complete Sections 2-7 of the VA 21-0819 with the Soldier to document claimed conditions and forward to the PEBLO within **10 days (AC) or 30 days (RC)** of the [Prepare Claim Start Date].

Medical Exam Stage (45 days)

Step 1. Soldier attends all VA appointments
Step 2. Qualified Medical Examiner completes the C&P exam(s)
Step 3. MSC forwards C&P exam results to the PEBLO

1-16. C&P Qualified Medical Examiners, as specified in local MoAs, are responsible for completing the general medical and specialty examinations within **45 days** of receiving an IDES C&P disability examination request and STR. This time includes **40 days** for the completion of the examination and **5 days** for the completion of administrative requirements. The Qualified Medical Examiners will follow VA operational instructions for scheduling, notifying and conducting VA C&P medical examinations. (DTM 11-015 Appendix 8 to Attachment 4)

1-17. The Qualified Medical Examiner(s) will conduct a general medical examination which will include a comprehensive screening examination of all body systems and address conditions both referred by the Medical Treatment Provider and claimed by the Soldier. Specialty examinations, in addition to the general medical examination, will be performed for cases involving vision, hearing, dental, psychological, or other complex medical conditions. (DTM 11-015, Appendix 8 to Attachment 4)

1-18. When conditions are identified that cannot be addressed in the course of the C&P exam, the Qualified Medical Examiner will indicate this in the examination report provided to the MSC. (DTM 11-015 Appendix 8 to Attachment 4)

1-19. Once the VA C&P exam or Disability Benefits Questionnaire (DBQ) is complete, the MSC is responsible for collecting and transmitting the completed C&P exam results to the PEBLO.

Medical Exam Stage Deliverable (45 days):

- VA Compensation and Pension (C&P) Exam
  The Qualified Medical Examiner and MSC have **45 days** to submit the complete C&P exam and transmit results to the PEBLO from the date of the MSC appointment request.

Table Of Contents

Medical Evaluation Board Stage (35 days)

Step 1. PEBLO immediately forwards C&P exam results and case file to MEB provider
Step 2. MEB provider writes Integrated Narrative Summary (NARSUM)
Step 3. PEBLO creates the MEB Proceedings Form (DA 3947) based on Section 4 of the NARSUM
Step 4. PEBLO routes case file to MEB Physician Reviewers and Approval Authority
Step 5. MEB makes recommendation (PEB or RTD) and Approval Authority signs findings
Step 6. PEBLO counsels Soldier on election options
Step 7. (*optional*) Soldier consults with legal counsel
Step 8. Soldier makes election regarding MEB findings on DA 3947
Step 9. (*optional*) Soldier requests an Impartial Medical Review (IMR)
Step 10. (*optional*) Soldier elects to appeal the findings by submitting a written rebuttal
Step 11. PEBLO routes complete case file to PEB or notifies unit and MSC of MEB RTD recommendation

1-20. The MEB is an informal process comprised of two credentialed providers and an Approval Authority who review the completed NARSUM and MEB case file to determine whether or not a Soldier's condition(s) meet medical retention standards. The Soldier is not required to appear before the MEB, but the MEB may ask the Soldier to participate in order to obtain clarification of key information.

1-21. The MEB Stage is comprised of the **5-day** NARSUM step, during which the MEB provider completes the NARSUM, and a **30-day** administrative processing step. Administrative actions are coordinated by the PEBLO and include routing the case file packet through the MEB Physician Reviewers and the MEB Convening Authority, coordinating additional appointments (if needed), and, after the DA 3947 is complete, counseling the Soldier on the MEB findings and their election options. (DODI 1332.38)

1-22. During the NARSUM Step, the MEB provider will review *all* available medical records, including the C&P exam results, and write a comprehensive NARSUM describing the Soldier's medical conditions. **The Integrated NARSUM is the only authorized format for the NARSUM**. The NARSUM will be completed following the protocol detailed in the MEB NARSUM Guidebook (AR 635-40 and DA PAM). The Integrated NARSUM must list all referred and claimed conditions and make determinations about the impact of each medical condition (individually or collectively) on the Soldier's performance of duty in accordance with AR 40-501.The MEB provider has primary responsibility for developing the content of the NARSUM. When applicable, behavioral health and/or dental providers may prepare all or part of the NARSUM for cases with behavioral health or dental conditions. They may also provide consultation when the MEB provider has significant questions about conditions in these specialties. Behavioral health and/or dental providers are *required* to review and sign the DA 3947 as one of the two Physician Reviewers when behavioral health and/or dental conditions are listed. (Annex O to OPORD 12-31) (MEDCOM Policy Memo 11-046)

In-text citations refer to authoritative IDES policy and regulations.

Reference Guide

1-23. Once the C&P exam is received by the PEBLO, the MEB Provider has **5 days** from the date the C&P exam results were received, recorded in VTA as the [ME End Date], to submit the completed NARSUM to the PEBLO, who then records the [NARSUM Date] in VTA. The PEBLO routes the MEB case file to the MEB Physician Reviewers and Approval Authority for review and signature on the DA 3947. (DTM 11-015, Appendix 5)

1-24. If all of the Soldier's conditions meet medical retention standards, the Soldier will be returned to duty, with one exception: A Soldier referred to the DES by Military Occupation Specialty Administrative Retention Review (MAR2) generally has to complete an evaluation by the PEB. The MTF can only return the Soldier to duty if the Soldier's profile is changed from a P3 to P2 and the Soldier's conditions are determined to meet medical retention standards (Army Directive 2012-18 (Military Occupational Specialty Administrative Retention Review (MAR2), and AR 635-40). When the MEB has made its determination, the PEBLO will contact the Soldier by phone or in person within **3 working days** (or not later than the next reserve drill for RC Soldiers), to review the findings and counsel the Soldier on his/her MEB election options. Soldiers may always consult with a SMEBC, or private legal counsel at their own expense, when evaluating their options to concur as written, request an IMR, and/or submit a written rebuttal. Regardless of the source of legal counsel, the Soldier must make a decision within the **5-day MEB Election period**. (DTM 11-015, Appendix 1 to attachment 4)

1-25. The Soldier has two opportunities for review of the MEB findings, each with a unique and specific purpose. First, a Soldier may request an Impartial Medical Review (IMR). An IMR is an independent clinical review of the MEB case file to ensure that the MEB findings adequately reflect the complete spectrum of the Soldier's injuries and illnesses. The Soldier must make this request within the **5-day** MEB Election period. An IMR is conducted by a credentialed provider (appointed by the MEB Convening Authority) not otherwise involved in the Soldier's MEB case. Ideally the Medical Treatment Provider most familiar with the Soldier's medical history. The MTF-based IMR provider reviews the final MEB packet to make sure all diagnoses and notes have been accurately recorded on the NARSUM and the DA 3947. This review must be completed and returned to the PEBLO within **5 days** of the Soldier's request**.** (DTM 11-015, Appendix 2)

1-26. Second, the Soldier has one opportunity to submit a written rebuttal of the MEB findings to the MEB Convening Authority**.** This written rebuttal is also referred to as an MEB Appeal. If the Soldier has not requested an IMR, he/she may submit a written rebuttal to the PEBLO within **7 calendar days** of signing the DA Form 3947. If the Soldier has requested an IMR, he/she may submit a written rebuttal to appeal the MEB findings to the PEBLO within **7 calendar days** of being informed of his/her IMR results. The PEBLO, or the Soldier's designated legal counsel, will forward the written rebuttal to the MEB Approval Authority. The MEB Approval Authority has **5 days** to review the case file and written rebuttal and send a response to the PEBLO. To maintain objectivity, the MEB Approval Authority should not be any of the original signatories on

the DA 3947. The MEB Approval Authority may uphold the original findings of the MEB, amend the findings with a written addendum to the MEB, or return the MEB for reconsideration. (DODI 1332.38)

1-27. The PEBLO creates and/or updates the DA 3947 based on Section 4 of the final NARSUM and any IMR and/or Appeal findings. Once the MEB is complete, including any IMR and/or Appeal, the packet is forwarded to the PEB electronically via eMEB to ePEB. (DTM 11-015)

Medical Evaluation Board Stage Deliverables (35 days):

- Complete MEB case file prepared according to the PEB Transmission Checklist (DA 5889), to include:
  - Medical Evaluation Board Proceedings (DA 3947)
    The PEBLO creates the DA 3947 based on Section 4 of the final NARSUM and updates to reflect any IMR and/or Appeal findings.
  - Narrative Summary (NARSUM)
    The MEB provider must complete the NARSUM, in accordance with the MEB NARSUM Guidebook and OPORD 12-31/Annex O, within **5 days** of receipt of the C&P exam (tracked in VTA as the [ME End Date]).
  - VA Compensation and Pension (C&P) Exam
  - Current P3/P4 Profile (DA 3349)
    The P3/P4 Profile that initiated the MEB Referral does not need to be updated to reflect the MEB findings, but must be included in the case file sent to the PEB.
  - Administrative and Personnel documents as required, to include:
    Enlisted Record Brief (ERB)/Officers Record Brief (ORB), Leave and Earnings Statement (LES), Commander's Statement (DA 7652), Orders, (and, *if applicable*, LODs, IMR Findings, written rebuttal, Appeal Findings).

Table Of Contents

Physical Evaluation Board (PEB) Phase

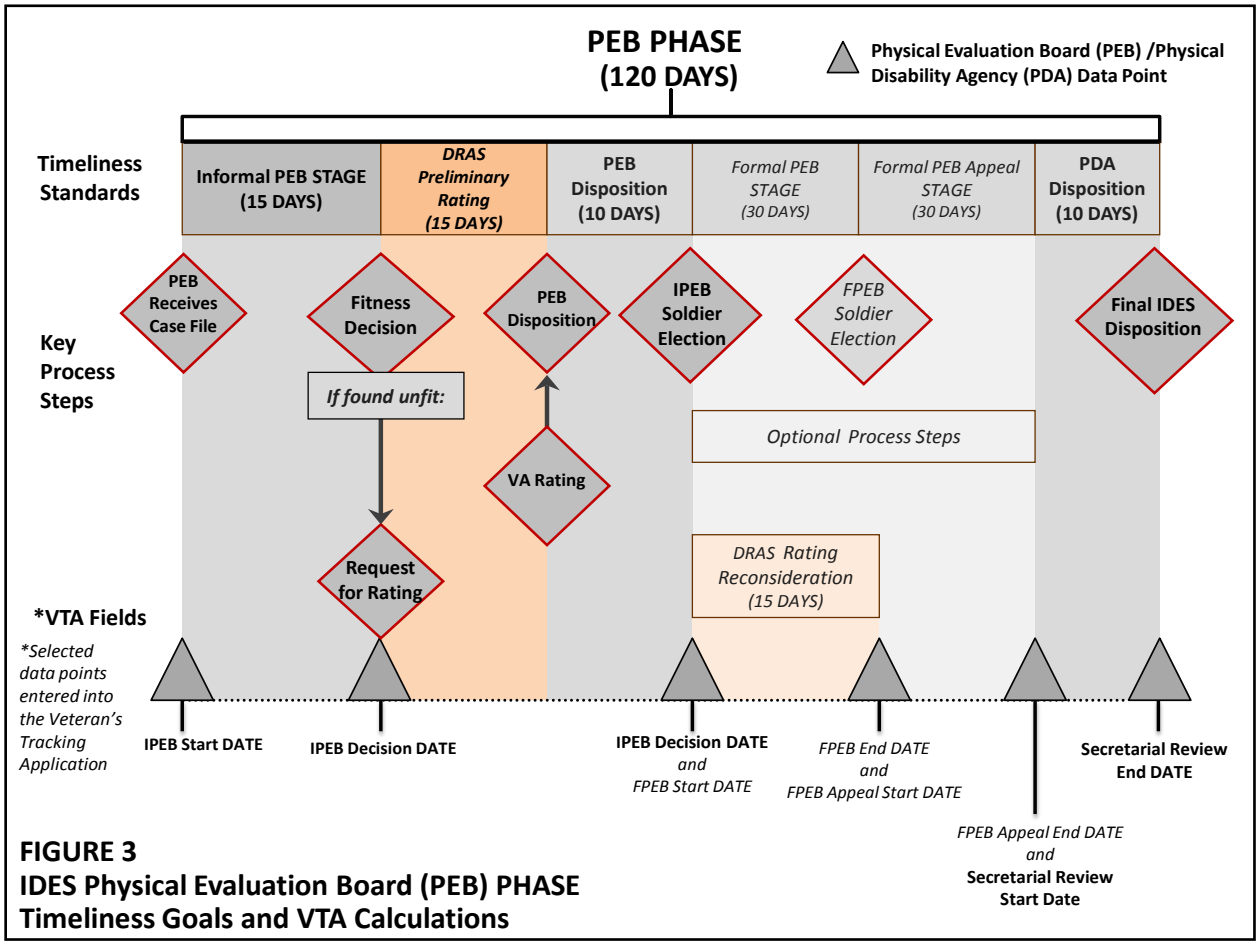

FIGURE 3
IDES Physical Evaluation Board (PEB) PHASE
Timeliness Goals and VTA Calculations

1-28. The PEB determines whether one or more of the Soldier's conditions render the Soldier unfit for continued military service (AR 635-40, Ch. 4). The PEB sends a Request for Preliminary Rating to the VA Disability Rating Activity Site (DRAS) for all medical conditions it determines render the Soldier unfit. (DTM 11-015, Attachment 2). The PEB prepares a Physical Evaluation Board Proceedings Form (DA Form 199) and applies the VA ratings received from the DRAS to unfitting conditions (AR 635-40). The PEBLO will notify the Soldier of the findings and counsel him/her on the election options (DTM 11-015, Appendix 4 to Attachment 4). A Soldier may consult with legal counsel when evaluating their election options.

Informal PEB Stage (15 days)

- **DRAS Proposed Rating (15 days)**
- **Rating Reconsideration (*optional* 15 days)**
- **Physical Disability Agency (PDA) Approval (10 days, *if no Formal PEB*)**

Step 1. Informal PEB renders fitness determination
Step 2. If found unfit, PEB sends Request for Preliminary Rating to DRAS.
If found fit, Soldier is RTD.
Step 3. DRAS rates unfitting condition(s) and issues a Preliminary Rating(s) to PEB
Step 4. PEB issues fitness determination with VA Preliminary Rating(s) on DA 199
Step 5. PEBLO counsels Soldier on Informal PEB findings and PEB election options
Step 6. (*optional*) Soldier consults with legal counsel
Step 7. (*optional*) Soldier may non-concur with Informal PEB determination
Step 8. (*optional*) Soldier may demand/request (as applicable) a Formal PEB if the Soldier disagrees with the Informal PEB fitness determination
Step 9. (*optional*) Soldier may request a VA Rating Reconsideration for unfitting conditions if the Soldier disagrees with the VA Preliminary Rating
Step 10. PEB sends case file to PDA to approve findings

1-29. The Informal PEB (IPEB) reviews administrative, medical and personnel documentation to determine whether the information is sufficient to render a decision on whether one or more of the Soldier's conditions render the Soldier unfit for continued military service. When the information is insufficient, the PEB will request additional information from the MEB. Thereafter, the PEB makes a finding as to which conditions are unfitting; and which are not unfitting. When the PEB determines one or more of the Soldier's conditions are unfitting, the PEB will refer the Soldier's case to the VA for a preliminary disability rating for each unfitting condition. (DTM 11-015 Attachment 3) (AR 635-40). When the PEB finds a Soldier fit for one or more conditions, the PEB does not refer the Soldier's case file to VA for a disability rating, and the Soldier will be RTD. (AR 635-40, C-7)

1-30. Within **15 days** of receiving the complete and correct MEB case file from the PEBLO, the PEB will adjudicate the Soldier's case (DTM 11-015 Appendix 10 to Attachment 4). If the Soldier is found unfit, the PEB will request a preliminary rating from the DRAS and provide a copy of the rating request memo to the PEBLO. The DRAS has **15 days** to evaluate all unfitting referred and/or claimed conditions and provide preliminary disability ratings to the PEB for each service-connected condition with supporting rationale. (DTM 11-015, Appendix 11 to Attachment 4)

1-31. Once the PEB receives the preliminary VA disability rating, it will issue findings on DA Form 199 and forward to the PEBLO along with the VA preliminary rating decision. Within **72 hours** of receipt, the PEBLO will inform and counsel the Soldier on the IPEB findings and their election options (DTM 11-015 Appendix 4 to Attachment 4). The Soldier has the option to accept the IPEB findings and VA preliminary ratings, or the

Soldier may choose to appeal the VA rating and/or the IPEB findings. (DTM 11-015 Appendix 1 to Attachment 4)

1-32. The Soldier has 10 days to accept the IPEB findings or appeal the IPEB findings to the formal PEB (DTM 11-015 Appendix 1 to Attachment 4). (See paragraph 1-34 of this guide concerning right to a formal.) If a Formal PEB is selected, the PEB will schedule the hearing to occur within 30 days of election (DTM 11-015 Appendix 10 to Attachment 4). The Soldier has one opportunity to submit a written Request for VA Rating Reconsideration for each unfitting condition. VA only reconsiders ratings when "new medical evidence is received or sufficient justification, such as error" is provided by the Soldier. (DTM 11-015 Appendix 1 to Attachment 4). (DTM 11-015 Appendix 11 to Attachment 4). The Soldier may consult with the PEBLO, Soldier's PEB Counsel (SPEBC) and/or the MSC when preparing the Request for Reconsideration. The PEB will forward the request to the DRAS, which will issue a new decision within 15 days, if warranted (DTM 11-015 Appendix 11 to Attachment 4). The Soldier may address any disagreement with ratings assigned to claimed (and not unfitting) conditions after the Soldier separates from Service and receives notification of a final VA rating decision.

1-33. If the Soldier is found unfit, but wishes to remain in the Army, the PEBLO will counsel the Soldier on the Continuation on Active/Reserve Duty (COAD/COAR) process, assist the Soldier with the request and send it forward to the PEB for processing (AR 635-40, Ch. 6). A Soldier may always consult with legal counsel when evaluating their options. The PEBLO will complete the Estimated Disability Compensation Worksheet (DA Form 5892) and explain the computation to the Soldier using the remarks page of the form. (AR 635-40 Ch. 4)

Formal PEB Stage (*optional* 30 days)

- **Formal PEB Appeal (*optional* 30 days)**
- **PDA Secretarial Approval (10 days)**

Step 1. (*optional*) Soldier may request a Formal PEB
Step 2. (*optional*) Soldier may appeal the Formal PEB Findings
Step 3. PEB sends case file to PDA, which will approve or modify findings
Step 4. (*optional*) Any PDA modification results in new appeal rights for the Soldier

1-34. A Soldier determined to be unfit and a Soldier on the Temporary Disability Retired List (TDRL) determined fit has the right to demand a formal hearing. A Soldier determined fit may request a formal hearing (DTM 11-015, Appendix 10 to Attachment 4). The Formal PEB (FPEB) consists of a panel of medical and non-medical adjudicators (DTM 11-015 Appendix 9 to Attachment 4). The Soldier may submit a written statement, appear before the board in person or by video teleconference (VTC), or have counsel appear on his/her behalf (AR 635-40, Ch. 4). During the Formal PEB, the Soldier has the right to receive legal representation from the SPEBC at no cost to the Soldier, or to seek legal counsel at his/her own expense (AR 635-40, Ch. 4). The formal board will then issue its findings. Within **72 hours** of the determination, the FPEB

will inform the Soldier, the Soldier's legal counsel, and PEBLO of the FPEB findings. (DTM 11-015 Appendix 9 to Attachment 4)

1-35. Once the final decision has been issued by the PEB, the case is sent to the PDA for review, if applicable, and approval of the PEB findings and recommendations. The PDA has the authority to issue revised findings or return a case to the PEB for reconsideration if the evidence of record does not support the PEB findings and/or recommendation. When the PDA issues revised findings that change the disability disposition and the Soldier non-concurs and submits a written rebuttal, PDA will forward the case for final decision to the Army Physical Disability Appeal Board (APDAB) within the Army Review Board Agency. The APDAB makes the final decision. (AR 635-40, Chapter 4.) The PEBLO will inform the Soldier of the final fitness findings within **72 hours** of receipt. (DTM 11-015)

PEB Phase Deliverables (65 days + *optional 55 days*):

- Request for Preliminary Rating from DRAS
  Upon completion of the fitness determination, the PEB sends a Request for Preliminary Disability Rating to the VA DRAS for all unfitting conditions.
- Physical Evaluation Board Proceedings (DA 199) and VA Ratings Packet
  The Informal PEB issues a fitness determination and records the Preliminary VA Ratings on the DA 199. If a Formal PEB was held, the final DA 199 must be updated by the PEB to reflect any and all changes. The Soldier has **10 days** to review the IPEB Findings, to include the Preliminary VA Ratings, and make an election. The PDA completes an internal quality check and approves the final DA 199.
  *Note: Each time new findings are issued, the Soldier has a new **10 day** election period.*
- Soldier's Election on DA 199
  The Soldier has **10 days** from receipt of the DA 199 and VA Preliminary Ratings to make an election.
- Rating Reconsideration Findings
  The VA DRAS has **15 days** to deliver the Rating Reconsideration findings to the PEB.
- Estimated Compensation Worksheet (DA 5892)
  The PEBLO will complete DA Form 5892 and explain the computation to the Soldier in the course of counseling the Soldier on the Informal PEB findings (AR 635-40, 4-20d(1)).

Table Of Contents

Transition Phase

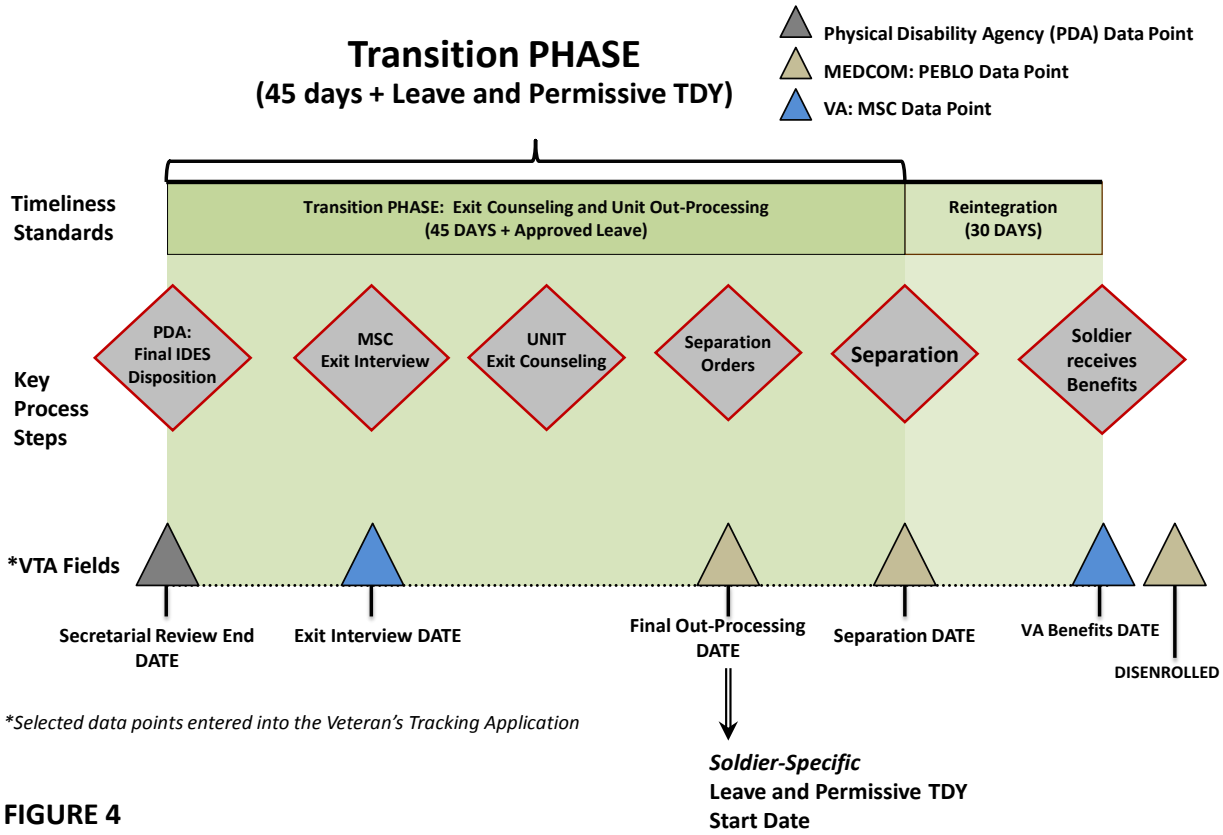

FIGURE 4
IDES Transition and Reintegration PHASES
Timeliness Goals and VTA Calculations

Transition Phase

- **Exit Counseling and Out-Processing (45 days)**
- **Leave and Permissive TDY (*Soldier-Specific*)**

Step 1. Soldier has exit interview with MSC
Step 2. Soldier reports to Unit and Transition Center
Step 3. Soldier receives separation orders (DD 214)
Step 4. Unit guides Soldier through out-processing requirements
Step 5. Soldier takes leave until final separation date

1-36. The Transition Phase of IDES is a **45-day** process to guide the Soldier through out-processing requirements for retirement and/or separation from the Army (DTM 11-015 Attachment 7). The precise duration of the Transition Phase will depend on installation-specific out-processing requirements, as well as Soldier-specific approved leave, and permissive TDY (DTM 11-015 Attachment 7). The lead proponent for the Transition Phase for each MTF-based Soldier is the Installation Transition Center in close coordination with the Soldier's Chain of Command (AR 635-10). A Soldier on Active Duty must report to the Transition Center within **3 working days** of receipt of the

PDA-approved final DA 199. The Transition Center will establish the Final Separation Date with the Soldier, which generally must occur within **90 days**. Extension may potentially be approved for leave that could not occur sooner or for extenuating circumstances. The first Colonel/0-6 in the Soldier's chain of command is the approval authority for extension due to leave; PDA is the approval authority for requests based on extenuating circumstances. The Transition Office representative will issue the separation or retirement orders and draft the Certificate of Release or Discharge (DD 214) with an *expected* separation date that will become effective only after final separation (DTM 11-015 Appendix 12 to Attachment 4). A copy of the separation orders and DD214 should be provided by the Transition Office to the MSC, and ideally, the PEBLO. (DTM 11-015 Appendix 12 to Attachment 4)

1-37. For an RC Soldier not on Active Duty orders, the Transition Phase is managed by the Chain of Command who must ensure process standards are met and that the Soldier is fully apprised of all out-processing requirements (DTM 11-015 Attachment 7). The PDA will issue the separation or retirement orders in the electronic Physical Evaluation Board (ePEB) system and send the orders to the Soldier, his/her Chain of Command, the Soldier's PEBLO, the Defense Finance and Accounting Services (DFAS), as well as the State Joint Force Headquarters and National Guard Bureau for ARNG Soldiers, the Regional Support Command for USAR Soldiers. (AR 635-40, Chapter 4)

1-38. For each Soldier on Active Duty, the Soldier's Chain of Command is responsible for managing and coordinating all out-processing activities, including scheduling all approved leave and permissive TDY. The goal is to complete the Transition Phase of the IDES process within **45 days** from the date the PDA-approved final DA 199 is issued (DTM 11-015 Attachment 4). This time does not include any leave and/or permissive temporary duty (TDY).

1-39. If and when informed of the estimated separation date, the PEBLO will enter the [Final Out-Processing Date] into VTA such that all approved leave and permissive TDY will be accounted for between the [Final Out-Processing Date] and the [VA Benefits Date]. (DTM 11-015 Appendix 4 to Attachment 4)

Transition Phase Deliverables (45 days):

- Certificate of Release or Discharge (DD 214)
  The Transition Center assigned to each unit (or the PDA, when applicable) will assign a future separation date and issue the separation orders on the Certificate of Release or Discharge (DD 214) that will become effective after final separation. The Transition Center will provide the Soldier, PEBLO, and MSC a copy of the orders and DD 214. (Note: PDA issues the disability retirement or separation order on the RC Soldier who is not on active duty. An RC Soldier when not on active duty does not receive a DD 214.)
- Request and Authority for Leave (DA 31)
  The Soldier's Unit processes and approves all leave and permissive TDY.

Post-Transition Reintegration Deliverable

- VA Benefits Letter
  The DRAS will issue a final rating decision and provide a final benefits letter to the Soldier within **30 days** of separation.

Table Of Contents

CHAPTER TWO
ROLES AND RESPONSIBILITIES

2-0. IDES is a collaborative process. The Soldier, Staff and Commands each play a critical role and have specific responsibilities. IDES requires a high-level of coordination between the Soldier and their Chain of Command to ensure each understands expectations, the Soldier keeps their appointments; and that each participant meets their requirements.. The Commander must have full visibility of each Soldier at every level and maintain close contact with their PEBLOs. The Army and the VA must have clear lines of communication and follow published standards. This chapter defines IDES roles and responsibilities as well as the standards that will be measured at all the Army, Region, and MTF level.

Soldier…..……..……..……..…… 24

Soldier's Unit Command……..…….. 25

Military Treatment Facility Commander……..…….. 26

Senior Mission Commander…….……..… 27

Physical Evaluation Board Liaison Officer…..……..… 28

Contact Representative ……...……..… 29

Administrative Assistant ……...…..… 29

VA Military Services Coordinator…..……..…… 30

Office of Soldiers' Counsel……..……..……..… 31

Medical Treatment Provider……...…… 32

Medical Evaluation Board Provider……...……...…… 33

Medical Evaluation Board Approval Authority..…..… 34

Reference Guide

In-text citations refer to authoritative IDES policy and regulations.

Table Of Contents

SOLDIER

2-1. During the IDES process, the Soldier should work closely with their PEBLO, keeping them informed of all changes in personal circumstances, appointment conflicts and Command-approved leave. The Soldier should attend all scheduled appointments, assist in providing required personnel and administrative data, and maintain regular, open communication with the PEBLO. Any leave, temporary duty (TDY) or separation orders should be shared with the PEBLO. The Soldier may check the status of their case by accessing MyMEB via Army Knowledge Online (AKO) and VA's eBenefits site.

Soldier Responsibilities:

- Medical and Administrative Appointments Attendance
  The Soldier's primary responsibility is to attend all medical and administrative appointments with both the Army and with VA staff.
- Initial Contact with PEBLO and MSC
  The Soldier will receive counseling from the assigned PEBLO regarding the IDES process and review Section 1 of the VA 21-0819. The Soldier will receive counseling from the assigned MSC and complete Sections 2-7 of VA 21-0819 (DTM 11-015 Appendix 6 to Attachment 4). The Soldier records all service-connected claimed conditions. These are conditions not listed on the P3/P4 Physical Profile. The Soldier is not required to claim additional conditions (DTM 11-015 Appendix 6 to Attachment 4). The Soldier may always seek assistance from government legal counsel, private counsel at his/her own expense, or from a representative from a VA-recognized Veterans Service Organization (VSO). Soldiers should be aware that representation with a VSO may not be confidential in the absence of an official attorney-client relationship.
- Soldier's MEB/PEB Counseling Checklist (DA 5893)
  The Soldier will initial the checklist throughout the IDES process to verify that they comprehend their role and responsibilities at each step (AR 635-40 App C).
- MEB Packet Review and Election
  The Soldier is expected to review the DA 3947 and make an election to concur, non-concur (with or without a written statement), or request an IMR and/or Appeal within **5 calendar days** of PEBLO counseling of the MEB findings (DTM 11-015 Appendix 1 to Attachment 4).
- PEB Findings Review and Election
  The Soldier will receive counseling from their PEBLO regarding the PEB Findings (DA 199) (DTM 11-015 Appendix 4 to Attachment 4). If found unfit, the Soldier will also receive and review the Preliminary VA Rating as recorded on the DA 199. The Soldier must make an election within **10 calendar days** to concur, non-concur (with or without statement), non-concur and request a formal hearing, and/or request a **one-time** VA Rating Reconsideration for unfitting conditions only (DTM 11-015 Appendix 1 to Attachment 4).
- Formal PEB Hearing Results
  If the Soldier requested a Formal PEB, they will have the opportunity to concur or non-concur (with or without a written statement) with the findings (AR 635-40 App C). The Soldier may appeal the Formal PEB's determination to the PDA. PDA is normally the final approval authority. In rare cases with a PDA revision of PEB determinations, the Soldier has the right to appeal to the Army Physical Disability Appeal Board (AR 635-40, Ch. 4).
- Army Board for the Correction of Military Records (ABCMR)
  If the Soldier believes his/her case was subject to error or injustice, the Soldier has the right to appeal to the ABCMR after separation or retirement from the Army (AR 635-40, Ch. 2).

Table Of Contents

SOLDIER'S UNIT COMMAND

2-2.1. The Commander is responsible for ensuring Soldiers attend *all* their required medical and administrative appointments and exit briefings, and that the Soldier is in full compliance with all requirements during the IDES process (DTM 11-015 Appendix 7 to Attachment 4). Line unit commanders familiar with the Soldier's performance should be the primary source of information for assessing duty limitations on the DA 7652.

Soldier's Unit Command Responsibilities:

- Profile Review
  Commanders must ensure that T3/T4 and P3/P4 profiles are reviewed according to Army standards. Company-level commanders should review profiles at **60 days.** (AR 40-501/EXORD)
- Attendance Enforcement
  The Commander (or designee) should attend or review the IDES Orientation Briefing with the Soldier. The Commander must ensure that the Soldier attends all Army and VA appointments (DTM 11-015 Appendix 7 to Attachment 4). Commanders must designate IDES appointments as the Soldier's primary place of duty and take appropriate corrective actions to address missed appointments or non-compliance (DTM 11-015 Appendix 7 to Attachment 4)
- PEBLO Coordination
  The Soldier's Command will ensure all documentation requested by the PEBLO is provided. If a Line of Duty (LOD) determination is required, the Commander will provide the PEBLO a complete line of duty (LOD) determination (DA 2173, and DA 216 if required) within **5 days** of the request date (or the next reserve drill date for RC Soldiers) (DTM 11-015 Appendix 7 to Attachment 4). Commanders must report Soldiers in the IDES process as non-available for USR purposes.
- Commander's Statement
  The Commander will provide the PEBLO a non-medical assessment (DA 7652, generally referred to as the Commander's Statement) of the Soldier's ability to perform their current job within **5 calendar days** of the request date (or the next reserve drill date) (DTM 11-015 Appendix 7 to Attachment 4).
- Training
  Commanders must attend eProfile system, LOD and DA 7652 training within **30 days** of taking command. All commanders must attend the IDES portion of installation-sponsored command courses.
- Leave and TDY Approval
  Commanders must manage Soldier's authorized leave to ensure that it does not interfere with MEB processing. They should encourage Soldiers to use accrued leave during the PEB Phase (i.e. after the MEB Phase and before the Transition Phase). Commanders may grant exceptions for the welfare or morale of a Soldier as long as the leave taken does not prevent attendance at IDES appointments, hinder timely case processing, and is clearly communicated to the assigned PEBLO (DTM 11-015 Appendix 7 to Attachment 4). Commanders should not assign or deploy a Soldier away from their home station during the IDES process.
- Separation and Transition
  The Commander will coordinate with the transition center to determine the date of separation if medically separated. The Commander will also assist the Soldier with reintegration into the unit if returned to duty.

Table Of Contents

2-2.2. Transfer of Post 9/11 GI Bill Benefits

Commanders must ensure that Soldiers, NCOs, and Officers receive standard DES Transfer of Education Benefits counseling upon referral into the DES process. Commanders should counsel all Officers affected by the DES process, however, enlisted Soldiers should be referred to their Senior Career Counselors; standard DA Form 4856 DES TEB counseling can be found at: https://www.us.army.mil/suite/files /25431385.
Commanders should consolidate counseling for officers and maintain on record for five years.

MILITARY TREATMENT FACILITY (MTF) COMMANDER

2-3. The MTF Commander is responsible for managing IDES staff and activities and all aspects of the MEB process at their MTF. With support from the Regional Medical Commands (RMCs), the MTF Commander is responsible for local IDES policy guidance, procedures, timelines, staffing and resourcing. The MTF Commander must coordinate with the Senior Mission Commander to develop and enforce local IDES policies.

MTF Commander Responsibilities:

- The MTF Commander is accountable for the performance of all MTF-based IDES processes, establishment of clear local guidance regarding all procedures and standards, and preparation support for the all required IDES reporting on performance metrics and process assessments.
- The MTF Commander is the MEB Convening Authority with the responsibility to delegate and designate all IDES leadership roles to senior MTF medical staff including the Profiling Authority and MEB Approval Authority (DTM 11-015 Attachment 3). As the MEB Convening Authority, the MTF Commander or designee will appoint the IMR reviewer, as well as the MEB Approval Authority, who will consider any recommendations of the IMR and/or Rebuttal. The MEB Convening Authority also has the power to grant extensions to established time periods, such as the Soldier's election period, when good cause is shown.

SENIOR MISSION COMMANDER

2-4. The Senior Mission Commander is responsible for the successful completion of all aspects of the MEB process at their installation. They are responsible for ensuring all subordinate Commanders are in compliance with IDES directives and timelines. In coordination with the MTF Commander and senior IDES leaders, the Senior Commander is responsible for issuing and enforcing local IDES policy guidance, procedures, timelines, staffing and resourcing.

Senior Mission Commander Responsibilities:

- Performance Management and Reporting
  The Senior Mission Commander is accountable for all Soldiers in IDES assigned to the installation and must ensure all Unit Commanders are trained on IDES procedures and command requirements. The Senior Mission Commander must establish clear local guidance regarding all procedures and standards (DTM 11-015 Attachment 2). The Senior Commander is responsible for briefing IDES reporting slides to MEDCOM leadership.
- Training and Compliance
  Ensure that Commanders and First Sergeants receive training on all IDES processes and systems, including MEDPROS and eProfile. Senior Mission Commanders must emphasize the importance and purpose of the Commander's Performance and Functional Statement (DA 7652) as well as the critical importance of Line of Duty (LOD) reports.
- Facilities and Resource Management
  Create a common location for IDES offices, collocating both DoD and VA assets when possible. Provide borrowed military manpower via Soldiers Skill Set Utilization Program (S3UP) to support surge requirements on the installation.
- Soldier Support
  Ensure Soldiers and their families have access to the Soldier Family Assistance Centers (SFAC), Transition Centers and any other relevant services. Ensure that Commanders verify that Soldiers attend all exit briefs as required to ensure smooth handoff to the VA.
- Profile Review and Management
  Senior Mission Commanders must ensure that T3/T4 and P3/P4 profiles are reviewed according to Army standards. Ensure monthly reviews are conducted by the company commander medical authority, and care coordinator of all T3/T4 profiles accordance with DA EXORD 185-11 MOD 1.
- Precedence of Disability Evaluation to Administrative Chapter Action
  Disability evaluations take precedence over enlisted administrative separation under AR 635-200 unless the Soldier is being discharged in lieu of Trial by Courts-Martial (Chapter 10); Chapter 14 (Misconduct); or Chapter 7, Part IV (Fraud). Soldiers undergoing administrative separation pursuant to AR 635-200, Chapters 7 and 14 are entitled to completion of the MEB. After the MEB, the Soldier's General Court-Martial Convening Authority (GCMCA) determines whether the Soldier will be referred to the PEB. (Note: A chapter 14 may be initiated before the Soldier's separation date for disability. If this occurs, the disability disposition is suspended for the GCMCA's determination. The last level of PEB or PDA processing should be forwarded to the GCMCA for his/her consideration.) A Soldier facing discharge under AR 635-200 Chapter 10 has no eligibility for any phase of the DES. Officers are processed concurrently for both medical and administrative separation with one exception: Officers resigning for the Good of the Service in lieu of being referred to a Generals Court-Martial are ineligible for any phase of the DES. (Note: Officers resigning for the Good of the Service for other reasons are dual processed.) For other administrative separation actions, both the DES case and the administrative separation case are forwarded to the Deputy Assistant Secretary Review Boards to make the disposition determination. However, in the case of officer elimination actions, dual processing will not occur if the officer is referred to the DES after the DASA Review Board has approved the elimination action.

PEBLO (Physical Evaluation Board Liaison Officer)

2-5. Throughout the entire IDES process, the PEBLO is the Soldier's non-clinical case manager providing the link between the Soldier, the Family, the Chain of Command, and the VA MSC. The PEBLO is the Soldier's primary IDES advisor, ensuring that the Soldier and his/her family understand the requirements through the MEB, PEB and Transition phases. The PEBLO is responsible for entering all VTA data fields according to published standards.

PEBLO Responsibilities:

- Initial Counseling
  The PEBLO will provide initial counseling to the Soldier within **10 days (30 days/RC)** of Referral**.** The PEBLO is the primary case manager and advisor to the Soldier, the Family member(s) and Command throughout the IDES process (DTM 11-015 Appendix 4 to Attachment 4).
- Case Development
  The PEBLO will assemble the IDES case file, enroll the Soldier in the Veterans Tracking Application (VTA) and eMEB, and refer the Soldier to a VA Military Services Coordinator (MSC). The PEBLO reviews Section 1 of the VA 21-0819, and provides the MSC a copy of Soldier's IDES case file including the complete STR. The PEBLO will notify the Soldier's Commander once referred into the IDES and request required administrative and personnel documents. The PEBLO will coordinate all necessary appointments for the Soldier in conjunction with the MSC (DTM 11-015 Appendix 4 to Attachment 4).
- Completion of MEB Packet
  The PEBLO incorporates the C&P medical examination results and the Integrated NARSUM into the IDES case file and provides it to the MEB Convening Authority, Approval Authority and MEB Physician Reviewers. When all MEB processes (including IMR and Appeals, if applicable) are complete, the PEBLO forwards the complete case file to the PEB via eMEB to ePEB (DTM 11-015 Appendix 4 to Attachment 4)
- MEB Counseling
  The PEBLO will review the MEB Findings and counsel the Soldier on MEB election options when the MEB Approving Authority approves the case file (and, if applicable, when the MEB Approval Authority approves the post-appeal DA 3947) (DTM 11-015 Appendix 4 to Attachment 4).
- PEB Counseling
  The PEBLO will counsel the Soldier on PEB Findings and Preliminary VA Ratings (DA Form 199) utilizing the Soldier's Medical Evaluation Board/Physical Evaluation Board Counseling Checklist (DA Form 5893). The PEBLO will also counsel the Soldier on their election options (DTM 11-015 Appendix 4 to Attachment 4).

CONTACT REPRESENTATIVE

2-6. The Contact Representative (CR) provides administrative services to support PEBLOs in the processing of MEBs for Soldiers enrolled in IDES.

Contact Representative Responsibilities:

- Case Development
  The CR may enter the Soldier's case information into the Veterans Tracking Application (VTA) and eMEB, and ensures that the applications are updated as the case proceeds. The CR will ensure all conditions are documented accurately on required forms during the IDES process to include: assembling required forms and records checking for case completeness and ascertaining that all required laboratory studies, X-rays, tests, etc., have been obtained based on physicians' request. The CR may request records and search for misplaced records.
- MEB Coordination
  The CR will ensure medical information from the STR, MEB, and VA are collected and provided to the PEBLO. The CR may verify patient information and provide written and/or verbal instructions to the Soldier and their family member(s) regarding each step of the IDES process. The CR may assist with coordination of all necessary appointments with direction from the PEBLO and MSC.

ADMINISTRATIVE ASSISTANT (often called the PEBLO Assistant)

2-7. The Administrative Assistant provides administrative support services for Soldiers referred into IDES.

Administrative Assistant Responsibilities:

- Case Development
  The Administrative Assistant may coordinate with the PEBLO and the CR to arrange for collection of medical information from the STR, MEB providers and VA Qualified Medical Examiners. The Administrative Assistant will ensure all STR documents are copied according to standard and assist Soldiers obtain any civilian health records. The Administrative Assistant may prepare and assemble required forms and records, checking for completeness and confirming that all required laboratory studies, X-rays, tests, etc., have been obtained and are valid for the purposes of the MEB. The Administrative Assistant may request records and search for misplaced records. The Administrative Assistant may verify patient information and all forms needed to document treatment and other information for the MEB are contained in the STR.

VA MILITARY SERVICES COORDINATOR (MSC)

2-8. The VA MSC is a critical contact for the Soldier throughout the IDES process. Assigned immediately after the PEBLO is assigned, MSCs provide the link between the Soldier, Family member(s), Commander and VA Qualified Medical Examiners by keeping the Soldier and the PEBLO informed of VA processing, appointments and determinations. The MSC is responsible for entering all VTA data fields according to published standards.

VA MSC RESPONSIBILITIES:

- Initial Counseling
  The MSC will counsel the Soldier within **10 days** (**30 days**/**RC**) of receiving the Soldier's IDES case file from the PEBLO.
- Case Development
  The MSC counsels the Soldier and requests medical examinations using the Compensation and Pension Record Interchange (CAPRI), Veterans Examination Request Information System (VERIS), or other VA system, as required.
- Completion of MEB Packet
  The MSC provides examination results and counsels the Soldier throughout the IDES process. The MSC must provide the completed medical examination results to the PEBLO and DRAS of jurisdiction.
- Exit Interview
  Upon receipt of final disposition (Separation or RTD), the MSC conducts a final exit interview with the Soldier before they depart the installation to gather any additional required information needed to expedite processing of current and/or future VA benefits. (DTM 11-015 Appendix 6 to Attachment 4)

OFFICE OF SOLDIERS' COUNSEL

2-9. The Soldier has an opportunity to request and receive free appointed military legal counsel at every step of the IDES process from Referral through final determination. The Soldiers' MEB Counsel (SMEBC) assist Soldiers from IDES Referral up to and including the Informal PEB election. The Soldiers' PEB Counsel (SPEBC) assist with both Formal PEB review and post-FPEB appeals, when applicable. OSC staff do not provide legal advice to Commanders, the MEB or the PEB.

Office of Soldiers' MEB Counsel (SMEBC) Responsibilities:

- Initial Briefing
  In coordination with the PEBLO, the Soldiers' MEB Counsel will provide Soldiers mandatory legal briefings to occur prior to the Soldier's meeting with the VA MSC for completion of their VA 21-0819.
- Availability from Referral to Informal PEB Election
  SMEBC personnel inform, assist, and advocate for Soldiers. They may assist with the VA 21-0819, MEB Elections, IMR requests, MEB and Informal PEB rebuttals/appeals, and VA Rating Reconsideration Requests. SMEBC staff work with Soldiers to manage expectations, provide independent legal advice and assist in goal formation as early as possible the IDES process.

Office of Soldiers' PEB Counsel (SPEBC) Responsibilities:

- Availability through the Formal PEB and Post-FPEB Appeals
  SPEBC personnel represent Soldiers at Formal PEB hearings, prepare any post-PEB appeals, and assist in preparing VA Rating Reconsideration Requests. SPEBCs also prepare appeals before the Army Board for Correction of Military Records (ABCMR) or the Department of Defense Physical Disability Board of Review (PDBR).

MEDICAL TREATMENT PROVIDER

2-10. The Medical Treatment Provider is a credentialed provider responsible for routine primary care and treatment of Soldiers before, during and after the MEB Phase.

Medical Treatment Provider Responsibilities:

- Profile Creation
  The Medical Treatment Provider writes all T3/T4 and P3/P4 profiles for review by Senior Mission Commanders. Medical Treatment Providers must be subject matter experts regarding profiling standards as detailed in AR 40-400, Chapter 7. The Medical Treatment Provider must coordinate with MTF IDES staff to ensure all profiles are written and managed according to published standards (AR 40-501, Ch. 7).
- Referral Decision
  The Medical Treatment Provider will review the profile (DA 3349) and STR to determine if the Soldier has a condition(s) that does not appear to meet medical retention standards. Generally, the Medical Treatment Provider will create the P3/P4 profile and forward it to the designated MEB Profiling or Approval Authority for the 2nd Signature (AR 40-501, Ch. 7).

MEDICAL EVALUATION BOARD (MEB) PROVIDER

2-11. The MEB provider is a credentialed medical provider who completes a comprehensive, administrative review of all available medical documentation during the MEB Phase. The MEB provider will summarize all administrative and medical data, including military, civilian and VA records, in an Integrated NARSUM (AR 40-501, Ch. 7). The MEB provider who writes the NARSUM will generally be designated as a Physician Reviewer and will sign the MEB Proceedings (DA 3947). To maintain impartiality, MEB Physician Reviewers should not engage in direct clinical care with Soldiers for which they serve on the MEB. The MEB provider will refer any Soldier to the appropriate MTF or network provider when the Soldier requires clinical care (to include clinical care to evaluate, for diagnostic purposes, new conditions the Soldier brings forth during the IDES process).

MEB Provider Responsibilities:

- Profile Review
  The MEB provider will review the profile (DA 3349) and STR to confirm whether the Soldier has at least one condition that does not appear to meet medical retention standards (AR 40-501, Ch. 7). The MEB provider will review Section 1 of the VA 21-0819, ensuring medical conditions from the P3/P4 profile are included (DTM 11-015 Appendix 2 to Attachment 4).
- NARSUM Development
  Upon receipt of a completed IDES case file from the PEBLO, the MEB provider will review the Soldier's medical records and the VA C&P exam results to prepare the Integrated NARSUM summarizing the medical conditions and describing the impact of these medical conditions on the Soldier's duty performance (AR 635-40, Chapter 4).
- MEB Physician Review
  The MEB provider who wrote the NARSUM will generally serve as the Physician Reviewer signatory on the DA 3947 (AR 40-400, Ch. 7).

MEB APPROVAL AUTHORITY

2-12. The MEB Convening Authority will designate the MEB Approval Authority. The MEB Approval Authority may not participate in the board proceedings as a member, witness, consultant, or in any other capacity. To maintain objectivity, the MEB Approval Authority should not be any of the three original signatories on the DA 3947. This will ensure due process for the Soldier and maintain the integrity of the proceedings.

MEB Approval Authority Responsibilities:

- Appeal Review
  When the Soldier requests an IMR and/or submits a written rebuttal to the MEB findings on the DA 3947, the MEB Approval Authority (typically the DCCS or designee) has **5 days** to review the case and send an Appeal Findings Memo to the PEBLO. The MEB Approval Authority may uphold the findings of the MEB, amend the findings with a written addendum to the MEB, or return the MEB for reconsideration. (AR 635-40) All documents must be noted by the Approval Authority on the final DA 3947 and included in the final case packet sent forward to the PEB.

Table Of Contents

CHAPTER THREE
STANDARDS AND COMPLIANCE

3-1. The primary quantitative measure of efficiency for IDES is timeliness. VTA is the database of record for measuring timeliness and caseloads. All MTFs are required to have training, management and enforcement in place at all levels to ensure all staff members with access to and responsibilities for VTA entry meet data input standards. Each data point has a specified standard for input. For example, the PEBLO has **3 working days** upon notification of the 2nd Signature on a P3/P4 Profile to enter the [Referral Date] into VTA (Annex B to EXORD 37-132). Each data point also has a specified description and format guidelines. Current VTA field operational definitions are available in the VTA Library. All VTA Data fields should be input within **72 hours**. VTA updates every Sunday, therefore MTFs should ensure that all data is accurate and up to date by **close of business each Friday**. Other databases and systems such as, but not limited to, the electronic Medical Evaluation Board (eMEB), eProfile, and Defense Medical Human Resource System-internet (DMHRSi) are used to track IDES case processing metrics and the same standards apply for access and training.
(AR 40-501, Chapter 7)

3-2. The primary qualitative measure of effectiveness is stakeholder satisfaction. Soldiers and families must feel their needs and concerns are addressed and that they have adequate representation throughout the process. Staff and Commands must encourage an environment of information sharing and accountability. Medical Treatment Providers, MEB providers, MTF Senior Leaders and Case Managers (including PEBLOs and MSCs) must have defined methods of communication and standard guidance to clarify procedures for both routine and exceptional cases. (DoDI 1332.38) (AR 40-400, Chapter 7)

3-3. Compliance will be monitored through standardized reporting mechanisms at the Army, Region, and MTF level. These standards will be incorporated into each Regional Medical Command's Organizational Inspection Program (OIP). Additionally, staff at the MTF-level will include these standards in their performance objectives.

TIMELINESS STANDARDS (By Phase and Stage)

Performance Standards during Treatment: <u>TEMPORARY PROFILE MANAGEMENT</u>
3-4. The Army standard requires 100% review of temporary profiles with a 3/4 in the Physical Profile Serial System (PULHES) series active for over **30 days**, at specified intervals by specified levels of Command. Reviews must continue from the date a temporary profile is assigned to the date of return to duty or MRDP determination. (AR 40-501, Chapter 7) (EXORD 037-13)

Calculation Standards:

- Total T3/4 Profiles: [# T3/4 Profiles >30 days (except pregnancy and MR 3B)]
- >180 days: [# T3/4 profiles equal to or greater than 180 days, but less than 270 days]
- >270 days: [# T3/4 profiles equal to or greater than 270 days, but less than 360 days]
- >360 days: [# T3/4 profiles equal to or greater than 360 days]

IDES PERFORMANCE STANDARD

3-5. The standard for the Army is to complete **80%** of the cases in no more than **295 days (305 days for RC**) from the date of referral to the IDES to the date of return to duty or disability separation and notification of VA benefits decision. (DTM 11-015)

Performance Standards for MEB PHASE

3-6. The MEB phase of the IDES includes activities from the point of referral to the DES to the transfer of a completed MEB case file to the PEB. The standard is to complete the MEB Phase for **80%** of the cases in no more than **100 days (140 days for RC**) from the [MEB Referral Date] to the date of receipt of the complete MEB case file by the PEB [MEB End Date]. The MEB Phase includes: Referral Stage **(AC 10 days, RC 30 days)**, Claim Development Stage **(AC 10 days, RC 30 days)**, Medical Evaluation Stage (**45 days**, includes C&P examinations), and MEB Stage (**35 days**, including NARSUM preparation). (DTM 11-015)

Calculation Standards:

- # Cases: [# of cases [MEB Referral Date with blank MEB End Date] in calendar month. These are cases referred into the MEB that have not been sent to the PEB.
- # Over: Cases Exceeding 100 days (AC) and 140 days (RC**)**: [# of cases pending in the MEB phase already over timeliness standards] in calendar month
- % Over: [# cases overdue] divided by [# cases with MEB Start Date and blank MEB End Date] in calendar month
- NARSUM Productivity: [# number of NARSUMs completed in month] divided by [# of MEB provider FTEs available during calendar month]
- PEBLO Case Ratio: [# of current cases with PEBLO assigned] divided by [# PEBLOs with current cases] in calendar month
- % MEB Returns: [# of cases returned from PEB] divided by [total # of cases sent to PEB] in calendar month
- % MEB IMR: [# cases with [IMR Start Date] divided by [# cases with MEB End Date] in calendar month
- % MEB Appeals: [# cases with MEB Appeal Start Date] divided by [# cases with MEB End Date] in calendar month

Performance Standards for PEB PHASE

3-7. The standard is to complete the PEB Phase of the IDES process for **80%** of the cases in no more than **120 days** from the date of receipt of the complete MEB case file by the PEB [IPEB Start Date] to the date the U.S. Army Physical Disability Agency (USAPDA) approves the final determination [Secretarial Review End Date]. The PEB Phase includes **15 days** for administrative processing tasks, such as copying and mailing case files. The PEB Phase includes: IPEB Stage **(15 days)** and Preliminary Rating Stage **(15 days).** If a Soldier appeals the IPEB determination, this phase will also include a **30 day** FPEB Stage and an optional **30 day** FPEB Appeal Stage. If a Soldier

Table Of Contents

requests a rating reconsideration, the phase will also include a **15 day** VA Rating

Calculation Standards:

- # Cases: Count of cases still in the PEB Phase in calendar month [MEB End Date and PEB Start Date] without [Secretarial Approval End Date]
- # Over: Cases Over 120 days: Total number of cases in the PEB Phase already exceeding timeliness standards in calendar month
- % Over: [#Over] divided by [#Cases] in calendar month

Reconsideration Stage. (DTM 11-015)

Performance Standards for TRANSITION PHASE

3-8. During the Transition Phase, a Soldier is processed for RTD or separation from the Army. The goal is to complete the Transition Phase of the IDES process for **95%** of the cases in **45 days** (plus any amount of leave and permissive temporary assigned duty (PTDY) authorized by the Soldier's unit command) from the date of approval of the Soldier's PEB [Secretarial Review End Date] until the Soldier's Date of Separation listed on the DD 214 or Return to Duty. When informed of the anticipated separation date, the PEBLO may enter the [Final Out-Processing Date] into VTA such that all leave and permissive TDY will be accounted for between the [Final Out-Processing Date] and the [VA Benefits Date]. (DTM 11-015)

DMHRSi CODING for IDES / MEB MANHOURS

3-9. All IDES work is administrative in nature and should be coded using ONLY the **FEDC** code for all non-PEBLO staff. PEBLOs continue to use the **FEDB** code. There are no 'clinical IDES B codes' and all MTF staff must report time accordingly. MTFs are responsible for coordinating updated DMHRSi templates and time coding for all MTF providers signing NARSUMs. Additionally, all MEB providers (civilian, military, borrowed military manpower and contract) must coordinate with the MTF DMHRSi office to ensure each provider has an account, a template and clear guidance on timekeeping. (AR 40-68) (DoD 6010.13-M)

PROVIDER PRODUCTIVITY STANDARDS

3-10. MEB providers will complete and sign a minimum of **20 NARSUMs per full-time equivalent (FTE) per calendar month (Annex O)**; Provider productivity will be calculated and evaluated based on the percentage of time dedicated to MEB work. Productivity measurements require team coordination, active caseload management and accurate Medical Expense & Performance Reporting System (MEPRS) time coding in DMHRSi.

Calculation Standard:
Completed NARSUM count for each MTF will be calculated using the NARSUM Date field in the VTA system of record. eMEB will be used to capture TDRL and Legacy DES case NARSUMs. The number of Full Time Equivalent (FTE) MTF providers signing NARSUMs will be calculated using DMHRSi reports.

CONCLUSION

This publication provides a guide for standardized execution of the IDES process. IDES is a collaborative process that requires coordination across organizations, Commands and agencies. Success is based on a consistent order of operations, clear channels of communication, and well-understood roles and responsibilities. This Guidebook is intended to be the common point of reference for stakeholders within the IDES process to understand, implement, and comply with all aspects of the procedures, responsibilities, and standards listed.

Table Of Contents

CHAPTER FOUR
GLOSSARY

SECTION I – ACRONYMS AND ABBREVIATIONS	
AC	Active Component
AKO	Army Knowledge Online
ARMMC	Army Reserve Medical Management Center
ARNG	Army National Guard
C&P Exam	Compensation & Pension Examination
CAPRI	Compensation and Pension Record Interchange
COAD	Continuation on Active Duty
COAR	Continuation on Active Reserve
DCCS	Deputy Commander for Clinical Services
DFAS	Defense Finance and Accounting Services
DIMA	Drilling Individual Mobilization Augmentee
DMHRSi	Defense Medical Human Resource System-internet
DoD	Department of Defense
DRAS	Disability Rating Activity Site
eMEB	Electronic Medical Evaluation Board
ePEB	Electronic Physical Evaluation Board
eProfile	Electronic Profile
FPEB	Formal Physical Evaluation Board
FTE	Full-time equivalent
HRC	Human Resources Command
IDES	Integrated Disability Evaluation System
IMA	Individual Mobilization Augmentation
IMR	Impartial Medical Review
IPEB	Informal Physical Evaluation Board
IRR	Individual Ready Reserve
MAR2	MOS Administrative Retention Review
MEB	Medical Evaluation Board
MEBROC	Medical Evaluation Board Remote Operating Center
MEBTO	Medical Evaluation Board Tracking Office
MEPRS	Medical Expense & Performance Reporting System
MMC	Medical Management Center
MOA	Memorandum of Agreement
MOS	Military Occupational Specialty
MOU	Memorandum of Understanding
MRDP	Medical Retention Determination Point
MSC	Military Services Coordinator
MTF	Military Treatment Facility
NARSUM	Narrative Summary
NDR	Non-Duty-Related
OCONUS	Outside the Continental United States
OIP	Organizational Inspection Program

Table Of Contents

OPIN	OCONUS Provisional Integrated Narrative Summary
PCS	Permanent Change of Station
PDA	Physical Disability Agency
PEB	Physical Evaluation Board
PEBLO	Physical Evaluation Board Liaison Officer
PULHES	Physical Profile Serial System
RC	Reserve Component
RC-SMSC	Reserve Component - Soldier Medical Support Center
RMC	Regional Medical Command
RSC	Regional Support Command
RTD	Return to Duty
SMEBC	Soldiers' Medical Evaluation Board Counsel
SPEBC	Soldiers' Physical Evaluation Board Counsel
START-C	Soldier Transfer and Regulating Tracking Center
STR	Service Treatment Record
TDY	Temporary Duty
VA	Department of Veterans Affairs
VCSA	Vice Chief of Staff of the Army
VERIS	Veterans Examination Request Information System
VSO	Veterans Service Organization
VTA	Veterans Tracking Application
VTC	Video Tele-conference
WTU	Warrior Transition Unit

Table Of Contents

SECTION II - TERMS	
Active Component (AC)	Full-time duty in the active military service of the United States.
Army Board for Correction Of Military Records (ABCMR)	The highest level of administrative review within the Department of the Army with the mission to correct errors in or remove injustices from Army military records. If a Soldier believes their IDES case was subject to error or injustice, the Soldier has the right to appeal to the ABCMR after separation or retirement from the Army.
Army Medical Command (MEDCOM)	A direct reporting unit of the U.S. Army that provides command and control of the Army's fixed-facility medical, dental, and veterinary treatment facilities, providing preventive care, medical research and development and training institutions.
Army Physical Disability Agency (PDA)	The PDA supports the G-1 as the proponent for the DES process. It is the final approval authority for PEB fitness determinations.
Compensation and Pension (C&P) Qualified Medical Examiners	C&P Qualified Medical Examiners, as specified in local Memorandums of Agreement (MoA), are responsible for completing general medical and specialty examinations within 45 days of receiving an IDES C&P disability examination request and service treatment record. The Qualified Medical Examiners follow VA operational instructions for scheduling, notifying and conducting VA C&P medical examinations.
Compensation and Pension (C&P) Examination	A general medical examination, performed by a Qualified Medical Examiner, that addresses not only those conditions claimed by the Soldier and referred by the MEB provider, but also includes a comprehensive screening of all body systems. Specialty examinations, in addition to the general medical examination, will be performed for cases involving vision, hearing, dental, psychological conditions, or other complex medical conditions.
Compensation and Pension Record Interchange (CAPRI)	CAPRI is an automated information system that provides authorized users with read-only to electronic health records (EHRs). This access facilitates the work of Veterans Service Officers helping Veterans prepare claims for VA benefits.

In-text citations refer to authoritative IDES policy and regulations.

Continuation on Active Duty (COAD)	An exception to policy in which an Active Duty Soldier found unfit due to physical disability may be deferred from disability separation or retirement when it is determined that the Soldier can still serve effectively with proper assignment limitations. Soldiers must meet evaluation criteria, but may apply though they have less than the 15 years of Active Federal service (AFS). Soldiers with at least 20 years of AFS normally will not be approved for COAD unless they have mission essential skills.
Continuation on Active Reserve (COAR)	An exception to policy to policy in which a Reserve Component Soldier requests continuation in the USAR or ARNG in a non-Active Duty status in lieu of immediate separation or retirement for disability. As with COAD, Soldiers must meet evaluation criteria, but may apply though they have less than the 15 years of qualifying service. Soldiers with at least 20 qualifying years normally will not be approved for COAR unless they have mission essential skills.
Defense Medical Human Resource System-internet (DMHRSi)	DMHRSi is a web-based, tri-service human resources system. It is designed to provide ready access to essential manpower, personnel, labor cost assignment, education/training, and personnel readiness information across the Military Health System (MHS).
VA Disability Rating Activity Site (DRAS)	The VA Disability Rating Activity Site (DRAS) evaluates all unfitting referred and/or claimed conditions and provides proposed disability ratings, with supporting rationale, to the PEB for each service-connected condition. The DRAS issues a final rating decision and provides a final benefits letter to the Soldier following the Soldier's separation.
Electronic Medical Evaluation Board (eMEB)	eMEB enables the electronic processing of Medical Evaluation Boards. The system contains, collects, maintains, transmits, and stores information from Soldiers undergoing Medical Evaluation Boards at Army Medical Treatment Facilities. eMEB reduces the amount of time for processing an MEB case, as the required forms are digitized, available online, and capable of pulling from other authoritative data sources.

Electronic Profile (eProfile)	eProfile is a software application within the Medical Operational Data System (MODS) suite that allows global tracking of Army Soldiers who have a temporary or permanent medical condition that may render them medically non-deployable.
Electronic Physical Evaluation Board (ePEB)	ePEB enhances the disability evaluation process by allowing for the seamless transfer of Soldiers' medical information between the Army and VA.
Fit for Duty	A Soldier is determined fit when he or she can reasonably perform the duties of his/her Primary Military Occupational Specialty (MOS) or Specialty Code duties in accordance with the standards set forth in DoDI 1332.38, Encl 3, Part 3 and AR 635-40
Formal PEB (FPEB)	The Formal Physical Evaluation Board implements 10 U.S.C. 1214 which provides that no Service member can be retired or separated for disability without a full and fair hearing if he or she demands it. The Formal PEB consists of a panel of medical and non-medial adjudicators who determine whether the Soldier's medical conditions preclude the Soldier from reasonably performing the duties of his or her Primary MOS or Specialty Code duties.
Impartial Medical Review (IMR)	An IMR is an independent clinical review of the MEB case file for completeness. It is conducted by a credentialed provider not otherwise involved in the Soldier's MEB, ideally the Medical Treatment Provider most familiar with the Soldier's medical history. The MTF-based IMR provider reviews the final MEB packet to make sure all diagnoses and notes have been accurately recorded on the NARSUM and the DA 3947. This review must be completed and returned to the PEBLO within 5 days.
Informal PEB (IPEB)	The Informal Physical Evaluation Board (IPEB) reviews administrative, medical, and personnel documentation to render a fit or unfit determination. Soldiers determined unfit have the statutory entitlement to demand a formal hearing. By policy, Soldiers determined fit by the Informal PEB may request a formal hearing.
Integrated Disability Evaluation System (IDES)	IDES is a disability evaluation and compensation process for wounded, ill, and injured Soldiers. The

	Department of Veterans Affairs and the Department of Defense collaborated to develop IDES to meet Soldiers' needs, with the goals of: 1) reducing the overall time it takes a Soldier to progress through the DES process, starting at the time of referral to the Medical Evaluation Board (MEB) and ending at receipt of VA benefits or return to duty (RTD), 2) Utilizing a single examination process that meets the needs of VA and DoD, and 3) Increasing transparency of both the military disability evaluation system and VA claims processes for wounded, ill, and injured Soldiers and their families.
Leave and Earnings Statement (LES)	The LES is a comprehensive statement of a Soldier's leave and earnings showing entitlements, deductions, allotments, leave information, tax withholding information, and Thrift Savings Plan (TSP) information.
MEB Phase	The Medical Evaluation Board (MEB) Phase of IDES determines whether a Soldier has one or more conditions that fail to meet medical retention standards. The phase consists of four stages: Referral, Claim Development, Medical Evaluation, and MEB.
Medical Evaluation Board (MEB)	An administrative body that determines if a Soldier's illness/injury prevents him/her from meeting medical retention standards identified in chapter 3 of Army Regulation 40-501.
Medical Expense & Performance Reporting System	The Medical Expense & Performance Reporting System (MEPRS) is the standard cost accounting system for the Military Health System (MHS), containing Tri-Service financial, personnel, and workload data from reporting medical and dental treatment facilities worldwide.
Medical Management Center (MMC)	Medical Management Center (MMC) is a program to assist unit and rear detachment commanders with managing and assisting Medically Not Ready (MNR) Soldiers through the healing process.
Military Treatment Facility (MTF)	A Military Treatment Facility is a medical center or hospital where a Soldier receives treatment or therapy.
Narrative Summary	Prepared by the MEB provider, the Narrative

(NARSUM)	Summary (NARSUM) lists all active diagnoses and makes determinations whether each condition individually or collectively meets the medical retention standard for the given condition IAW AR 40-501, chapter 3. When applicable, behavioral health and/or dental providers may provide consultation when the MEB provider has significant questions about conditions in these specialties.
PEB Phase	The Physical Evaluation Board (PEB) Phase determines whether a Soldier is fit or unfit for duty. At a minimum, the phase consists of an Informal PEB stage and a preliminary rating stage, along with Soldier options for a Formal PEB, appeal, and ratings reconsideration.
Reserve Component – Soldier Medical Support Center (RC SMSC)	The Reserve Components Soldier Medical Support Center (RC SMSC) was established in January 2011 in Pinellas Park, FL as a pilot program to improve visibility of and accountability for RC Soldier medical evaluation board (MEB) packets and to eliminate the backlog of RC medical cases that has resulted from delayed or incomplete packets. The RC SMSC serves as a link between RC Soldiers and the Army medical system by providing administrative medical support by reviewing packets and entering them into the MEB process. RC SMSC is managed by the Army Reserve Medical Command and is a joint mission serving both Army National Guard and Army Reserve personnel. All States can now send packets to the RC SMSC to obtain administrative review, which will support improved access to the IDES for Reserve Component Soldiers.
Reserve Component (RC)	The Army's Reserve Component consists of the Army National Guard and the Army Reserve

Service Treatment Record (STR)	The Service Treatment Record (STR) includes both the treatment record and the dental record. It is a permanent and continuous file that is initiated when a member enters the service. The STR provides a complete, concise medical and dental history of everyone in the Active Army or in the RC. In IDES, the STR helps physical evaluation boards (PEBs) appraise the physical fitness of Army members and eligibility for benefits.
Soldier Transfer and Regulating Tracking Center (START-C)	The Soldier Transfer and Regulating Tracking Center (START-C) supports the Warrior Transition Command and Warrior Transition Units with the timely transfer of recovering warriors closer to home. The STARTC conducts global patient tracking and assists in redistribution of warriors to and between units.
TRANSCOM Regulating and Command and Control Evacuation System (TRAC2ES)	The TRANSCOM Regulating and Command & Control Evaluation System (TRAC2ES) combines transportation, logistics, and clinical decision elements into a seamless patient movement automated information system. The system visualizes, assesses, and prioritizes patient movement requirements, assigning proper resources, and distributing relevant data to deliver patients efficiently.
Transition Phase	In the Transition Phase, the Soldier is guided through the out-processing requirements for retirement and/or separation form the Army.
Treatment	During treatment, Medical Treatment Providers will manage the medical conditions of wounded, ill, and injured Soldiers using temporary profiles until the Medical Retention Determination Point (MRDP) has been reached or 12 months have passed. Once MRDP has been reached, a Soldier will receive a permanent profile and be enrolled into IDES.
TRICARE	TRICARE is the Department of Defense health care program for Uniformed Service members, retirees and their families worldwide.
Unfit for Duty	A Soldier will be found unfit due to physical disability when an illness or injury precludes the Soldier from reasonably performing the duties of their PMOS or Specialty Code duties in accordance with DoDI 1332.38, Enc 3, Part 3, and AR 635-40, chapter 4.

Veterans Affairs Schedule For Rating Disabilities (VASRD)	The Veterans Affairs Schedule for Rating Disabilities (VASRD) is used by the Department of Veterans Affairs (VA) as part of the process of adjudicating disability claims. It is a guide for evaluating the severity of disabilities resulting from all types of diseases and injuries encountered as a result of, or incident to, military service. This degree of severity is expressed as a percentage rating which determines the amount of monthly compensation.
Veterans Examination Request Information System (VERIS)	VERIS is a system that links certain Veterans Benefits Administration (VBA) field offices to private vendors for the purpose of requesting disability examinations for Veterans
Veterans Tracking Application (VTA)	The Veterans Tracking Application (VTA) is a joint Veteran Affairs/Department of Defense system that supports the effective management and tracking of Soldiers enrolled in IDES.
Warrior Transition Unit (WTU)	The U.S. Army established Warrior Transition Units (WTUs) at major military treatment facilities located around the world in order to provide personal support to wounded, ill, and injured Soldiers who require at least six months of rehabilitative care and complex medical management and for members of the Reserve Component on Active Duty with service-related conditions. A WTU closely resembles a “line” Army unit, with a professional cadre and integrated Army processes that builds on the Army’s strength of unit cohesion and teamwork so that wounded Soldiers can focus on healing to transition back to the Army or to civilian status. Each wounded, ill, and injured Soldier works with a Triad of Care—primary care manager (normally a physician), nurse case manager, and squad leader—who coordinate his/her care with other clinical and non-clinical professionals.

Table Of Contents

U.S.ARMY

IDES REFERENCE GUIDEBOOK

Table Of Contents

IDES Reference Guide - Table of Contents

Introduction: This document's purpose and layout

1. **Treatment Phase**
    a. Policy/Guidance
    b. Forms
    c. Systems
    d. Counseling/Appointments
    e. Soldier Options (Appeals, IMRs, Reconsideration)

2. **Medical Evaluation Board (MEB) Phase**
    a. Policy/Guidance
    b. Forms
    c. Systems
    d. Counseling/Appointments
    e. Soldier Options (Appeals, IMRs, Reconsideration)

3. **Physical Evaluation Board (PEB) Phase**
    a. Policy/Guidance
    b. Forms
    c. Systems
    d. Counseling/Appointments
    e. Soldier Options (Appeals, IMRs, Reconsideration)

4. **Transition Phase**
    a. Policy/Guidance
    b. Forms
    c. Systems
    d. Counseling/Appointments
    e. Soldier Options (Appeals, IMRs, Reconsideration)

5. **Cross-Reference Lists of Items by Category**
    a. Policy/Guidance
    b. Forms (including blank sample forms)
    c. Systems
    d. Counseling/Appointments
    e. Soldier Options (Appeals, IMRs, Reconsideration)

6. **Special Circumstances and Disenrollment Criteria**
    a. Component– Specific Processes
    b. OCONUS Cases
    c. Disenrollment Criteria

7. **Additional Resources**
    a. IDES-related training resources
    b. General IDES-related resources

Reference Guide

INTRODUCTION

Table Of Contents

Introduction

This document is designed to be used along with the IDES Guidebook to provide linkage to IDES authoritative resources. This document is not, itself, an authoritative source, it is meant to guide the user to the relevant authoritative documents. The first through fourth sections follow the timelines for treatment and phases of IDES explained in the guidebook, providing a list of each of the following items in the order they become a part of the IDES process:

a. Policy/Guidance
b. Forms
c. Systems
d. Counseling/Appointments
e. Soldier Options (Appeals, IMRs, Reconsideration)

Each list included in the first through fourth sections contains page numbers of, and is linked to, fact sheets included in Section 5, allowing users of the electronic version to quickly jump to the appropriate sheet.

Section five contains cross-reference lists – ordered lists of each category in a.-e. above (Policy/Guidance, Forms, Systems, Counseling/Appointments and Soldier Options). After each list there are fact sheets containing descriptive information and a direct web link to the authoritative source where possible. Each fact sheet includes an excerpt from the source document. There are blank forms included in section five for illustrative purposes. This is not an authoritative source for forms, however every effort has been made to provide links to the authoritative source on the fact sheets.

Section six contains three special circumstances sections. Sub-section a. contains component-specific information, Sub-section b. addresses OCONUS cases, and Sub-section c. addresses potential reasons for disenrollment.

Section seven provides two categories of additional resources. Sub-section a. contains a fact sheet with training resources, and Sub-section b. contains a fact sheet with links to commonly used IDES resources not referred to in the IDES Guidebook. This serves as a quick-reference for additional information on topics that are commonly encountered by persons involved in the IDES process.

Throughout the document - and especially in the policy section - links are provided that were functional at the time of publication. In the case of policy documents - if the policy is included in a consolidated publication and the item is recinded, the link will stop functioning. Updates to remove/replace links, where appropriate, will be made to online versions of this document and/or in future issuances. Report broken links to the IDES Service Line if they do not fall into the category mentioned here.

Reference Guide

Table Of Contents

SECTION 1: TREATMENT

Medical treatment providers will manage the medical conditions of wounded, ill, and injured Soldiers using temporary profiles until the Medical Retention Determination Point (MRDP) has been reached or 12 months have passed. Once MRDP has been reached, a Soldier will receive a permanent profile and be enrolled into IDES.

Contents:

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Reference Guide

Table Of Contents

SECTION 1: TREATMENT

ALARACT 148/2011	Overview of the Integrated Disability Evaluation System (IDES), Detachment Pre-Command Course (PCC) or Orientation, 14 April 2011
Army Directive 2012-18	Military Occupational Specialty Administrative Review (MAR2)
Army Regulation 40-400	Patient Administration RAR - 15 SEP 2011
Army Regulation 40-501	Standards of Medical Fitness RAR 4 August 2011
Army Regulation 40-66	Medical Administration and Healthcare Documentation 04 Jan 10
Army Regulation 40-68	Clinical Quality Management 22 May 09
Army Regulation 600-60	Replaced by MAR2 (See Army Directive 2012-18 above)
Army Regulation 635-40	Physical Evaluation for Retention, Retirement or Separation RAR 20 March 2012
Directive-Type Memorandum (DTM) 11-015	Integrated Disability Evaluation System (IDES) December 19, 2011
DoD Directive 5124.02	Under Secretary of Defense for Personnel and Readiness USD(P&R) June 23, 2008
DoD Instruction 1332.18	Separation or Retirement for Physical Disability November 4, 1996
DoD Instruction 1332.38	Physical Disability Evaluation November 14, 1996
HQDA EXORD 015-10	Centralized Medical Care (Primary and Behavioral) at US Army Installations, 12 February 2010
HQDA EXORD 037-13	Ready and Resilient Quick Wins - Annex G: Integrated Disability Evaluation System (IDES)
HQDA EXORD 295-11	Implementation of OCONUS Plan for Soldiers Referred, 01 September 2011
MEDCOM Policy MEMO 10-062	MEDCOM Military Treatment Facility (MTF) Access To Care For Active Duty Service Members (ADSM), Including Warriors in Transition 26 Aug 10
Operations Order 09-34	Centralized WT Transfer Process. 4 May 09
Operations Order 09-67	Enhanced Medical Regulating of Patients. 25 August 2009
OPERATION ORDER 12-31	MEDCOM Implementation of The Integrated Disability Evaluation System
Operations Order 12-31 - Annex J	Training
Operations Order 12-54	Medical Evaluation Board Remote Operating Center (MEBROC) Implementation

Reference Guide

SECTION 1: TREATMENT

OTSG MEDCOM Policy 11-103	Patent Movement(PM) from Outside Continental United States (OCONUS)and Reception of Soldiers to Military Treatment Facilities (MTF's). 16 December 2011
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Policy Guidance for the Disability Evaluation system and Establishment of Recurring Directive May 3, 2007
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Expedited DES Process For Members with Catastrophic Conditions and Combat-Related Causes, 06 January 2009
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," March 13, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Standards for Determining Unfitness Due to Medical Impairment (Deployability)," December 19, 2007
VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum	Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011

SECTION 1: TREATMENT

- DA 3349 Physical Profile
- VA 21-0819 VA/DoD Joint Disability Evaluation Board Claim Form

Table Of Contents

SECTION 1: TREATMENT

- Medical Operating Data System (MODS)
- Electronic Profiling System (eProfile)
- Defense Medical Human Resource System-internet (DMHRSi)
- Armed Forces Health Longitudinal Technology Application (AHLTA)
- Composite Health Care System (CHCS)
- Electronic Military Personnel Office (eMILPO)
- Enlisted Distribution and Assignment System (eDAS)
- Interactive Personnel Electronic Records Management (iPERMS)
- Army Strategic Management System (SMS)

Table Of Contents

SECTION 1: TREATMENT

There are no IDES-related counseling sessions or appointments in Treatment (Section 1)

Table Of Contents

SECTION 1: TREATMENT

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

There are no Soldier Options (Appeals, IMRs, Reconsideration) in Treatment (Section 1)

Table Of Contents

SECTION 2: MEB PHASE

The MEB determines whether a Soldier has one or more conditions that fail to meet Army medical retention standards. The MEB Phase is to be completed within 100 days for AC and 140 days for RC Soldiers.

Contents:

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

SECTION 2: MEB PHASE

Army Regulation 40-400	Patient Administration RAR - 15 SEP 2011
Army Regulation 40-501	Standards of Medical Fitness RAR 4 August 2011
Army Regulation 40-66	Medical Administration and Healthcare Documentation 04 Jan 10
Army Regulation 40-68	Clinical Quality Management 22 May 09
Army Regulation 600-60	Replaced by MAR2
Army Regulation 635-40	Physical Evaluation for Retention, Retirement or Separation RAR 20 March 2012
Directive-Type Memorandum (DTM) 11-015	Integrated Disability Evaluation System (IDES) December 19, 2011
DoD Directive 5124.02	Under Secretary of Defense for Personnel and Readiness USD(P&R) June 23, 2008
DoD Instruction 1332.18	Separation or Retirement for Physical Disability November 4, 1996
DoD Instruction 1332.38	Physical Disability Evaluation November 14, 1996
HQDA EXORD 037-13	Ready and Resilient Quick Wins - Annex G: Integrated Disability Evaluation System (IDES)
HQDA EXORD 295-11	Implementation of OCONUS Plan for Soldiers Referred, 01 September 2011
MEDCOM Policy MEMO 10-062	MEDCOM Military Treatment Facility (MTF) Access To Care For Active Duty Service Members (ADSM), Including Warriors in Transition 26 Aug 10
MEDCOM Policy MEMO 11-038	Medical Optional Surgeries for Service Members Undergoing Disability Evaluation, 30 May 2011
Operations Order 09-34	Centralized WT Transfer Process. 4 May 09
Operations Order 09-67	Enhanced Medical Regulating of Patients. 25 August 2009
OPERATION ORDER 12-31	MEDCOM Implementation of The Integrated Disability Evaluation System
Operations Order 12-31 - Annex J	Training
OPERATION ORDER 12-54	Medical Evaluation Board Remote Operating Center (MEBROC) Implementation

Table Of Contents

SECTION 2: MEB PHASE

OTSG MEDCOM Policy 11-103	Patent Movement(PM) from Outside Continental United States (OCONUS)and Reception of Soldiers to Military Treatment Facilities (MTF's). 16 December 2011
Public Law 106-475	Veterans Claims Assistance Act of 2000 (VCAA)," November 9, 2000
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Implementing Disability-Related Provision of the National Defense Authorization Act 2008 (Pub. L. 110-181) October 14 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Expedited DES Process For Members with Catastrophic Conditions and Combat-Related Causes, 06 January 2009
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Policy Guidance for the Disability Evaluation System and Establishment of Recurring Directive-Type Memoranda," May 3, 2007
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," March 13, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," October 14, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Standards for Determining Unfitness Due to Medical Impairment (Deployability)," December 19, 2007
VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum	Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011

Table Of Contents

SECTION 2: MEB PHASE

- DA 5893 MEB/PEB Counseling Checklist
- DA 7652 Commander's Performance and Functional Statement (Physical Disability Evaluation System (PDES))
- DA 31 Request and Authority for Leave
- DA 2173 Line of Duty/Statement of Medical Duty and Examination Status
- DA 3947 MEB Proceedings Form
- DA 5889 PEB Transmission Checklist/PEB Referral Transmittal Document
- DA 4037 Officer Record Brief (ORB)
- AHRC 4143 Enlisted Record Brief (ERB)
- DFAS 702 Defense Finance and Accounting Service Military Leave and Earnings Statement (LES)
- Integrated NARSUM
- DA Form 2-1 Personnel Qualification Form
- DA Form 5891 Acknowledgement of Counseling on Legal/Procedural Rights
- VA 21-0819 VA/DoD Joint Disability Evaluation Board Claim Form
- Informal Medical Review Request (IMR) Memo
- MSC Memorandum

Table Of Contents

SECTION 2: MEB PHASE

- Veterans Tracking Application (VTA)
- eMEB (Electronic Medical Evaluation Board)
- Army Strategic Management System (SMS)
- Interactive Personnel Electronic Records Management (iPERMS)
- Medical Operating Data System (MODS)
- Electronic Profiling System (eProfile)
- Defense Medical Human Resource System-internet (DMHRSi)
- Electronic Military Personnel Office (eMILPO)
- Enlisted Distribution and Assignment System (eDAS)
- Armed Forces Health Longitudinal Technology Application (AHLTA)
- Composite Health Care System (CHCS)

Table Of Contents

Section 2: MEB PHASE

- Initial PEBLO Counseling (DA Form 5893)
- Initial MSC Counseling
- DA 199 Counseling (Review of PEB Findings)
- MEB and PEB Counseling
- Review of MEB Election Options
- Acknowledgment of Counseling on Legal/Procedural Rights, SMEBC/SPEBC Legal Counseling (DA Form 5891)
- Independent Medical Review (IMR)
- Compensation and Pension (C&P) Exam Appointments

Upon meeting criteria for entry into IDES, initial contact with the Soldier is made by the PEBLO/Contact Representative to schedule an initial PEBLO counseling session.
This section covers sessions where the Soldier receives and/ or provides information through interaction with an IDES representative or other sources requiring Soldier attendance. The emphasis here is on direct IDES requirements, users must stay informed of local non-IDES requirements for Soldiers in transition. (Soldier and Family should be prepared for potential separation from service as early in the process as possible.)

Table Of Contents

SECTION 2: MEB PHASE

- Independent Medical Review (IMR)
- Options at Election
- MEB Rebuttal/Appeal

Table Of Contents

SECTION 3: PEB PHASE

The PEB determines whether a Soldier is fit or unfit for duty. The PEB Phase is to be completed within 120 days for both AC and RC Soldiers.

Contents:

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

SECTION 3: PEB PHASE

Army Regulation 40-400	Patient Administration RAR - 15 SEP 2011
Army Regulation 40-501	Standards of Medical Fitness RAR 4 August 2011
Army Regulation 40-66	Medical Administration and Healthcare Documentation 04 Jan 10
Directive-Type Memorandum (DTM) 11-015	Integrated Disability Evaluation System (IDES) December 19, 2011
DoD Directive 5124.02	Under Secretary of Defense for Personnel and Readiness USD(P&R) June 23, 2008
DoD Instruction 1332.18	Separation or Retirement for Physical Disability November 4, 1996
DoD Instruction 1332.38	Physical Disability Evaluation November 14, 1996
HQDA EXORD 037-13	Ready and Resilient Quick Wins - Annex G: Integrated Disability Evaluation System (IDES)
HQDA EXORD 295-11	Implementation of OCONUS Plan for Soldiers Referred, 01 September 2011
MEDCOM Policy MEMO 10-062	MEDCOM Military Treatment Facility (MTF) Access To Care For Active Duty Service Members (ADSM), Including Warriors in Transition 26 Aug 10
MEDCOM Policy MEMO 11-038	Medical Optional Surgeries for Service Members Undergoing Disability Evaluation, 30 May 2011
Operations Order 09-34	Centralized WT Transfer Process. 4 May 09
Operations Order 09-67	Enhanced Medical Regulating of Patients. 25 August 2009
OPERATION ORDER 12-31	MEDCOM Implementation of The Integrated Disability Evaluation System
Operations Order 12-31 - Annex J	Training
OPERATION ORDER 12-54	Medical Evaluation Board Remote Operating Center (MEBROC) Implementation
Public Law 106-475	Veterans Claims Assistance Act of 2000 (VCAA)," November 9, 2000
Title 10, United States Code	Chapter 61 and Section 12643
Title 38, United States Code	Parts 3, 4, and 14 ,Sections 5104, 5110, 7105, and 8111

Table Of Contents

SECTION 3: PEB PHASE

Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Policy Guidance for the Disability Evaluation system and Establishment of Recurring Directive May 3, 2007
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Implementing Disability-Related Provision of the National Defense Authorization Act 2008 (Pub. L. 110-181) October 14 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Expedited DES Process For Members with Catastrophic Conditions and Combat-Related Causes, 06 January 2009
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," March 13, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," October 14, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Standards for Determining Unfitness Due to Medical Impairment (Deployability)," December 19, 2007
VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum	Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011

Table Of Contents

SECTION 3: PEB PHASE

- DA 5889 PEB Transmission Checklist/ PEB Referral Transmittal Document
- DA 199 Physical Evaluation Board Proceeding Form Series
- DA 5891 Acknowledgement of Counseling on Legal/Procedural Rights
- DA 5892 Estimated Compensation Worksheet

Table Of Contents

SECTION 3: PEB PHASE

- ePEB (Electronic Physical Evaluation Board)
- Veterans Tracking Application (VTA)
- Medical Operating Data System (MODS)
- Electronic Profiling System (eProfile)
- eMEB (Electronic Medical Evaluation Board)
- Defense Medical Human Resource System-internet (DMHRSi)
- Electronic Military Personnel Office (eMILPO)
- Enlisted Distribution and Assignment System (eDAS)
- Armed Forces Health Longitudinal Technology Application (AHLTA)
- Interactive Personnel Electronic Records Management (iPERMS)
- Army Strategic Management System (SMS)

Table Of Contents

SECTION 3: PEB PHASE

- DA 199 Physical Evaluation Board Proceedings Form
- Soldier's PEB Counsel (SPEBC) Legal Counseling
- Continuation on Active Duty (COAD)/Active Reserve (COAR) Counseling

Table Of Contents

SECTION 3: PEB PHASE

- Request Formal PEB
- VA Rating Reconsideration Request
- Formal PEB (FPEB) Appeal
- Election (Concur/Non-Concur with IPEB/FPEB)

Table Of Contents

SECTION 4: TRANSITION

The Soldier is guided through the out-processing requirements for retirement and/or separation form the Army. The Transition Phase is to be completed within 45 days not including any leave and/or permissive TDY.

Contents:

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

SECTION 4: TRANSITION

Army Regulation 40-501	Standards of Medical Fitness RAR 4 August 2011
Army Regulation 40-66	Medical Administration and Healthcare Documentation 04 Jan 10
Directive-Type Memorandum (DTM) 11-015	Integrated Disability Evaluation System (IDES) December 19, 2011
DoD Directive 5124.02	Under Secretary of Defense for Personnel and Readiness USD(P&R) June 23, 2008
DoD Instruction 1332.18	Separation or Retirement for Physical Disability November 4, 1996
DoD Instruction 1332.38	Physical Disability Evaluation November 14, 1996
HQDA EXORD 037-13	Ready and Resilient Quick Wins - Annex G: Integrated Disability Evaluation System (IDES)
HQDA EXORD 295-11	Implementation of OCONUS Plan for Soldiers Referred, 01 September 2011
MEDCOM Policy MEMO 10-062	MEDCOM Military Treatment Facility (MTF) Access To Care For Active Duty Service Members (ADSM), Including Warriors in Transition 26 Aug 10
Operations Order 09-34	Centralized WT Transfer Process. 4 May 09
Operations Order 09-67	Enhanced Medical Regulating of Patients. 25 August 2009
OPERATION ORDER 12-31	MEDCOM Implementation of Integrated Disability Evaluation System
Operations Order 12-31 - Annex J	Training
OPERATION ORDER 12-54	Medical Evaluation Board Remote Operating Center (MEBROC) Implementation
Public Law 106-475	Veterans Claims Assistance Act of 2000 (VCAA)," November 9, 2000
Public Law 110-181 Section 1646	National Defense Authorization Act for Fiscal Year 2008," January 28, 2008
Title 10, United States Code	Chapter 61 and Section 12643
Title 38, United States Code	Parts 3, 4, and 14 ,Sections 5104, 5110, 7105, and 8111
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Policy Guidance for the Disability Evaluation system and Establishment of Recurring Directive May 3, 2007
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Expedited DES Process For Members with Catastrophic Conditions and Combat-Related Causes, 06 January 2009
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," March 13, 2008
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Standards for Determining Unfitness Due to Medical Impairment (Deployability)," December 19, 2007
VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum	Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011

Table Of Contents

SECTION 4: TRANSITION

- DD 214 Certificate of Release or Discharge

Table Of Contents

SECTION 4: TRANSITION

- eMEB (Electronic Medical Evaluation Board
- ePEB (Electronic Physical Evaluation Board)
- Veterans Tracking Application (VTA)
- Defense Medical Human Resource System-internet (DMHRSi)
- Electronic Military Personnel Office (eMILPO)
- Enlisted Distribution and Assignment System (eDAS)
- Medical Operating Data System (MODS)
- Interactive Personnel Electronic Records Management (iPERMS)
- Army Strategic Management System (SMS)
- Tranition Processing (TRANSPROC)

Table Of Contents

SECTION 4: TRANSITION

- Military Services Coordinator (MSC) Exit Interview Counseling
- Continue on Active Duty/ Continue on Active Reserve (COAD/COAR) Counseling

Table Of Contents

SECTION 4: TRANSITION

There are no Soldier Options (Appeals, IMRs, Reconsideration) in the Transition Phase.

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

This section starts with lists of items in groups by type, hot-linked to jump to a fact sheet for that item. The forms section provides sample blank forms for most forms applicable to the IDES process.

Contents:

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Note: MEDCOM Orders Portal can be accessed directly via: https://www.us.army.mil/suite/page/258621

Table Of Contents

IDES Policy References		
Document Name (Click to jump to fact sheet)	Title	Final Timeline
ALARACT 148/2011	Overview of the Integrated Disability Evaluation System (IDES), Detachment Pre-Command Course (PCC) or Orientation, 14 April 2011	Treatment (Section 1)
Army Directive 2012-18	Military Occupational Specialty Administrative Review (MAR2)	Treatment (Section 1)
Army Regulation 40-400	Patient Administration RAR - 15 SEP 2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3)
Army Regulation 40-501	Standards of Medical Fitness RAR 4 August 2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Army Regulation 40-66	Medical Administration and Healthcare Documentation 04 Jan 10	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Army Regulation 40-68	Clinical Quality Management 22 May 09	Treatment (Section 1) MEB Phase (Section 2)
Army Regulation 600-8-4	Line of Duty Policy, Procedures, and Investigations 4 October 2008	Treatment (Section 1)
Army Regulation 635-40	Physical Evaluation for Retention, Retirement or Separation RAR 20 March 2012	Treatment (Section 1) MEB Phase (Section 2)
Directive-Type Memorandum (DTM) 11-015	Integrated Disability Evaluation System (IDES) December 19, 2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
DoD Directive 5124.02	Under Secretary of Defense for Personnel and Readiness USD(P&R) June 23, 2008	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)

Reference Guide

Table Of Contents

Document Name (Click to jump to fact sheet)	Title	Final Timeline
DoD Instruction 1332.18	Separation or Retirement for Physical Disability November 4, 1996	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
DoD Instruction 1332.38	Physical Disability Evaluation November 14, 1996	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
HQDA EXORD 015-10	Centralized Medical Care (Primary and Behavioral) at US Army Installations, 12 February 2010	Treatment (Section 1)
HQDA EXORD 037-13	READY AND RESILIENT QUICK WINS Replaces and rescinds the following: HQDA EXORD -080-12 and ALARACT 011/2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
HQDA EXORD 295-11	Implementation of OCONUS Plan for Soldiers Referred, 01 September 2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
MEDCOM Policy MEMO 10-062	MEDCOM Military Treatment Facility (MTF) Access To Care For Active Duty Service Members (ADSM), Including Warriors in Transition 26 Aug 10	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
MEDCOM Policy MEMO 11-038	Medical Optional Surgeries for Service Members Undergoing Disability Evaluation, 30 May 2011	MEB Phase (Section 2) PEB Phase (Section 3)
MEDCOM Policy MEMO 11-046*	Medical Evaluation Board (MEB) Processing Guidance 10 June 2011	MEB Phase (Section 2)

*NOTE: 11-046 has expired, however there is a replacement OPORD in final review at the time of this publication. The new version will be updated in the electronic version of this document upon final publication.

Reference Guide

Table Of Contents

Document Name (Click to jump to fact sheet)	Title	Final Timeline
Operations Order 09-34	Centralized WT Transfer Process. 4 May 09	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Operations Order 09-67	Enhanced Medical Regulating of Patients. 25 August 2009	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
OPERATION ORDER 12-31	MEDCOM Implementation of The Integrated Disability Evaluation System	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Operations Order 12-31 To see Annex H, I, J, P, and O follow instructions on OPORD 12-31 fact sheet and find the corresponding FRAGO folder listed here:	Annex H - OCONUS IDES - see FRAGO 7 Annex I - IDES Guidebook - see FRAGO 4 Annex J - Training - see FRAGO 6 Annex P - IDES COP Training - see FRAGO 5 Annex O - NARSUM Guidebook - see FRAGOs 1 and 8	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
OPERATION ORDER 12-54	Medical Evaluation Board Remote Operating Center (MEBROC) Implementation	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
OTSG MEDCOM Policy 11-103	Patent Movement(PM) from Outside Continental United States (OCONUS)and Reception of Soldiers to Military Treatment Facilities (MTF's). 16 December 2011	Treatment (Section 1) MEB Phase (Section 2)
Public Law 106-475	Veterans Claims Assistance Act of 2000 (VCAA)," November 9, 2000	PEB Phase (Section 3) Transition (Section 4)
Public Law 110-181 Section 1646	National Defense Authorization Act for Fiscal Year 2008," January 28, 2008	Transition (Section 4)
Title 10, United States Code	Chapter 61 and Section 12643	PEB Phase (Section 3) Transition (Section 4)
Electronic Code of Federal Regulations (CFR)	Parts 3, 4 and 14	PEB Phase (Section 3) Transition (Section 4)
Title 38, United States Code	Sections 5104, 5110, 7105, and 8111	PEB Phase (Section 3) Transition (Section 4)

Reference Guide

Table Of Contents

Document Name (Click to jump to fact sheet)	Title	Final Timeline
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Policy Guidance for the Disability Evaluation system and Establishment of Recurring Directive May 3, 2007	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Standards for Determining Unfitness Due to Medical Impairment (Deployability)," December 19, 2007	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," March 13, 2008	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	"Implementing Disability-Related Provisions of the National Defense Authorization Act of 2008 (Pub. L. 110-181)," October 14, 2008	MEB Phase (Section 2) PEB Phase (Section 3)
Under Secretary of Defense for Personnel and Readiness USD(P&R) Memorandum	Expedited DES Process For Members with Catastrophic Conditions and Combat-Related Causes, 06 January 2009	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)
VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum	Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011	Treatment (Section 1) MEB Phase (Section 2) PEB Phase (Section 3) Transition (Section 4)

Reference Guide

Table Of Contents

ALARACT 148/2011

OVERVIEW OF THE INTEGRATED DISABILITY EVALUATION SYSTEM (IDES), DETACHMENT PRE-COMMAND COURSE (PCC) OR ORIENTATION

14 APRIL 2011

PURPOSE

The purpose of this message is to direct implementation of Integrated Disability Evaluation System (IDES) overview training for company Commanders and First Sergeants at all Army installations.

KEY PLAYERS

Unit: Uses this policy for training Commanders and First Sergeants.

MTF: Uses this policy for training Commanders and First Sergeants.

TIMELINE

Treatment (Section 1)

WEB LINK

Accessible from AKO. - if signed in - click: https://www.us.army.mil/suite/doc/29427910 OR:
From Home Screen select:
-Files
-Organization
-DoD Organizations
-Department of the Army (HQDA)
-OAA
-USAITA (the folder with 5000- files in it)
-Army ALARACT
-Army ALARACT files (page 2)
-2011 ALARACTS (page 6)
-ALARACT_148_2011

Reference Guide

ARMY DIRECTIVE 2012-18

MILITARY OCCUPATIONAL SPECIALTY ADMINSTRATIVE REVIEW (MAR2)

PURPOSE

This directive rescinds AR 600-60 and replaces it with a streamlined review process. This Army directive is an adminstrative process for Soldiers who meet medical retention standards, but who nonetheless may not be able to satisfactorly perform the duties their Primary Military Occupational Speciality (PMOS) requires.

KEY PLAYERS

All Service

TIMELINE

Treatment (Section 1)

WEB LINK

http://www.apd.army.mil/pdffiles/ad2012_18.pdf

ARMY REGULATION 40-400

PATIENT ADMINISTRATION

RAR - 15 SEP 2011

PURPOSE

This consolidated regulation prescribes policies and mandated tasks governing the management and administration of patients.

KEY PLAYERS

MTF: Chapter 7, Military Personnel Physical Disability Processing. Physicians who identify Soldiers with medical conditions not meeting fitness standards for retention will initiate a DA Form 3349 referring them to the Physical Disability Evaluation System (PDES).

PEBLO: If the Soldier does not meet retention standards, MEB process begins.

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

WEB LINK

https://www.hrc.army.mil/TAGD/Policy%20Memoranda%20and%20References

Table Of Contents

ARMY REGULATION 40-501

STANDARDS OF MEDICAL FITNESS

RAR 4 August 2011

PURPOSE

This regulation governs medical fitness standards for enlistment, induction, and appointment, including officer procurement programs. Medical fitness standards for retention and separation, including retirement. Medical fitness standards for diving, Special Forces, Airborne, Ranger, free fall parachute training and duty, and certain enlisted military occupational specialties (MOSs) and officer assignments. Medical standards and policies for aviation, Physical profiles, medical examinations and periodic health assessments.

KEY PLAYERS

MTF: Use this policy to determine Medical fitness standards for training and duty, and

certain enlisted military occupational specialties (MOSs) and officer assignments.

Primary Care Provider: Use this policy for Medical standards and Physical profiles and for medical examinations and periodic health assessments.

MEB Provider: Use this policy to determine if Soldier has met or does not meet the Medical retention standards.

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://armypubs.army.mil/epubs/pdf/r40_501.pdf

Reference Guide

ARMY REGULATION 40-66

MEDICAL ADMINISTRATION AND HEALTHCARE DOCUMENTATION

RAR 04 JAN 10

PURPOSE

This regulation prescribes policies for preparing and using medical reports and records in accordance with North Atlantic Treaty Organization Standardization Agreements.

KEY PLAYERS

MTF: Uses this regulation for preparing and using medical reports and records for DA Forms 3339, 2173, 3947.

Primary Care Provider: Uses this regulation for preparing and using medical reports and records for DA Forms 3339, 2173, 3947.

MEB Provider: Uses this regulation for preparing and using medical reports and records for DA Forms 3339, 2173, 3947.

PEBLO: Uses this regulation for preparing and using medical reports and records for DA From 2-1.

PDA: Uses this regulation for preparing and using medical reports and records for DA form 199.

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://www.apd.army.mil/pdffiles/r40_66.pdf

ARMY REGULATION 40-68

CLINICAL QUALITY MANAGEMENT

RAR 22 MAY 09

PURPOSE

This consolidated regulation prescribes policies, procedures, and responsibilities for the administration of the Clinical Quality Management Program. It includes Department Of Defense (DoD) and statutory policies addressing medical services quality management requirements. In addition, it implements DOD 6025.13-R , DODD 6000.14 , and other DOD guidance.

KEY PLAYERS

MTF: Uses this regulation for the administration of the Clinical Quality Management Program

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

WEB LINK

http://www.apd.army.mil/ProductMap.asp

Table Of Contents

ARMY REGULATION 600-8-4

Line of Duty Policy, Procedures and Investigations
4 September 2008

PURPOSE

This regulation prescribes policies, procedures, and mandates tasks governing line of duty determinations of Soldiers who die or sustain certain injuries, diseases or illnesses.

KEY PLAYERS

Soldier's Unit: Uses this regulation for the administration of the Clinical Quality Management Program

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

WEB LINK

http://www.apd.army.mil/ProductMap.asp

Reference Guide

Table Of Contents

ARMY REGULATION 635-40

PHYSICAL EVALUATION FOR RETENTION, RETIREMENT OR SEPARATION

RAR 20 March 2012

PURPOSE

This Regulation governs the evaluation for physical fitness of Soldiers who may be unfit to perform their military duties because of physical disability.

KEY PLAYERS

PEB: Uses this Regulation to process DA Form 199.

PDA: Uses this Regulation to process DA Form 199 for appeal process of FPEB.

PEBLO: Uses this Regulation with DA Form 5893 , 199 , 5892, 5891 to properly counsel Soldiers through the IDES Process.

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

WEB LINK

https://www.hrc.army.mil/TAGD/Policy%20Memoranda%20and%20References

Reference Guide

Table Of Contents

DIRECTIVE-TYPE MEMORANDUM (DTM) 11-015

INTEGRATED DISABILITY EVALUATION SYSTEM (IDES) DECEMBER 19, 2011

PURPOSE

establishes policy, assigns responsibilities, and prescribes procedures for the IDES, which is superseding the legacy Disability Evaluation System (DES).

KEY PLAYERS

All Service

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Reference Guide

Table Of Contents

DoD Directive 5124.02

Under Secretary of Defense for Personnel and Readiness USD(P&R)
June 23, 2008

Purpose
Updates the responsibilities, functions, relationships, and authorities of the USD(P&R)

Key Players
All Service

Timeline
Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

Web Link
http://www.dtic.mil/whs/directives/corres/pdf/512402p.pdf

Reference Guide

Table Of Contents

DoD Instruction 1332.18

Separation or Retirement for Physical Disability November 4, 1996

Purpose

To update policy and responsibilities for separation or retirement for physical disability under reference (b) and related determinations under references (c) and (d).

Key Players

All Service

Timeline

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/133218p.pdf

Reference Guide

Table Of Contents

DoD Instruction 1332.38

Physical Disability Evaluation November 14, 1996

Purpose

This Instruction implements policy, assigns responsibilities, for: Retiring or separating Service members because of physical disability.

Making administrative determinations for Service members, with Service-incurred or Service aggravated conditions.

Authorizing a fitness determination for members of the Ready Reserve who are ineligible for benefits b) because the condition is unrelated to military status and duty.

Key Players

All Service

Timeline

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/133238p.pdf

Reference Guide

Table Of Contents

HQDA EXORD 015-10

CENTRALIZED MEDICAL CARE (PRIMARY AND BEHAVIORAL) AT US ARMY INSTALLATIONS

12 FEBRUARY 2010

PURPOSE

Installations will develop and implement an installation-specific health services plan for the management of health care providers and services with the goals of improving professional and technical skills and improving access to care for Soldiers and Family members while maintaining medical support of the ARFORGEN cycle.

KEY PLAYERS

MTF: Refer to description for role.

TIMELINE

Treatment (Section 1)

WEB LINK

Only Accessible from AKO - If signed in, click here, https://www.us.army.mil/suite/files/21766705 or From Home Screen select:

-Files
-Organizations
-DoD Organizations
-Army
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-Army Medical Department Corps
-Medical Specialist Corps
-Corps Communication Center
-EXORDs - OPORDs
-DA EXORD 015 - 10

Reference Guide

Table Of Contents

HQDA EXORD 037-13

Ready and Resilient Quick Wins

Annex G - Integrated Disability Evaluation System (IDES)

29 November 2012

PURPOSE

In support of HQDA G-1, provide subject matter expertise and assistance to implement an effective, efficient (and) coherent program (as) outlined in annex G.
ANNEX G CONTAINS CURRENT GUIDANCE ON IDES, INCLUDING AVAILABLE RESOURCES, PERTINENT REGULATIONS, AND POCS.

NOTE - EXORD 037-13 replaces HQDA EXORD 080-12 and ALARACT 011/11

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO - if signed in:
For HQDA EXORD 037-13, click:
https://www.us.army.mil/suite/doc/39903561

Or, for Annexes A-L, click:
https://www.us.army.mil/suite/doc/39903559

Reference Guide

Table Of Contents

HQDA EXORD 295-11

IMPLEMENTATION OF OCONUS PLAN FOR SOLDIERS REFERRED

01 SEPTEMBER 2011

PURPOSE

Ensure adequate troop levels are maintained to ensure mission readiness open communication within the US Army and VA facilitates to ensure successful transfer of Soldiers and Families. Eliminate the practice of PCS'ing Soldiers to OCONUS locations that have un-adjudicated T3/4 profiles. Task to subordinate units: United States army medical command (USAMEDCOM). Coordinate with Veterans Health Administration (VHA). Coordinate with veterans benefits.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO: if signed in click: https://www.us.army.mil/suite/files/21766705 or;
From Home Screen select:
-Files
-Organizations
-DoD Organizations
-Army
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-Headquarters Directorates
-Health Care Operations
-HCO Orders Center
-Published Orders
-ALARACT MSGs (Medical)
-ALARACT 2011
-ALARACT 374-2011 HQDA EXORD 295-11

Reference Guide

Table Of Contents

MEDCOM POLICY MEMO 12-006

MEDCOM MILITARY TREATMENT FACILITY (MTF) Enrollment, ACCESS, and Appointment Standards for all Uniformed Service Members, with Special Emphasis on Enhanced Access to Care for Specified Populations.

31 JAN 2012

PURPOSE

MEDCOM Military Treatment Facility Enrollment, Access, and Appointment Standards for all Uniformed Service Members, with Special Emphasis on Enhanced Access to Care for Specified Populations

KEY PLAYERS

MTF

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO: if logged in, click: https://www.us.army.mil/suite/doc/35015467

Reference Guide

Table Of Contents

MEDCOM POLICY MEMO 11-038

MEDICAL OPTIONAL SURGERIES FOR SERVICE MEMBERS UNDERGOING DISABILITY EVALUATION

30 MAY 2011

PURPOSE

Provides general guidance on medically optional surgeries for all service members who are being evaluated in the Physical Disability Evaluation System.

KEY PLAYERS

Soldier

MTF

Primary Care Provider

MEB Provider

PEBLO

TIMELINE

MEB Phase (Section 2)

PEB Phase (Section 3)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/doc/29853421 or
From Home Screen select:
-Files
-Organizations
-Army
-Army Direct Reporting Unit
-MEDCOM
-AMEDD Pubs, Policies & FMs
-OTSG-MEDCOM Numbered Policy Memorandum (page 3)

Reference Guide

Table Of Contents

MEDCOM POLICY MEMORANDUM 11-046

MEDICAL EVALUATION BOARD (MEB) PROCESSING GUIDANCE

10 JUN 2011

PURPOSE

This policy memorandum issues updated guidance and procedures for MEB and PEB processing to include new guidance for Soldier's MEB Counsel Services, Reserve Component (RC) Soldier Medical Support Center (SMSC), and the MEDCOM Medical Evaluation Board Tracking Office (MEBTO) to support the management of RC MEBs.

KEY PLAYERS

All

TIMELINE

MEB Phase (Section 2)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/doc/30479095 or
From Home Screen select:
-Files
-Organizations
-Army
-Army Direct Reporting Units
-MEDCOM
-AMEDD Pubs, Policies & FMs
-OTSG-MEDCOM Numbered Policy Memorandum
-2011 Memorandums (page 6)
-11-046

NOTE: 11-046 has expired, however there is a replacement OPORD in final review at the time of this publication. The new version will be updated in the electronic version of this document upon final publication.

Reference Guide

Table Of Contents

OPERATION ORDER 09-34

CENTRALIZED WT TRANSFER PROCESS

04 MAY 2009

PURPOSE

The purpose of the Operation Order is to establish MEDCOM level Warriors in Transition (WT) transfer eligibility tracking and centralized validation and regulation activity to streamline and expedite the transfer timeliness.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/files/16435443 or
From Home Screen select:
-Files
-Organizations
-DoD Organizations
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-HQ Directorates
-Health Care Operations
-HCO Orders Centers
-Published Orders
-FY09 Published Orders
-OPORD 09-34

Reference Guide

Table Of Contents

OPERATION ORDER 09-67

ENHANCED MEDICAL REGULATING OF PATIENTS

25 AUGUST 2009

PURPOSE

The U.S. Army Medical Command implements additional patient regulation measures and cadre manning initiatives in order to continue the provision of world class health care to Warriors in Transition and their Families both in the National Capital Region and throughout CONUS.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/files/18845888 or
From Home Screen select:
-Files
-Organizations
-DoD Organizations
-Army
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-HQ Directorates
-Health Care Operations
-HCO Orders Center
-Published Orders
-FY09 Published Orders (page 4)
-OPORD 09-67

Reference Guide

Table Of Contents

OPERATION ORDER 12-31

MEDCOM IMPLEMENTATION OF THE INTEGRATED DISABILITY EVALUATION SYSTEM

15 APRIL 2012

PURPOSE

This document defines the processes and standards for completion of the Medical Evaluation Board (MEB) phase of the Integrated Disability Evaluation System (IDES), Phase I of MEDCOM OPORD 12-31.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/files/35786119 or
From Home Screen select:
-Files
-Organizations
-DoD Organizations
-Army
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-HQ Directorates
-Health Care Operations
-HCO Orders Center
-Published Orders
-FY12 Published Orders (page 2)
-OPORD 12-31 (MEDCOM Implementation of IDES)

NOTE – SEE NEXT PAGE for ANNEX and FRAGO Listing

Reference Guide

OPERATION ORDER 12-31

MEDCOM IMPLEMENTATION OF THE INTEGRATED DISABILITY EVALUATION SYSTEM

ANNEXES

ANNEX H – OCONUS IDES – SEE FRAGO 7

ANNEX I – IDES GUIDEBOOK – SEE FRAGO 4

ANNEX J – TRAINING – SEE FRAGO 6

ANNEX P – IDES COP TRAINING – SEE FRAGO 5

ANNEX O – NARSUM GUIDEBOOK – SEE FRAGOS 1 AND FRAGO 8

Table Of Contents

OPERATION ORDER 12-54

MEDICAL EVALUATION BOARD REMOTE OPERATING CENTER (MEBROC)

IMPLEMENTATION

14 NOVEMBER 2012

PURPOSE

Initiates the building of scalable remote IDES capacity at Joint Base Lewis-McChord (JBLM), Washington; Fort Carson, Colorado; and Camp Atterbury, Indiana in order to increase processing capacity of MEB NARSUMs.

KEY PLAYERS

COMPO 2/3 (RC/ANG)

SMSC

STARTC

TIMELINE

MEB Phase (Section 2)

WEB LINK

Only Accessible from AKO: If signed in, click: https://www.us.army.mil/suite/files/38321894 or
From Home Screen select:
-Files
-Organizations
-DoD Organizations
-Army
-Headquarters, Department of the Army (HQDA)
-Chief of Staff of the Army (CSA)
-Office of the Surgeon General (OTSG)
-HQ Directorates
-Health Care Operations
-HCO Orders Center
-Published Orders
-FY12 Published Orders (page 4)
-OPORD 12-54

Reference Guide

Table Of Contents

OTSG/MEDCOM Policy Memo 11-103

PATENT MOVEMENT(PM) FROM OUTSIDE CONTINENTAL UNITED STATES (OCONUS) AND RECEPTION OF SOLDIERS TO MILITARY TREATMENT FACILITIES (MTF'S)

16 DECEMBER 2011

PURPOSE

The purpose of this policy is to incorporates key policies, operations orders, and procedures supporting Patient movement form all OCONUS locations to destinations MTFs.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

WEB LINK

Only Accessible from AKO: if signed in, click: https://www.us.army.mil/suite/doc/34904279 or
From Home Screen select:
-Files
-Organizations
-Army
-Army Direct Reporting Units
-MEDCOM
-AMEDD Pubs, Policies & FMs
-OTSG-MEDCOM Numbered Policy Memorandum
-2011 Memorandums (page 6)
-11-103

Reference Guide

Table Of Contents

PUBLIC LAW 106-475

VETERANS CLAIMS ASSISTANCE ACT OF 2000 (VCAA)," NOVEMBER 9, 2000

PURPOSE

To amend title 38, United States Code, to reaffirm and clarify the duty of the Secretary of Veterans Affairs to assist claimants for benefits under laws administered by the Secretary, and for other purposes.

KEY PLAYERS

All Service

TIMELINE

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://www.gpo.gov/fdsys/pkg/PLAW-106publ475/pdf/PLAW-106publ475.pdf

Reference Guide

Table Of Contents

PUBLIC LAW 110-181 SECTION 1646

NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2008," JANUARY 28, 2008

PURPOSE

Increases from 12 to 19 the maximum number of years of service authorized to be used as a multiplier to determine military disability severance pay. Provides minimum years of service for purposes of such determination. Prohibits any deduction from such pay due to payments received as veterans' disability compensation in the case of pay received by a member for a disability incurred in the line of duty in a combat zone or in combat-related operations as designated by the Secretary.

KEY PLAYERS

All Service

TIMELINE

Transition (Section 4)

WEB LINK

http://www.govtrack.us/congress/bills/110/hr4986

Reference Guide

TITLE 10, UNITED STATES CODE

CHAPTER 61 AND SECTION 12643

PURPOSE

Retirement or separation for physical disability and Boards for appointment, promotion, and certain other purposes: composition.

KEY PLAYERS

All Service

TIMELINE

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&tpl=%2Findex.tpl

Electronic Code of Federal Regulations (CFR), Title 38

Parts 3, 4, and 14

Purpose

Part 3 - Adjudication

Part 4 - VA Schedule for Rating Disabilities (VASRD)

Part 14 - Disability and Legal Service and General Counsel

Key Players

All Service

Timeline

PEB Phase (Section 3)

Transition (Section 4)

Web Link

http://www.ecfr.gov/cgi-bin/text-idx?SID=bb459b5a8e73dbfb71ef4c3367b75bd0&c=ecfr&tpl=/ecfrbrowse/Title38/38cfrv1_02.tpl

Table Of Contents

TITLE 38, UNITED STATES CODE

Chapters 51, 71 and Subchapter 1
SECTIONS 5104, 5110, 7105, AND 8111

PURPOSE

Chapter 51 - Claims, Effective Dates, and Payments
- Sec. 5104 - Decisions and notices of decisions
- Sec. 5110 - Effective dates of awards

Chapter 71 - Board of Veterans Appeals
- Sec. 7105 - Filing of notice of disagreement and appeal

Subchapter 1 - Acquisition and Operation of Medical Facilities
- Sec. 8111 - Sharing of Department of Veterans Affairs and Department of Defense health care resources

KEY PLAYERS

All Services

TIMELINE

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://us-code.vlex.com/source/us-code-veterans-benefits-1037/page/1

Reference Guide

UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS USD(P&R) MEMORANDUM

POLICY GUIDANCE FOR THE DISABILITY EVALUATION SYSTEM AND ESTABLISHMENT OF RECURRING DIRECTIVE MAY 3, 2007

PURPOSE

This directive-type memorandum establishes updated Department of Defense (DoD) guidance for the overall management of the Disability Evaluation System. It supplements DoD Directive 1332.18, Separation or Retirement for Physical Disability, 4 Nov 96.

KEY PLAYERS

All Services

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://www.pdhealth.mil/hss/des.asp#fs

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Table Of Contents

UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS USD(P&R) MEMORANDUM

"IMPLEMENTING DISABILITY-RELATED PROVISIONS OF THE NATIONAL DEFENSE AUTHORIZATION ACT OF 2008 (PUB. L. 110-181)," OCTOBER 14, 2008

PURPOSE

This policy memorandum provides supplemental and clarifying guidance on implementing those disability-related provisions of the National Defense Authorization Act of 2008 (Pub 1. 11 0-181), which are time-sensitive and impact immediate decisions pertaining to the rating of conditions and the operations of medical and physical evaluation boards. As indicated in the attached guidance, this policy memorandum revises and supplements references.

KEY PLAYERS

All Service

TIMELINE

MEB Phase (Section 2)

PEB Phase (Section 3)

WEB LINK

http://prhome.defense.gov/WWCTP/docs/NDAA%2008%202%20PM%20sm.pdf

Reference Guide

UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS USD(P&R) MEMORANDUM

EXPEDITED DES PROCESS FOR MEMBERS WITH CATASTROPHIC CONDITIONS AND COMBAT-RELATED CAUSES, 06 JANUARY 2009

PURPOSE

This memorandum establishes policy that allows the Secretary concerned to expedite a member through the Disability Evaluation System (DES). The expedited DES process is a special benefit to those Service members who sustain catastrophic injuries or illnesses from combat or combat-related operations as defined in this policy.

KEY PLAYERS

All Service

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://prhome.defense.gov/WWCTP/docs/Expedited%20DES%20(Jan%206)%20sm.pdf

Table Of Contents

UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS USD(P&R) MEMORANDUM

"IMPLEMENTING DISABILITY-RELATED PROVISIONS OF THE NATIONAL DEFENSE AUTHORIZATION ACT OF 2008 (PUB. L. 110-181)," MARCH 13, 2008

PURPOSE

This DTM provides supplemental and clarifying guidance on implementing those disability-related provisions of the National Defense Authorization Act for fiscal year 2008 (Pub L. 110-181) which are time-sensitive and impact immediate decisions pertaining to the rating of conditions and the calculation of separation severance pay. As indicated in the attached guidance, this DTM revises and supplements references (a) and'(b). Guidance on use of the current version of reference (c) is also contained in the attached, which will preclude conflict with the statute requiring adherence to the Veterans Administration Schedule for Rating Disabilities (VASRD) to the extent feasible.

KEY PLAYERS

All Service

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://prhome.defense.gov/WWCTP/docs/NDAA%2008%201%20PM%20small.pdf

Reference Guide

UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS USD(P&R) MEMORANDUM

"STANDARDS FOR DETERMINING UNFITNESS DUE TO MEDICAL IMPAIRMENT (DEPLOYABILITY)," DECEMBER 19, 2007

PURPOSE

This directive-type memorandum provides supplemental and clarifying guidance on standards for determining unfitness due to medical impairment within the Disability Evaluation System (DES). It supplements DoD Instruction 1332.38, "Physical Disability Evaluation," dated November 14, 1996, as indicated on the attachment. The change promulgated by this memorandum is the revision of guidance pertaining to the use of "deployability" for medical separations.

KEY PLAYERS

All Service

TIMELINE

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

WEB LINK

http://prhome.defense.gov/WWCTP/docs/Deployability%20DTM%20sm.pdf

Table Of Contents

VA Wounded, Ill and Injured Senior Oversight Committee, Department of Defense (DoD) and Department of Veterans Affairs (VA) Memorandum

Expansion of the Integrated Disability Evaluation System (IDES) Planning and Oversight Requirements, 01 February 2011

Purpose

This report summarizes the status of the ongoing DoD and VA Senior Oversight Committee (SOC) effort to jointly develop and test an improved Disability Evaluation System process that consolidates the Departments' disability systems to the degree allowed by current law.

Key Players

All Service

Timeline

Treatment (Section 1)

MEB Phase (Section 2)

PEB Phase (Section 3)

Transition (Section 4)

Web Link

http://www.pdhealth.mil/hss/des.asp

Reference Guide

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

IDES Guidebook Forms and Timeline Information			
Form Name (click to jump to the fact sheet)	Title	Final Timeline	Click number in this column to jump to the blank form
Instructions for this section: If you click on the form name, it will take you to the fact sheet for the form. After this table (forms), blank forms are provided for reference.			
AHRC 4143	Enlisted Record Brief (ERB)	Generated within MEB Phase (Section 2 in this guide), MEB Stage prepared by the Soldiers Unit	1
DA Form 2-1	Personnel Qualification Form	Generated within MEB Phase (Section 2 in this guide), MEB Stage	2
DA Form 31	Request and Authority for Leave	MEB Phase (Section 2 in this guide), MEB Stage: When applicable.	3
DA Form 199 / DA Form 199-1 / DA Form 199 - 2	Informal / Formal Physical Evaluation Board Proceedings Form	PEB Phase (Section 3 in this guide) , PEB Stage: Form created by the Physical Evaluation Board (PEB) within 120 days of receipt of Soldier's case file.	4
DA Form 2173 (Statement of Medical Examination and Duty Status), or DD Form 261 (Report of Investigation—Line of Duty and Misconduct Status)	Line of Duty	MEB Phase (Section 2 in this guide), MEB Stage: If required, Commander has five days from request to submit form to PEBLO.	5
DA Form 3349	Physical Profile	Treatment (Section 1 in this guide) - MTF Provider initiates all profiles greater than 30 days on a DA 3349 in eProfile IAW AR 40-501	6
DA Form 3947	Medical Evaluation Board Proceedings Form	MEB Phase (Section 2 in this guide), MEB Stage: PEBLO initiates form within the last 30 Days of the MEB stage.	7
DA Form 4037	Officer Record Brief (ORB)	Generated within MEB Phase (Section 2 in this guide), MEB Stage by Officer Master File (OMF) at the US Army Military Personnel Center (MILPERCEN)	8
DA Form 5889	PEB Transmission Checklist/ PEB Referral Transmittal Document	MEB Phase (Section 2 in this guide), MEB Stage: PEBLO initiates form within the last 30 days of the MEB stage.	9
DA Form 5890	Acknowledgment of Notification of Formal Physical Evaluation Board	PEB Phase (Section 3 in this guide) , PEB Stage signed by Soldier	10
DA Form 5891	Acknowledgment of Counseling on Legal / Procedural Rights	MEB Phase (Section 2 in this guide)- Informs the Soldier of his or her procedural rights and to provide a record of such counseling. (IMR) PEB Phase (Section 3 in this guide) -informs the Soldier of his or her procedural rights and to provide a record of such counseling. (IPEB, FPED appeal options)	11
DA Form 5892	PEBLO Estimated Compensation Worksheet	Generated within PEB Phase (Section 3 in this guide) , PEB Stage by PEBLO	12
DA Form 5893	MEB/PEB Counseling Checklist	Generated within MEB Phase (Section 2 in this guide), MEB Stage by the PEBLO	13
DA Form 7652	Commander's Performance and Functional Statement (Physical Disability Evaluation System (PDES))	MEB Phase (Section 2 in this guide), MEB Stage: Commander needs to complete form within 5 days of PEBLO's request	14
DD Form 214/215 Series	Certificate of Release or Discharge from Active Duty	Transition and Integration Phase (Section 4 in this guide): Issued upon out-processing requirements to retiring or separating Soldier's from the Army by HRC	15
DFAS 702	Defense Finance and Accounting Service Military Leave and Earnings Statement (DFAS LES)	Generated within MEB Phase (Section 2 in this guide), MEB Stage by DFAS	16
NARSUM	Integrated NARSUM	Generated within MEB Phase (Section 2 in this guide), MEB Stage by Provider	17
VA Form 21-0819	VA/DoD Joint Disability evaluation Board Claim Form	Treatment (Section 1 in this guide): Medical Provider initiates Soldier into IDES using the VA 21-0819 form. MEB Phase (Section 2 in this guide), MEB Stage: VA 21-0819 forwarded to the MEB within 10 days of referral for AC (30 days for RC); form received by MSC. MSC forwards the VA 21-0819 form back to the PEBLO within 10 days of receipt for AC (30 days for RC)	18

Reference Guide

Table Of Contents

AHRC 4143 Enlisted Record Brief (ERB)

Purpose

The Record Brief streamlines the methods used by the Army and the ARNG to record official personnel information.

Effective the fiscal year (FY) 2012, the ERB/ORB replaced the DA Form 2-1 as part of the promotion board file. DA Form 2-1 will continue to be maintained until a Record Brief has been established during the transition (RC units are transitioning during FY2013).

The form link (below) and sample provided (next page) is for illustrative purposes only - the automated product provided by the Soldier's unit may vary in appearance.

Key Players

Soldier / Designated Legal Representative - must review

Unit - prepares and provided the document to the PEBLO

Timeline

Generated within MEB Phase (MEB Stage) prepared by the Soldiers Unit (This version is only used by ARNG)

Authority/References

MILPER Message Number 11-248

Proponent ARNG-HRZ

https://g1arng.army.pentagon.mil/Featured%20News/Announcements/Milper%20Message%20Number%2011-248.pdf

Online Form Link

Not available

Reference Guide

DA Form 2-1 Personnel Qualification Form

Purpose

DA Form 2-1 is the Personnel Qualification "Record"; for Compo-1/AD Enlisted it was replaced by the ERB but old copies may have been scanned into iPERMS.
For Comp-1/AD Officers it was replaced by the ORB.
For Compo 2, it is the PQR
For Compo 3 it is the PQR DA 2A Enlisted, PQR DA 2B Warrant Officer, PQR DA 2C Commissioned Officer (see AR 600-8-104, Table B-1)

Key Players

PEBLO - compile to case file

Timeline

Generated within MEB Phase (MEB Stage)

Authority/References

For use of this form see: AR 600-8-104, the proponent agency is DCS, G-1

http://www.apd.army.mil/pdffiles/r600_8_104.pdf

Online Form Link

http://armypubs.army.mil/eforms/pdf/A2_1.pdf

DA Form 31 Request and Authority for Leave

Purpose

To authorize military leave; document start and stop of such leave; record address and telephone number where a Soldier may be contacted in case of an emergency during leave; and certify leave days chargeable to a Soldier's leave account.

The Soldier's Unit tracks, processes, and approves all Leave and Permissive TDY using this form.

Key Players

Soldier or Soldier's Designated Legal Representative - fill out DA Form 31

Unit - approve leave

PEBLO - receive a copy of the leave form

MSC - must be informed

Timeline

MEB Phase (MEB Stage): When applicable.

Authority/References

For use of this form see: AR 600-8-10

Online Form Link

http://armypubs.army.mil/eforms/pdf/A31.PDF

DA Form 199 / DA Form 199-1 / DA Form 199 - 2 Informal / Formal Physical Evaluation Board Proceedings Form

Purpose

The recorded proceedings of the informal PEB (IPEB) are recorded on DA Form 199. The recorded proceedings of the formal PEB (FPEB) are recorded on DA Form 199–1. These forms are controlled and are electronically generated by the PEB. Records the decisions of the APDAB on a DA Form 199 - 2.

Recording of rationale and advisory statements.

(1) Rationale. The PEB will include the rationale for its findings and recommendations on the DA Form 199 and DA Form 199–1, as applicable. The rationale will support the finding that the Soldier was, or was not, capable of performing the duties of his or her office, grade, rank, or rating. The rationale will also explain significant variance between the disability as described in the MEB proceedings and that documented on the pertinent DA Form 199.

(2) Advisory statements. The DA Form 199 will inform the Soldier of legal or administrative requirements that impact on the Soldier's disability benefits.

Key Players

PEB - issues fitness determination on DA 199 along with VA proposed rating. Schedules FPEB when requested, provides Service Member 10 day advance notice, notifies the PEBLO office of FPEB date and provides copy of DES case file to Service Member's Government legal counsel.

PEBLO - counsels Soldier on Informal PEB findings and election options.

Soldier – Signs DA Form 199-1, elects to accept or rebut.

Physical Disability Agency (PDA) - only receives during appeal processes.

Timeline

PEB Phase (PEB Stage):

Form created by the Physical Evaluation Board (PEB) within 120 days of receipt of Soldier's case file.

Authority/References

AR 635 - 40, Chapter 4, 4-20

Online Form Link

DA 199 and the variations of it are controlled automated forms generated from within ePEB.

DA Form 2173 (Statement of Medical Examination and Duty Status), or DD Form 261 (Report of Investigation—Line of Duty and Misconduct Status) Line of Duty

Purpose

Under the laws governing the Army IDES, Soldiers who sustain or aggravate physically unfitting disabilities must meet the following LD criteria to be eligible to receive retirement and severance pay benefits.

(1) The disability must have been incurred or aggravated while the Soldier was entitled to basic pay or as the proximate cause of performing active duty or inactive duty training (IDT).

(2) The disability must not have resulted from the Soldier's intentional misconduct or willful neglect and must not have been incurred during a period of unauthorized absence.

Line of duty investigations are conducted to arrive at a determination of whether misconduct or negligence was involved in the disease, injury, or death and, if so, to what degree. Depending on the circumstances of the case, an LD investigation may or may not be required to make this determination.

Key Players

Commander - must send the DA 2173 to the PEBLO within 5 days of request (or no later than the next drill period)

PEBLO - is responsible for compiling all medical documents, including complete STR (with TRICARE referrals and civilian medical records when applicable) within 10 days (AC) or 30 days (RC) of MEB [Referral Date].

PDA - review

AHRC-PDC-P - review

Timeline

MEB Phase (MEB Stage):

If required, Commander has five days from request to submit form to PEBLO.

Authority/References

AR 600-8-4

AR 635-40, Chapter 3, 3-4a(1)-(2)c

Online Form Link

http://armypubs.army.mil/eforms/pdf/A2173.PDF

Table Of Contents

STATEMENT OF MEDICAL EXAMINATION AND DUTY STATUS

For use of this form, see AR 600-8-4, the proponent agency is DCS, G-1.

THRU: *(Include ZIP Code)*	TO: *(Include ZIP Code)*	FROM: *(Include ZIP Code)*

1. NAME OF INDIVIDUAL EXAMINED *(Last, First, and Middle Initial)*	2. SSN	3. GRADE

4. ORGANIZATION AND STATION	5. ACCIDENT INFORMATION	
	a. DATE	b. PLACE *(City and State)*

SECTION I - TO BE COMPLETED BY ATTENDING PHYSICIAN OR HOSPITAL PATIENT ADMINISTRATOR

6. INDIVIDUAL WAS ☐ OUT PATIENT ☐ ADMITTED ☐ DEAD ON ARRIVAL

7. NAME OF HOSPITAL OR TREATMENT FACILITY ☐ CIVILIAN ☐ MILITARY

8. HOUR AND DATE ADMITTED	9. HOUR AND DATE EXAMINED

10. NATURE AND EXTENT OF ☐ INJURY ☐ DISEASE ☐ RESULTING IN DEATH

11. MEDICAL OPINION:
a. INDIVIDUAL ☐ WAS ☐ WAS NOT UNDER THE INFLUENCE OF ☐ ALCOHOL ☐ DRUGS *(Specify)*:
b. INDIVIDUAL ☐ WAS ☐ WAS NOT MENTALLY SOUND *(Attach Psychiatric evaluation if appropriate).*
c. INJURY ☐ IS ☐ IS NOT LIKELY TO RESULT IN A CLAIM AGAINST THE GOVERNMENT FOR FUTURE MEDICAL CARE.
d. INJURY ☐ WAS ☐ WAS NOT INCURRED IN LINE OF DUTY. *BASIS FOR OPINION:*

12. THE FOLLOWING DISABILITY MAY RESULT ☐ TEMPORARY ☐ PERMANENT PARTIAL ☐ PERMANENT TOTAL	13. BLOOD ALCOHOL TEST MADE ☐ YES ☐ NO	14. NO. OF MG ALCOHOL/100 ML BLOOD

15. DETAILS OF ACCIDENT OR HISTORY OF DISEASE *(how, where, when)*

16. DATE	17. TYPED OR PRINTED NAME OF ATTENDING PHYSICIAN OR PATIENT ADMINISTRATOR	18. SIGNATURE

SECTION II - TO BE COMPLETED BY UNIT COMMANDER OR UNIT ADVISER

19 DUTY STATION ☐ PRESENT FOR DUTY ☐ ABSENT WITHOUT AUTHORITY ☐ ABSENT WITH AUTHORITY: ☐ ON PASS ☐ ON LEAVE	20. HOUR AND DATE OF ABSENCE	
	a. FROM	b. TO

21. ABSENCE WITHOUT AUTHORITY MATERIALLY INTERFERRED WITH THE PERFORMANCE OF MILITARY DUTY *(Explain in Item 30 type of duty missed, hours of duty, and how it did or did not interfere with performance)*
☐ YES ☐ NO

22. INDIVIDUAL WAS ON ☐ ACTIVE DUTY ☐ ACTIVE DUTY FOR TRAINING ☐ INACTIVE DUTY TRAINING	23. HOUR AND DATE TRAINING	
	a. BEGAN	b. ENDED

24. RESERVIST DIED OF INJURIES RECEIVED PROCEEDING ☐ DIRECTLY TO TRAINING ☐ DIRECTLY FROM TRAINING

25. MODE OF TRANSPORTATION	26. HOUR BEGINNING TRAVEL	27. DISTANCE INVOLVED	28. NORMAL TIME FOR TRAVEL

29. DUTY STATUS AT TIME OF DEATH IF DIFFERENT FROM TIME OF INJURY OR CONTRACTION OF DISEASE
☐ PRESENT FOR DUTY ☐ ABSENT WITH AUTHORITY ☐ ABSENT WITHOUT AUTHORITY

30. DETAILS OF ACCIDENT - REMARKS *(If additional space is needed, continue on reverse) (Attach inclosures as necessary)*

31. FORMAL LINE OF DUTY INVESTIGATION REQUIRED ☐ YES ☐ NO	32. INJURY IS CONSIDERED TO HAVE BEEN INCURRED IN LINE OF DUTY *(Not applicable on deaths)* ☐ YES ☐ NO

33. DATE	34. TYPED NAME AND GRADE OF UNIT COMMANDER OR UNIT ADVISER	35. SIGNATURE

REPORT OF INVESTIGATION
LINE OF DUTY AND MISCONDUCT STATUS

1. REPORT DATE *(YYMMDD)*

2. INVESTIGATION OF *(X one)*

☐ INJURY ☐ DISEASE ☐ ILLNESS ☐ DEATH

3. STATUS *(X as applicable)*

☐ a. REGULAR OR EAD

☐ b. CALLED OR ORDERED TO AD FOR

☐ (1) MORE THAN 30 DAYS

☐ (2) 30 DAYS OR LESS

☐ c. INACTIVE DUTY TRAINING *(Type)*

☐ d. SHORT TOUR OF ACTIVE DUTY FOR TRAINING

4. TO *(Major Army or Air Force Commander)*

5. NAME OF INDIVIDUAL *(Last, First, Middle Initial)*

6. SSN

7. GRADE

8. ORGANIZATION AND STATION

9. OTHER MILITARY PERSONNEL INVOLVED IN THE SAME INCIDENT

NAME *(Last, First, Middle Initial)* a.	SSN b.	GRADE c.	d. LOD INVESTIGATION MADE *(X)* YES	NO

e. DURATION *(Applies ONLY to 3.c. and d.)*

	DATE *(YYMMDD)*	HOUR
(1) START		
(2) FINISH		

10. BASIS FOR FINDINGS *(As determined by investigation)*

a. CIRCUMSTANCES	(1) HOUR	(2) DATE *(YYMMDD)*	(3) PLACE

(4) HOW SUSTAINED

b. MEDICAL DIAGNOSIS

c. PRESENT FOR DUTY? *(X)* ☐ YES ☐ NO

d. IF ABSENT: *(X)* ☐ WITH AUTHORITY ☐ WITHOUT AUTHORITY

(Do not complete 10.e. and f. in death cases.)

e. WAS INTENTIONAL MISCONDUCT OR NEGLECT THE PROXIMATE CAUSE? *(X)* ☐ YES ☐ NO

f. WAS INDIVIDUAL MENTALLY SOUND? *(X)* ☐ YES ☐ NO

g. REMARKS

11. FINDINGS *(X one. Do not complete in death cases.)*

☐ IN LINE OF DUTY ☐ NOT IN LINE OF DUTY - NOT DUE TO OWN MISCONDUCT ☐ NOT IN LINE OF DUTY - DUE TO OWN MISCONDUCT

12. INVESTIGATING OFFICER

a. TYPED NAME *(Last, First, Middle Initial)*	b. GRADE	c. BRANCH OF SERVICE	d. SSN
e. ORGANIZATION AND STATION	f. SIGNATURE		

13. ACTION BY APPOINTING AUTHORITY

a. HEADQUARTERS

b. DATE *(YYMMDD)*

c. *(X one. Indicate reasons and substituted findings on back.)* ☐ APPROVED ☐ DISAPPROVED

d. TYPED NAME *(Last, First, Middle Initial)*

e. GRADE

f. BRANCH OF SERVICE

g. SSN

h. SIGNATURE

14. ACTION BY REVIEWING AUTHORITY

a. HEADQUARTERS

b. DATE *(YYMMDD)*

c. *(X one. Indicate reasons and substituted findings on back.)* ☐ APPROVED ☐ DISAPPROVED

d. TYPED NAME *(Last, First, Middle Initial)*

e. GRADE

f. BRANCH OF SERVICE

g. SSN

h. SIGNATURE

15. FINAL APPROVAL *(For action of office indicated in Item 4.)*

Reference Guide

Table Of Contents

16. NAME OF INDIVIDUAL *(Last, First, Middle Initial)*	17. SSN	18. GRADE

19. APPOINTING AUTHORITY - REASONS AND SUBSTITUTED FINDINGS

20. REVIEWING AUTHORITY - REASONS AND SUBSTITUTED FINDINGS

21. APPROVING AUTHORITY - REASONS AND SUBSTITUTED FINDINGS

DA Form 3349 Physical Profile

Purpose

A system for classifying individuals according to functional abilities. The physical profile serial system is based primarily upon the function of body systems and their relation to military duties. In developing the system, the functions have been considered under six factors designated "P–U–L–H–E–S." Four numerical designations are used to reflect different levels of functional capacity. The basic purpose of the physical profile serial is to provide an index to overall functional capacity. Therefore, the functional capacity of a particular organ or system of the body, RATHER THAN THE DEFECT PER SE, will be evaluated in determining the numerical designation 1, 2, 3, or 4.

Key Players

MTF Provider - issues a Soldier a temporary (T3/T4) profile, if temporary profile has been active for 12 months, the medical provider will write a permanent (P3/P4) profile

Profiling Authority - confirms that the Soldier has reached MRDP by signing the second signature on the P3/P4 profile

Unit Commander - should review profiles at 60 days

PEBLO - receives form

Soldier - receives form

Timeline

Treatment (Section 1) - MTF Provider initiates all profiles greater than 30 days on a DA 3349

Authority/References

AR 40-501, Chapter 7, 7-3b

Online Form Link

http://www.apd.army.mil/pdffiles/r40_501.pdf

DA Form 3947 Medical Evaluation Board Proceedings Form

Purpose

MEB proceedings will be recorded on DA Form 3947 (Medical Evaluation Board Proceedings).

Key Players

MEB Provider - writes Narrative Summary (NARSUM)

PEBLO - creates this form based on Section 4 of the final NARSUM and updates to reflect IMR and/or Appeal findings

IMR Provider - reviews package when Soldier requests an Independent Medical Review

Soldier/Designated Legal Representative - makes his or her election

Timeline

MEB Phase (MEB Stage):

PEBLO initiates form within the last 30 Days of the MEB stage.

Authority/References

AR 40-400, Chapter 7, 7-8a

Online Form Link

http://armypubs.army.mil/eforms/pdf/A3947.pdf

Table Of Contents

DA 4037 OFFICER RECORD BRIEF (ORB)

PURPOSE

The Record Brief streamlines the methods used by the Army and the ARNG to record official personnel information. The ORB is a one page Army form designed to provide a summary of officers' qualifications and career history. The ORB is produced from data stored on the Officer Master File (OMF) at the US Army Military Personnel Center (MILPERCEN). Effective the fiscal year (FY) 2012, the ERB/ORB replaced the DA Form 2-1 as part of the promotion board file.

The form link (below) and sample provided (next page) is for illustrative purposes only - the automated product provided by the Soldier's unit may vary in appearance.

Key Players

Soldier / Designated Legal Representative - must review

Unit - prepares and provided the document to the PEBLO

TIMELINE

Generated within MEB Phase (MEB Stage) prepared by the Soldiers Unit

AUTHORITY/REFERENCES

MILPER Message Number 11-248

Proponent ARNG-HRZ

https://g1arng.army.pentagon.mil/Featured%20News/Announcements/Milper%20Message%20Number%2011-248.pdf

ONLINE FORM LINK

Not available

Reference Guide

DA Form 5889 PEB Referral Transmittal Document

Purpose

This document serves as the forwarding memorandum. It identifies the documents forwarded and provides unit and home addresses and telephone numbers for the PEB to contact the Soldier, as required.

Key Players

PEBLO - complete and sign

PEB - receive the DA Form 5889

Timeline

MEB Phase(MEB Stage):

PEBLO initiates form within the last 30 days of the MEB stage.

Authority/References

Authority: 10 USC chapter 61 and 5 USC 301.

For use of this form see: AR 635-40; the proponent agency is DCS, G-1

Online Form Link

http://armypubs.army.mil/eforms/pdf/a5889.pdf

Table Of Contents

DA FORM 5890

ACKNOWLEDGEMENT OF NOTIFICATION OF FORMAL PHYSICAL EVALUATION BOARD HEARING

PURPOSE

To have as a matter of record the notification to the Soldier (or the individual authorized to act in the Soldier's behalf) of the scheduled formal hearing and the Legal Counsel appointed to represent the Soldier'scase before the Physical Evaluation Board.

KEY PLAYERS

PEB Administrator - Creates and maintains this form

Soldier or individual authorized to act in the Soldier's behalf– Signs the form

TIMELINE

PHASE 2 (PEB STAGE): CREATED BY PEB ADMINISTRATOR AND SIGNED BY SOLDIER

AUTHORITY/REFERENCES

Authority: 5 USC 301 and 10 USC 1214

AR 635 - 40, Chapter 4, 4-21d(5)(a)-(5)(e)

ONLINE FORM LINK

http://armypubs.army.mil/eforms/pdf/A5890.pdf

Reference Guide

Table Of Contents

ACKNOWLEDGMENT OF NOTIFICATION OF FORMAL PHYSICAL EVALUATION BOARD HEARING

For use of this form, see AR 635-40; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority: 5 USC 301 and 10 USC 1214.

Principal Purpose: To have as a matter of record the notification to the soldier *(or the individual authorized to act in the soldier's behalf)* of the scheduled formal hearing and the Legal Counsel appointed to represent the soldier's case before the Physical Evaluation Board.

Routine Uses: To the Department of Veterans Affairs to facilitate claims for veteran disability benefits.

Disclosure: Disclosure of all data is voluntary. Failure to provide the data may adversely effect the soldier's interests in the presentation of his/her case before the Physical Evaluation Board.

SECTION I. APPLICABILITY

This form is to be completed by the soldier *(or the individual authorized to act in the soldier's behalf)* upon notification of the scheduled formal the hearing.

SECTION II. INSTRUCTIONS

The Physical Evaluation Board will forward this form to the soldier with the letter of notification of the scheduled formal hearing. The signed acknowledgment will be filed in the original, PEB, and USAPDA copies of the PEB proceedings.

SECTION III. ACKNOWLEDGMENT

1. I acknowledge receipt of the letter informing me of the date and time of the formal hearing.

2. I ☐ have ☐ have not contacted the Appointed Legal Counsel identified in the letter.

3. I ☐ will ☐ will not appear for the hearing.

4. I ☐ do ☐ do not authorize counsel of record access to my medical records and allied papers, to include the extracting of portions therefrom, if necessary, for the purpose of counseling, assisting in the preparation of, or the preparation of, my case for presentation before a formal hearing before the U.S. Army Physical Evaluation Board.

5. I understand that the PEB Recorder will arrange for the attendance of those witnesses that I request who are determined by the Physical Evaluation Board to be essential and reasonably available and who are members or employees of the U.S.Army or another Army Service. I request the individual(s) whom I have listed on the back of this form be summoned as essential witness *(es)*

6. I understand that I am responsible for securing those witness*(es)* that do not meet the criteria in "5" above and that their appearance is at no cost to the government.

7. PRINTED OR TYPED NAME	8. SIGNATURE	
9. ADDRESS	10. PHONE NUMBER	11. DATE

Reference Guide

DA Form 5891 Acknowledgment of Counseling on Legal / Procedural Rights

Purpose

Informs the Soldier of his or her procedural rights and provides a record of counseling.

Key Players

SMEBC / SPEBC Legal Counsels - acknowledgment of Counsels on Legal & Procedural Rights

Timeline

MEB Phase - Informs the Soldier of his or her procedural rights and provides a record of such counseling. (IMR)

PEB Phase - Informs the Soldier of his or her procedural rights and provides a record of such counseling. (IPEB, FPED appeal options)

Authority/References

AR 635-40, e(1)(a) - (1)(e)

Online Form Link

http://armypubs.army.mil/eforms/pdf/A5891.pdf

Table Of Contents

ACKNOWLEDGMENT OF COUNSELING ON LEGAL/PROCEDURAL RIGHTS

For use of this form, see AR 635-40; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority:	10 USC chapter 61 and 5 USC 301.
Principal Purpose:	To explain legal and procedural rights and to ensure that the understanding of these rights by the soldier, or the individual authorized to act in the soldier's behalf, is a matter of record.
Routine Uses:	To the Department of Veterans Affairs to facilitate claims for veteran disability benefits.
Disclosure:	Disclosure of all data is voluntary; however, failure to provide the data may adversely affect the Soldier's interests in the presentation of his/her case before the Physical Evaluation Board.

SECTION I. APPLICABILITY

This form is to be provided to the soldier (or the individual authorized to act in the soldier's behalf) before the conduct of the formal Physical Evaluation Board.

SECTION II. INSTRUCTIONS

The Appointed Legal Counsel is responsible for advising the soldier (or individual authorized to act in the soldier's behalf) of his or her legal and procedural rights before the formal Physical Evaluation Board.

SECTION III. LEGAL/PROCEDURAL RIGHTS

1. I have been informed of the impact of the Privacy Act of 1974 on personal information I am requested to provide during the formal hearing. I understand that --

   a. The authority for requesting personal data in connection with physical disability evaluation is 10 USC chapter 61 and 5 USC 301.

   b The principal purpose for the requested data is to obtain information needed by the Physical Evaluation Board during the formal hearing and to identify both the soldier and witness*(es)*.

   c Routine uses of the information include --

      (1) To evaluate a soldier's physical condition to determine whether the soldier is unfit because of physical disability to perform the duties of the soldier's grade, rank or rating.

      (2) To determine whether the soldier is entitled to disability benefits if unfit because of physical disability.

      (3) To provide information after final disposition to the Department of Veterans Affairs (VA) or the Office of Personnel Management (OPM) as required.

      (4) Information will become part of the soldier's Official Military Personnel File, Health Record, and the Physical Evaluation Board and USAPDA's files of individual case processing.

   d Disclosure of information is voluntary. Failure to provide requested information could have an adverse effect on the proper disposition of the case.

2. I understand, that in accordance with 10 USC 1214, I may not be separated or retired for physical disability without a full and fail hearing, if I request a hearing.

3. I understand, that in accordance with 10 USC 1219, I may not be required to sign a statement relating to the origin, incurrence, or aggravation of a disease or injury that I have. Any such statement against my interests, signed by me, is invalid.

Table Of Contents

4. I understand I may testify as a witness under oath in my own behalf, in which case, I may be cross-examined as any other witness.

5. I, or my counsel, may introduce witnesses, depositions, documents, or other evidence in my own behalf, and cross-examine witnesses who have been examined by he PEB, including witnesses who have specific knowledge of my case and whose conversations have been summarized for the record.

6. I may make unsworn statements, orally or in writing or both, without being subject to cross-examination.

7. I may remain silent. The choice not to make a statement or answer questions will not be considered adverse to my interests.

8. I and/or my counsel may object to any action taken or proposed to be taken by the board or to the admission of evidence. The President of the Physical Evaluation Board will rule on the objection.

9. I and/or my counsel may review all records assembled for use during the hearing, including those furnished by HQ, DA and by other official sources. The assembled records will include memoranda of conversations with individuals who have specific knowledge of my case, to include, but not limited to my chain of command or treating physician.

10. PRINTED OR TYPED NAME	
11. SIGNATURE	12. DATE

Table Of Contents

DA Form 5892 PEBLO Estimated Compensation Worksheet

Purpose

Soldier's retired pay will be computed using the method of computation most favorable to the Soldier. One method is based on multiplying percentage of disability by the retired pay base and the other is based on multiplying the years of creditable service by the retired pay base. Care should be taken to advise Soldiers that computations provided by the PEBLO are estimates only, and that the U.S. Army Finance and Accounting Center will make the official computation of compensation.

New policy is under development. Currently, Army MTF's PEBLOs are directed to refer Soldiers to DFAS customer service call centers and/or the online portal for worksheet estimates.

Key Players

Soldier / Designated Legal Representative - not involved

PEBLO - may explain this form with the Soldier during the final exit counseling session

U.S Army Finance and Accounting Center - may explain to Soldier

Local Finance Officer - may explain to Soldier

Timeline

Generated within PEB Phase (PEB Stage) by PEBLO

Authority/References

Authority: 10 USC chapter 61 and 5 USC 301.

AR 635-40, Appendix C, C-12; the proponent agency is DCS, G-1

DoD Financial Management Regulation 7000.14-R - Volume 7A: military pay policy and procedures

Online Form Link

http://armypubs.army.mil/eforms/pdf/A5892.pdf

Reference Guide

Table Of Contents

PEBLO ESTIMATED DISABILITY COMPENSATION WORKSHEET

For use of this form, see AR 635-40; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 5 USC 301 and 10 USC, chapters 61 and 71.

PRINCIPAL PURPOSE: To provide an estimate of disability compensation.

ROUTINE USES: To provide information on how disability compensation is computed and the requirements for compensation to be exempted from federal taxation.

DISCLOSURE: Disclosure is voluntary; however, failure to provide information will adversely affect accuracy of estimate.

SECTION I. APPLICABILITY

This form is to be completed for Soldiers entitled to Army disability compensation.

SECTION II. INSTRUCTIONS

PEBLOS will complete this form during counseling of the Soldier *(or the authorized individual acting in the Soldier's behalf)* on the PEB's findings. The PEBLO will cover with the Soldier the notes on the back of this form. This form is provided to the Soldier for his/her records and does not need to be retained in the record copies of PEB evaluation.

SECTION III. ESTIMATED COMPENSATION

(Superscripts correspond to numbered notes of explanation on the next page of this form.)

1. _____ *(Name and Grade)* [1]

2. Years _____ Months _____ *(Years of Service (YOS))* [2]

3. _____ *(Monthly Basic Pay)* [3]

4. _____ *(Estimated Retired Pay Base)* [4]

5. _____ % *(Disability Percentage)* [5]

6. _____ *(Disposition)*

7. Estimated retired Pay (PDR or TDRL): Retired pay is the higher of formula "a" or "b."

   a. Years-of-service computation

   2.5% x Yrs _____ Mnths _____ x $ _____ = $ _____
   (YOS) [2] *(retired pay base)* *(retired pay)*

   b. Disability rating percentage computation

   _____ x $ _____ = $ _____
   (percentage limited to a max 75%) [5] *(retired pay base)* *(retired pay)*
   (for TDRL, percentage no less than 50%) [6]

   c. Non taxable disability retired pay: See note 7. _____

8. Estimated disability severance pay

   a. Formula

   2 x _____ x 3 = $ _____
   (basic pay for applicable grade) [1] *(YOS: At least 3 or 6 to a limit of 19)* [2] *(severance pay)*

   b. Exclusion from Federal Gross Income: See note 7. _____

   c. Exclusion from VA recoupment. See note 8. _____

9. REMARKS

Table Of Contents

NOTES of Explanation for Estimated Disability Compensation

1. Grade for purposes of retired or severance pay:

   a. In accordance with 10 USC 1372, the grade at which a Soldier is retired for disability is the highest of current grade; highest grade satisfactorily held; or the grade to which the Soldier would have been promoted had it not been for the physical disability for which the Soldier is retired. The Soldier meets the "would have been promoted" provision if the Soldier is on an approved promotion list or was otherwise pending promotion. See AR 600-8-19 for "last-day" promotion for enlisted Soldiers. Officers are retired at "promotion-list" grade without actual promotion. For Soldiers who entered the military after 7 September 1980, retirement at "promotion list" grade will have no impact on retired pay. For Soldiers who entered the military before 8 September 1980, retirement at promotion list" grade increases retired pay. See note 4, below.

   b. The grade at which severance pay is computed under the provisions of 10 USC 1212 is the same as explained above for retired pay. The provisions for promotion are the same as explained in "a" above.

2. Years of Service (YOS).

   a. Retirement: Years of service is computed under 10 USC 1208. (Service computed under 10 USC 1208 is the same as Service computed under 10 USC 1405.) It is combined years of active service and inactive duty points (including membership points, as described in subparagraph "c" below. Each full month of service is counted as 1/12 of a year and any remaining fractional part of a month is disregarded. Regulars who have prior Reserve service are credited with the inactive duty points for good years completed.

   b. Severance pay: YOS equals the number of combined years of active service (active duty) and inactive duty points. NDAA 08 lifted the cap from 12 to 19 years and granted Service members a minimum floor of 3 or 6 years. A Soldier awarded severance pay for a disability incurred in the line of duty in a combat zone (as designated by the Secretary of Defense) or incurred during the performance of duty in combat-related operations (as designated by the Secretary of Defense) is accorded the 6-year floor. All others (to include RC members and those with less than six months combined service) are accorded the 3-year floor. DA Form 199, block 10D, reflects the determination of "combat zone/combat-related operations." A period of six months from the 3/6-floor is rounded up to the nearest whole year; less than six months, is rounded down.

   c. Nonregular service: For members of the Reserve Components (RC), YOS is the combined years of active service (active duty, which includes Annual Training) and Inactive Duty Training (IDT) (which includes membership points). For USAR Soldiers, combined service is recorded on the Chronological Statement of Retirement Points (ARPC 249-2-E) commonly known as RPAS). See column 10, Total points Creditable. For ARNG Soldiers, combined service is recorded on the Retirement Points History Statement (NG Form 23) (commonly known as RPAM). See column titled, Total Points for Retired Pay. RC IDT is included in the computation of service for RA's with previous RC service. In summary, combined service is computed as set forth below. follows:

   (1) One point for each day of active duty.
   (2) Fifteen points for membership for each qualifying year in a Reserve Component.
   (3) One point for each authorized participation in drills or periods of instruction, not to exceed 60 points for any one anniversary year that closed before September 23, 1996, 75 points for anniversary years that closed on or after September 23, 1996, but before October 30, 2000; and 90 points for anniversary years that close on or after October 30, 2003.
   (4) Divide total number of points in (1) thru (3) above by 360 to convert points to years. (Insert answer into formula on worksheet where it calls for YOS).

3. Monthly basic pay: For members of the RC, the basic pay used for computation purposes is the monthly AD basic pay- not their monthly drill compensation.

4. Retired pay base:

   a. For Soldiers who entered the service prior to 8 September 1980, the retired pay base is the basic pay of the Soldier's current grade or highest grade satisfactorily held, whichever is higher. When the Soldier has previously held a higher grade, USAPDA determines highest grade satisfactorily held. Cases involving disciplinary reduction generally must be forwarded to the Grade Determination Review Board. The exception occurs after the Soldier's disability findings were approved by the SA.

   b. For Soldiers who entered the service after 7 September 1980, the retired pay base is the high 36-month average of basic pay. When a Soldier has less than 36 months of service, the amount equal to the total amount of basic pay which was received during the period of service is divided by the number of months of service (including any fraction thereof). For members of the RC, their high 36-month average is computed as though they were receiving full monthly basic pay.

5. Maximum percentage. The maximum percentage used as a multiplier against retired pay base for purposes of disability retirement is 75%. The amendment to 10 USC 1409 in 2006 lifting the 75% cap for those who retire for length of service with more than 30 years of service did not include those who retire for disability with greater than 30 years of service or whose disability percentage is greater than 75%.

6. TDRL percentage: When placed on the TDRL, a Soldier will receive retired pay of no less than 50% of his or her retired pay base. The law makes no provision to adjust TDRL compensation for increase or decrease in the severity of the member's condition until the member's removal from the TDRL.

7. Exclusion from Federal gross income: Disability severance pay or the amount of retired pay equal to the disability percentage times the Soldier's retired pay base is excluded from federal gross income under either of the following circumstances.

   a. The Soldier was serving in the Armed Forces or was under a binding written commitment to become such a member on 24 September 1975.

   b. The disability is combat related under the provisions of 26 USC 104. See AR 635-40.

   c. The determination of whether the member's disability meets the criteria for exclusion is documented on DA Form 199, block 10C.

8. Exclusion of severance pay from VA recoupment: NDAA 08 excluded severance pay from deduction from DVA compensation when the severance pay is awarded for a disability incurred in a combat zone as determined by the Secretary of Defense or for a disability incurred during the performance of duty in combat-related operations as designated by the Secretary of Defense. For all other awards, the net amount of disability severance is deducted from DVA compensation.

DA Form 5893 MEB/PEB Counseling Checklist

Purpose

This form is applicable to all Soldiers processing through the Integrated Disability Evaluation System (IDES), to include Soldiers who request separation for physical disability with waiver of a Physical Evaluation Board under AR 635-40, chapter 5. The Physical Evaluation Board Liaison Officer (PEBLO) is responsible for counseling Soldiers throughout all phases of IDES. The PEBLO will give this form to the Soldier, so the Soldier knows what to expect throughout his/her disability processing. This form will be forwarded to the PEB with the Soldier's final election for inclusion in the case file. This form replaces DA FORM 5893-R, JUN 1990

ACKNOWLEDGMENT OF NOTIFICATION OF FORMAL PHYSICAL EVALUATION BOARD HEARING and is approved for immediate use.

This form will be included in the next revision of AR 635-40.

Key Players

PEBLO - will upload and route the signed DA 5893 through eMEB to the PEB

Soldier or Soldier's Designated Legal Representative - after the final PEB Counseling session with the PEBLO, the Soldier must sign the DA 5893

Timeline

Generated within MEB Phase (MEB Stage) by the PEBLO

Authority/References

Authority: 10 USC chapter 61 and 5 USC 301.

For use of this form see: AR 635-40; the proponent agency is DCS, G-1

Online Form Link

http://armypubs.army.mil/eforms/pdf/A5893.pdf

Table Of Contents

SOLDIER'S MEDICAL EVALUATION BOARD/PHYSICAL EVALUATION BOARD COUNSELING CHECKLIST

For use of this form, see AR 635-40; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 10 USC chapter 61 and 5 USC 301.

PRINCIPAL PURPOSE: To explain disability evaluation, ensure counseling is documented, and provide the Soldier with a checklist of the steps involved to process their disability evaluation case.

ROUTINE USES: Confirmation of steps involved for counseling performed and counseling received, as well as required steps in order to complete the Medical Evaluation Board (MEB) and Physical Evaluation Board (PEB) process

DISCLOSURE: Disclosure of Social Security Number is voluntary.

SECTION I. APPLICABILITY

This form is applicable to all Soldiers processing through the Physical Disability Evaluation System (PDES), to include Soldiers who request separation for physical disability with waiver of a Physical Evaluation Board under AR 635-40, chapter 5.

SECTION II. INSTRUCTIONS

The Physical Evaluation Board Liaison Officer (PEBLO) is responsible for counseling Soldiers throughout all phases of PDES. The PEBLO will give this form to the Soldier, so the Soldier knows what to expect throughout his/her disability processing. This form will be forwarded to the PEB with the Soldier's final election for inclusion in the case file. This form replaces DA FORM 5893-R, JUN 1990 ACKNOWLEDGMENT OF NOTIFICATION OF FORMAL PHYSICAL EVALUATION BOARD HEARING and is approved for immediate use. This form will be included in the next revision of AR 635-40.

SECTION III. MEB STEPS

A. MEDICAL EVALUATION BOARD (MEB) STEPS

Initials:	I have attended the Standard MEB/PEB Briefing. DATE SCHEDULED: _____ DATE ATTENDED:
Initials:	I have begun my VA claims processing and have obtained a copy of my medical record.
Initials:	I was informed that I can follow the progress of my MEB through my AKO account (My MEB). My PEBLO, using my login information, logged me on to My MEB and demonstrated the web interface to me.
Initials:	I have been scheduled for an Army Career and Alumni Program (ACAP) Briefing on Date _____ (www.acap.army.mil)
Initials:	I have received a copy of the Army Physical Disability Evaluation System (APDES) Handbook.
Initials:	I have turned in to my PEBLO a copy of the ACAP documentation showing that I attended.
Initials:	I have had an initial counseling session with my PEBLO. I know who my PEBLO is and how to contact my PEBLO. If assigned to the WTU, I have informed my PEBLO of who my Case Manager and my Squad Leader is. I have provided my PEBLO with a reliable method of contacting myself (e.g. cell phone.) My PEBLO: _____ Telephone Number: _____ Case Manager: _____ Telephone Number: _____ Squad Leader: Telephone Number:
Initials:	I have been counseled on my right to have my case reviewed by an impartial medical professional.
Initials:	I have been counseled on how more evidence may be presented for consideration of the MEB.
Initials:	I have been provided the phone number to the regional Office of Soldier Counsel. Telephone:
Initials:	I have been scheduled for Part I of Physical Examination. Date:
Initials:	I have been scheduled for Part II of Physical Examination. Date:
Initials:	I have turned in all required administrative documents. (LES, ERB/ORB, any orders and other required administrative documents)
Initials:	I have obtained counsel of my choice. (Office of Soldier Counsel (OSC), Disabled American Veterans (DAV) or private
Initials:	I have reviewed the DA 3947, Medical Evaluation Board Proceedings findings and recommendations.
Initials:	I understand that I have 5 calendar days for impartial physician review and 7 calendar days to make election of concur/nonconcur.
Initials:	I have been counseled and understand the criteria and procedures for requesting continuance on active duty or continuance in the Active Reserve (COAD/COAR). *Please use MEB COAD and COAR MEMOS to prepare request*
Initials:	I understand that I must sign the DA 3947 Medical Evaluation Board Proceedings. I understand that if I do not sign my DA 3947 that my DA 3947 will be forwarded to the PEB with a statement explaining the circumstances of refusal.
Initials:	I have been advised of the MEB appeal procedures. I have been advised that I may ask for a reasonable amount of additional time to construct my appeal per MEDCOM policy.
Initials:	If appeal to MEB was submitted, I was informed of decision by approving authority.
Initials:	I have been informed of the procedures for requesting separation with waiver of a PEB, stressing that such request is voluntary.
Initials:	I was given a complete copy of my MEB and allied administrative documents.
Initials:	If applicable, the provisions for retention beyond scheduled separation or retirement date for purposes of disability evaluation were explained to me.
Initials:	I have been briefed about my possible entitlement (if appropriate) to Traumatic Injury Protection Under Servicemembers' Group Life Insurance (TSGLI). (www.tsgli.army.mil)

Reference Guide

Table Of Contents

SECTION III. MEB STEPS *(Continued)*

A. MEDICAL EVALUATION BOARD (MEB) STEPS *(Continued)*

Initials:	I have been briefed regarding my right to apply for Social Security Benefits while still on Active Duty under the Social Security Administration's Wounded Warrior Program. (www.socialsecurity.gov/woundedwarriors)
Initials:	I have been counseled on my right to contact the Wounded Soldier and Family Hotline. 1-800-984-8523
	REMARKS:
	SECTION III A - PEBLO INT: Initials

B. PHYSICAL EVALUATION BOARD (PEB) ADJUDICATION (INFORMAL AND FORMAL) STEPS

Initials:	My PEBLO described the course of disability processing through the PEB.
Initials:	I was informed of my informal PEB findings and recommendations. A full explanation was given to me as to my disposition by my PEBLO. I received a copy of the informal PEB findings and recommendations.
Initials:	I understand that I have the right to consult with an independent counsel or Ombudsman at any time in this process. My Ombudsman is Telephone Number:
Initials:	I know and understand my election options, guidelines for submitting a rebuttal, time limits, and impact of timely rebuttal on case review by PEB. I understand that I have 10 calendar days to make my election. I also understand that if I fail to sign the DA Form 199 (PEB findings and recommendations) that it will be construed that I concur with the PEB findings and recommendations and my case will be finalized. I understand that in certain cases, retirement eligible NG/USAR Soldiers MUST take certain actions to protect their retirement benefits.
Initials:	My PEBLO prepared and discussed estimates of disability retired pay or disability severance pay as changed by NDAA 08. I have received a copy of the estimate worksheet. (DA Form 5892-R, PEBLO Estimated Disability Compensation Worksheet).
Initials:	I know and understand my right under law to a full and fair hearing before separation or retirement for physical disability.
Initials:	I know and understand my right to and options for representation by counsel before a formal hearing.
Initials:	I know and understand my right to call witnesses on my behalf and to question all witnesses called by the PEB.
Initials:	I know and understand my right to testify or to remain silent and to make unsworn statements orally or in writing, or both, without being subject to questioning by the members of the PEB.
Initials:	I know and understand my right to request, female, minority, or enlisted representation for the formal PEB (if applicable); and that the PEB president will determine if such representation is reasonably available.
Initials:	I know and understand my right to review all records used by the PEB in evaluating my case.
Initials:	I understand that I may request to reverse prior elections that I have made, but that approval for those changes are at the discretion of the President of the PEB.
	REMARKS: The NDAA 08 changed the computation of disability severance pay to 2 months basic pay x YOS up to 19. The amendment granted a minimum six years credit for disability incurred in a combat zone or during the performance of combat operations and a minimum 3 years credit for all other situations.
	SECTION III B - PEBLO INT: Initials

C. REVIEW BY UNITED STATES ARMY PHYSICAL DISABILITY ADMINISTRATION (USAPDA)/ ARMY PHYSICAL DISABILITY APPEAL BOARD (APDAB)

Initials:	I know and understand the USAPDA review process, to include the circumstances requiring mandatory review and the findings to be confirmed.
Initials:	I know and understand my election rights, rebuttal procedures, and time requirements for response if USAPDA modifies PEB findings and recommendations.
Initials:	I know and understand the APDAB review process if I nonconcur with USAPDA modification and submit a rebuttal.
Initials:	I know and understand my election rights, rebuttal procedures, and time limits in response to APDAB decision.
	REMARKS:
	SECTION III C - PEBLO INT: Initials

D. TEMPORARY DISABILITY RETIREMENT LIST (TDRL)

Initials:	I have been counseled that there are specific criteria for placement on the TDRL and have been provided a copy of the MEDCOM TDRL FAQ Sheet.
Initials:	I have been counseled on my responsibility to change my status in DEERS and to contact TRICARE to ensure that my health care benefits continue to be available to me and my family.
Initials:	I have been counseled on the maximum tenure (5 Years) on TDRL and that this period of service will not count towards retirement.
Initials:	I have been counseled on the requirement for periodic medical examination and PEB evaluation while on TDRL.

Table Of Contents

SECTION III. MEB STEPS *(Continued)*

D. TEMPORARY DISABILITY RETIREMENT LIST (TDRL) *(Continued)*

Initials:	I have been counseled on the minimum rate of retired pay while on TDRL and provided an estimate.
Initials:	I have been counseled that 10 USC 1401 (the law governing TDR compensation) does not permit a change in the disability rating for purposes of increasing or decreasing retired pay until the member is removed from the TDRL.
Initials:	I have been counseled on the criteria for retention on the TDRL.
Initials:	I understand that if the PEB recommends retention on the TDRL, I may not appeal the recommendation since status is not being changed.
Initials:	I understand that failure to report for a scheduled examination or to keep Human Resources Command informed of current address will result in the suspension of retired pay.
Initials:	My rights concerning return to a military status if I am determined fit have been explained to me. I understand that only Regular Army Soldiers have the statutory right to return to AD, and if enlisted, there is a 90-day time-requirement in which I must re-enlist.
Initials:	I understand that if I am found fit off the TDRL and request length of service retirement, time-in-grade requirements will determine my retirement grade.
	REMARKS:
	SECTION III D - PEBLO INT: Initials

E. BENEFITS/PROGRAMS:

Initials:	I understand the rights available to retired members.
Initials:	I understand that disability severance pay and that portion of disability retired pay related to the disability percentage (disability rating X member's retired pay base) is not subject to federal taxation when the compensation is awarded for a combat related disability as defined by 26 USC 104. I understand that if I am retired for physical disability certain benefits may accrue to me if I am later employed under Federal Civil Service. These benefits pertain to Service members who are retired for disability incurred due to armed conflict or caused by an instrumentality of war as defined in 5 USC for the specific benefit.
Initials:	I understand the impact of VA compensation on disability severance and disability retired pay. I understand that I must apply to the VA for VA compensation and allied benefits.
Initials:	I have been advised to file a claim with the VA during outprocessing at the Transition Point.
Initials:	My PEBLO has assisted me with arranging contact with the VA, Social Security Administration and Department of Labor.
Initials:	If I receive a retirement, my PEBLO will coordinate with the installation Retirement Services Officer for SBP counseling.
Initials:	My PEBLO has coordinated with the Disabled Veterans Outreach Program Specialist for a counseling appointment. My Veterans Outreach Program Specialist is: _____ Telephone Number: _____ My Appointment is scheduled for: Date _____
	REMARKS: The NDAA amended 10 USC 1212 to provide that the DVA will not recoup from the DVA compensation the disability severance pay awarded for a disability incurred in a combat zone or incurred during the performance of combat operations.
	SECTION III E - PEBLO INT: Initials

SECTION IV. ACKNOWLEDGMENT

A. I was counseled on the above marked items as they pertained to my disability evaluation.

1. SOLDIER'S TYPED OR PRINTED NAME AND RANK.	
2. SOLDIER'S SIGNATURE *(or authorized individual)*	3. DATE SIGNED
4. SOLDIER'S CONTACT INFO:	
HOME: / CELL:	FAX:
EMAIL:	AKO EMAIL:

B. I counseled the above-named soldier on those items listed in the above checklist as they pertained to the case.

1. TYPED OR PRINTED PEBLO NAME AND RANK.	2. POSITION TITLE AND GRADE
3. PEBLO'S SIGNATURE *(or authorized individual)*	4. DATE SIGNED
PEBLO'S EMAIL:	PHONE:

Table Of Contents

DA FORM 7652

PHYSICAL DISABILITY EVALUATION SYSTEM COMMANDER'S PERFORMANCE AND FUNCTIONAL STATEMENT

PURPOSE

Statement from Soldier's commander confirming whether any adverse personnel action is being considered against the Soldier and describing the Soldier's current duty performance. The description of duty performance should address the following: (1) The Soldier's most recent performance of duty; (2) Any special limitation of duty due to the Soldier's physical condition; (3) The Soldier's ability to adequately perform the duties normally expected of an individual of the Soldier's office, grade, rank, or rating; (4) The Soldier's current duty assignment, anticipated future assignments, branch, age, and career specialties.

KEY PLAYERS

Commander - responsible for assessing a Soldier's duty limitations from a non-medical perspective

PEBLO - request and receives DA Form 7652

TIMELINE

PHASE 1 (MEB STAGE): COMMANDER NEEDS TO COMPLETE FORM WITHIN 5 DAYS OF PEBLO'S REQUEST

AUTHORITY/REFERENCES

Authority: 10 USC chapter 61 and 5 USC 301.

For use of this form see: HQDA Letter 635-08-1, the proponent agency is DCS, G-1

ONLINE FORM LINK

http://armypubs.army.mil/eforms/pdf/A7652.pdf

Reference Guide

Table Of Contents

PHYSICAL DISABILITY EVALUATION SYSTEM (PDES)
COMMANDER'S PERFORMANCE AND FUNCTIONAL STATEMENT

For use of this form see HQDA Letter 635-08-1; The proponent agency is DCS, G-1.

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC chapter 61 and 5 USC 301

PURPOSE: To provide information to the PEB on the impact of a medical impairment on a Soldier's ability to perform duties and to provide administrative information that impacts disability adjudication and/or benefits if the Soldier is determined unfit.

ROUTINE USES: See Purpose

DISCLOSURE: Information is required in order to properly adjudicate the Soldier's case in the best interests of the Soldier and the Army.

SECTION I: SOLDIER DEMOGRAPHIC INFORMATION

1. DATE *(YYYYMMDD)*	2a. LAST NAME	2b. FIRST NAME	2c. MIDDLE NAME	3. PMOS

4. BASD	5. COMPONENT	6a. BIRTHDATE *(YYYYMMDD)*	6b. AGE	7. UNIT OF ASSIGNMENT

SECTION II: ADMINISTRATIVE INFORMATION

Instructions: The information in this section should be confirmed by the appropriate personnel activity and with the Soldier.

DATA ITEM	Yes	No	
1. Is Soldier charged or under investigation for an offense chargeable under the UCMJ, which could result in dismissal or punitive discharge?	☐	☐	
2. Is Soldier pending voluntary or involuntary administrative separation under AR 635-200 (enlisted) or AR 600-8-24 (officer)? Chapter _____, Para _____	☐	☐	If answer is YES, specify the chapter and paragraph.
3. Does Soldier have an approved voluntary retirement? Date retirement approved: _____	☐	☐	If answer is YES, list date retirement was approved.
4. Is officer within 12 months of mandatory retirement for age or years of service or approved for Selective Early Retirement? Date of officer's mandatory retirement: _____	☐	☐	If answer is YES, list mandatory retirement date.
5. REGULAR COMPONENT SOLDIERS ONLY: Does Soldier have prior service in the Selected or Individual Ready Reserve?	☐	☐	If answer is YES, specify type of service. Ex: Served as a member of the ARNG or a USAR Troop Program Unit.
6. RESERVE COMPONENT SOLDIERS ONLY: Is Soldier within 12 months of his or her mandatory removal date? Mandatory Removal Date: _____	☐	☐	If answer is YES, list mandatory removal date.
7. RESERVE COMPONENT SOLDIERS ONLY. If the answer to question to 6 is yes, will Soldier have 20 qualifying years of service at time of his or her mandatory removal date for purposes of eligibility for non regular retirement?	☐	☐	
8. ACTIVE COMPONENT ONLY. Is Soldier within 12 months of his or her Retention Control Point (RCP) and will Soldier be eligible for length of service retirement at the RCP? RCP date: _____	☐	☐	If answer is YES, list RCP date.
9. Was Soldier's retirement for length of service delayed by Stop Loss? MILPER MESSAGE _____	☐	☐	If answer is YES, list the applicable MILPER Stop Loss message.
10. If an enlisted Soldier, is the Soldier due an automatic advancement? (See AR 600-8-19 concerning promotable status of enlisted Soldiers in the PDES.) Date due automatic promotion: _____	☐	☐	If answer is YES, list date Soldier due next automatic advancement.
11. If an enlisted Soldier, is the Soldier on a semi-centralized or centralized promotion list?	☐	☐	
12. If an officer, is the Soldier on an approved promotion list?	☐	☐	
13. Has Soldier previously held higher rank? Highest rank held: _____	☐	☐	If answer is YES, list rank and explain the reason Soldier is not serving in highest rank previously held.

Table Of Contents

DATA ITEM *(Continued)*	Yes	No	
14. Was Soldier on 24 September 1975, a member of the Armed Forces, to include the Reserve components, the National Oceanic and Atmospheric Administration (NOAA and formerly the Coast and Geodetic Survey), the U.S. Public Health Service, or under a binding written agreement to become such a member? (NOTE: A Soldier who was a contracted cadet of a U.S. Service Academy or a contracted ROTC cadet or a member of an Armed Force of another country on that date is included in the meaning of Armed Forces.)	☐	☐	
15. Was Soldier's current referral to MEB/PEB the result of evaluation by an MOS/Medical Retention Board (MMRB)?	☐	☐	If answer is YES, attach MMRB results.

SECTION III. PERFORMANCE INFORMATION

You are entering information into a performance-based system. Focus your comments on chronic conditions. The PEB must understand the impact of your Soldier's conditions on his/her ability to perform duties in the primary MOS. Severe, acute physical conditions generally need little performance discussion because the PEB members easily understand the limitations.

Should the PEB determine the Soldier is not fit for either a mental disorder or residuals of a Traumatic Brain Injury (TBI), the PEB must gauge the Soldier's capacity to perform in the civilian sector. For these conditions, the PEB looks at the Soldier's current functioning in the military, without regard to whether the Soldier is performing in his/her PMOS.

In all cases of Medical Corps officers with a clinical specialty area of concentration and assigned to a clinical position, the officer's first line medical supervisor will complete Sections III and complete and sign in IV. In all cases of officers of the Judge Advocate General Corps (JAG), Sections III and IV will be completed by the officer's Staff Judge Advocate, Command Judge Advocate, or agency/section supervisor.

SECTION III A. For each Soldier, regardless of condition(s).

For each item, mark Yes, No, or N/Obs (not observed). In Section III D: fully explain every 'No.'

#	ITEM	Yes	No	N/Obs
1.	Soldier performs duties in MOS (to include assigned MOS duties in unit).	☐	☐	☐
2.	Soldier in appropriate TO&E or TDA position for grade and MOS.	☐	☐	☐
3.	Soldier's medical conditions/limitations affect unit accomplishing mission. *If Yes, fully explain in Section III D.*	☐	☐	☐
4.	I recommend retaining this Soldier.	☐	☐	☐

SECTION III B. For each Soldier with a mental disorder (including Post Traumatic Stress Disorder (PTSD), major depressive disorder, anxiety disorder, bipolar disorder, etc.).

Consider Soldier's performance over the past several months. Indicate whether performance seems to be improving, worsening, or static. For example, where Soldier demonstrated periods of not completing tasks to time and quality standards, but is now completing tasks to standards indicate Soldier had issues but is now performing normally.

Table Of Contents

SECTION III B *(Continued)*

Use Section III D if additional space required and to provide additional discussion.

1	Describe/list *discrete, specific* duties/tasks Soldier can complete to standard (time and quality).	
	A	
	B	☐ No difficulties.
	C	☐ Not observed.
2	Describe *types of duties* Soldier does not complete to standard (time and quality).	
	A	
	B	☐ No difficulties.
	C	☐ Not observed.
3	Indicate whether performance issues are due to (choose all that apply):	
	A	☐ Soldier needs more time for each task;
	B	☐ Soldier performs duties/tasks with errors or incompletely.
	C	☐ Soldier does not complete the duties/tasks.
	D	☐ Soldier unable to complete 8 hour duty day.
	E	☐ No difficulties.
	F	☐ Not observed.
4	Considering 1-3 above, and Soldier's work performance during the time you have observed Soldier, choose most accurate description of Soldier's performance:	
	A	☐ Periods of diminished attention or performance only when significantly stressed. If known, indicate type of stress eliciting performance
	B	☐ Occasional decrease in work efficiency (performs more slowly and/or with more errors).
	C	☐ Intermittent periods where Soldier unable to perform occupational tasks.
	D	☐ Occasional difficulties with reduced reliability and productivity.
	E	☐ Not observed.
5	Effective work relationships with supervisors and/or co-workers.	
	A	☐ Has effective work relationships with both supervisors and co-workers.
	B	☐ Difficulty establishing and/or maintaining effective work relationships with supervisors and/or co-workers. Discuss.
	C	☐ Does not establish and/or does not maintain effective relationships with supervisors and/or co-workers. Discuss.
	D	☐ Not observed.

SECTION III C. If Soldier has a diagnosis of Traumatic Brain Injury (TBI), assess Soldier's performance.

Use Section III D to provide additional discussion.

1. Task/duty completion (functional capacity).		
	Completing tasks/duties to standard.	
	A	☐ Performs tasks/duties to standards.
	B	☐ Mild difficulties completing tasks/duties to standards. Discuss.
	C	☐ Moderate difficulties completing tasks/duties to standards. Discuss.
	D	☐ Severe difficulties completing tasks/duties to standards. Discuss.
	E	☐ Not observed.

Table Of Contents

2. Decision Making.

Based on your observations of Soldier's performance, can you gauge the quality of Soldier's decisions? If so, indicate whether Soldier:

- A ☐ Makes reasonable decisions, including complex or unfamiliar ones. Discuss and include examples of Soldier's reasonable decisions.
- B ☐ Makes reasonable decisions; occasionally makes (or avoids making) unreasonable complex or unfamiliar decisions. Discuss and include examples.
- C ☐ Makes simple decisions but usually not complex or unfamiliar decisions. Discuss and include examples.
- D ☐ Not observed.

3. Social Interactions.

Social interaction. Describe whether Soldier displays inappropriate social interactions. Discuss.

- A ☐ Describe behaviors and indicate frequency (occasionally, frequently, most of the time; or you can indicate in %s.) Discuss.
- B ☐ Not observed.

4. Performance issues due to Soldier's complaints of TBI residuals.

Where you have observed negative performance issues and Soldier attributes these performance issues to physical symptoms (e.g., headache; dizziness; insomnia, hypersensitive to sound or light) indicate the impact on Soldier's performance.

- A ☐ Mild interference, e.g., able to complete with more time or completes work with more than the normal frequency of errors.
- B ☐ Moderate interference, e.g., the result is the equivalent to missing work several hours a day. An example of the impact on performance and the frequency of this impact is: "headaches requiring rest period during most days."
- C ☐ Not observed.

5. Workplace Interactions.

Does Soldier appear: irritable; impulsive; unpredictable; unmotivated; verbally aggressive; physically aggressive; belligerent; apathetic; moody; uncooperative; inflexible; unfeeling; or unaware of condition? If so, indicate how these characteristics appear to impact Soldier's workplace interactions:

- A ☐ Do not interfere with workplace interaction. Discuss.
- B ☐ Occasionally interfere with workplace interaction. Discuss.
- C ☐ Frequently interfere with workplace interaction. Discuss.
- D ☐ Interfere or preclude workplace interaction on most days. Discuss.
- E ☐ Occasionally requires supervision (for safety of self or others.) Discuss.
- F ☐ Not observed.

Table Of Contents

SECTION III D. COMMENT SECTION

INSTRUCTIONS:

Whenever possible, include more than "Soldier not performing because of profile limitations." Indicate specific duties Soldier currently performs and hours per week Soldier performs duties other than those within Soldier's PMOS. Describe Soldier's performance.

For III A, B, and C above, reference item # and provide additional detail/discussion, as required. Use additional pages as required.

SECTION IV: COMMANDER'S VALIDATION AND SIGNATURE

1. PRINTED NAME	2. RANK	3. BRANCH	4. TITLE
5. SIGNATURE	6. UNIT ADDRESS		
7. PHONE NUMBER	8. E-MAIL ADDRESS	9. DSN	10. FAX NUMBER

SECTION III D. COMMENT SECTION (Continued)

INSTRUCTIONS:

Whenever possible, include more than "Soldier not performing because of profile limitations." Indicate specific duties Soldier currently performs and hours per week Soldier performs duties other than those within Soldier's PMOS. Describe Soldier's performance.

For III A, B, and C above, reference item # and provide additional detail/discussion, as required. Use additional pages as required.

Table Of Contents

DD Form 214/215 Series Certificate of Release or Discharge from Active Duty

Purpose

The DD Form 214 will provide an accurate and complete summation of active military personnel service. It will provide the Military Services with an authoritative source of personnel information for administrative purposes, and for making enlistment or reenlistment eligibility determinations. Personnel being separated from a period of active duty for training, full-time training duty, or active duty for special work will be furnished a DD Form 214 when they have served 90 days or more, or when required by the Secretary of the Military Department concerned for shorter periods. Personnel shall be furnished a DD Form 214 upon separation for cause or for physical disability regardless of the length of time served on active duty.

The DD Form 215 will be used to correct errors in the DD Form 214 discovered after the original has been delivered and/or distribution of copies of the form has been made, and to furnish to separating member information not available when the DD Form 214 was prepared. The distribution of DD Form 215 will be identical to the distribution of DD Form 214.

Key Players

HRC - completes DD- 214and DD - 215

Soldier / Designated Legal Representative - must review

Timeline

Transition and Reintegration Phase

Issued upon out-processing requirements to retiring or separating Soldiers from the Army by HRC

Authority/References

DoDI 1336.01, August 20, 2009, 4a / DoDI 1336.01, 20 August 2009, Enclosure 3, 2d

http://www.dtic.mil/whs/directives/corres/pdf/133601p.pdf

Online Form Link

http://www.ebenefits.va.gov

Reference Guide

DFAS 702 Defense Finance and Accounting Service Military Leave and Earnings Statement (DFAS LES)

Purpose

The LES is a comprehensive statement of a member's leave and earnings showing your entitlements, deductions, allotments (fields not used for Reserve and National Guard members), leave information, tax withholding information, and Thrift Savings Plan (TSP) information.

Key Players

Soldier / Designated Legal Representative - must provide a copy of their most current DFAS 702 to the PEBLO.

Timeline

Generated monthly by DFAS, provided to PEBLO in Phase 1.

Authority/References

Defense Finance and Accounting Service (DFAS)

Online Form Link

http://www.dfas.mil/militarymembers/payentitlements/aboutpay.html

Table Of Contents

DEFENSE FINANCE AND ACCOUNTING SERVICE MILITARY LEAVE AND EARNINGS STATEMENT

ID	NAME (LAST, FIRST, MI)	SOC. SEC. NO.	GRADE	PAY DATE	YRS SVC	ETS	BRANCH	ADSN/DSSN	PERIOD COVERED
	1	2	3	4	5	6	7	8	9

ENTITLEMENTS		DEDUCTIONS		ALLOTMENTS		SUMMARY	
TYPE	AMOUNT	TYPE	AMOUNT	TYPE	AMOUNT	+ AMT FWD	13
A B C D E F G H I J K L M N O	10		11		12	+ TOT ENT	14
						- TOT DED	15
						- TOT ALMT	16
						= NET AMT	17
						- CR FWD	18
						= EOM PAY	19
TOTAL	20		21		22	DIEMS 23	RET PLAN 24

LEAVE	BF BAL	ERND	USED	CR BAL	ETS BAL	LV LOST	LV PAID	USE/LOSE
	25	26	27	28	29	30	31	32

FED TAXES	WAGE PERIOD	WAGE YTD	M/S	EX	ADD'L TAX	TAX YTD
	33	34	35	36	37	38

FICA TAXES	WAGE PERIOD	SOC WAGE YTD	SOC TAX YTD	MED WAGE YTD	MED TAX YTD
	39	40	41	42	43

STATE TAXES	ST	WAGE PERIOD	WAGE YTD	M/S	EX	TAX YTD
	44	45	46	47	48	49

PAY DATA	BAQ TYPE	BAQ DEPN	VHA ZIP	RENT AMT	SHARE	STAT	JFTR	DEPNS	2D JFTR	BAS TYPE	CHARITY YTD	TPC	PACIDN
	50	51	52	53	54	55	56	57	58	59	60	61	62

Thrift Savings Plan (TSP)	BASE PAY RATE	BASE PAY CURRENT	SPEC PAY RATE	SPEC PAY CURRENT	INC PAY RATE	INC PAY CURRENT	BONUS PAY RATE	BONUS PAY CURRENT
	63	64	65	66	67	68	69	70

CURRENTLY NOT USED	TSP YTD DEDUCTIONS	DEFERRED	EXEMPT	CURRENTLY NOT USED
71	72	73	74	75

REMARKS 76 **YTD ENTITLE**_____ 77 **YTD DEDUCT** _____ 78

www.dfas.mil

DFAS Form 702, Jan 02

Reference Guide

INTEGRATED NARSUM

PURPOSE

The minimum necessary requirements for NARSUM production are outlined in the guidance document. To ensure consistency and synchronization of effort, each team member's core roles and responsibilities are described and the team must adhere to overall timeliness and quality standards.

KEY PLAYERS

MEB Provider - writes the NARSUM

IMR Provider (If applicable) - To ensure consistency and synchronization of effort

PEBLO - compile to case file

Soldier / Designated Legal Representative - must review

TIMELINE

Generated within MEB Phase (MEB Stage) by Provider

AUTHORITY/REFERENCES

HRC/PDA
OTSG
OPORD 12-31, Annex O and Annex I

ONLINE FORM LINK

http://www.hrc.army.mil/site/active/tagd/pda/IDES_MEB_Integrated_NARSUGuide_Book.docx

MFR for STR Non-Availability

PURPOSE

When a Soldier's complete Service Treatment Record (STR) is not available, the PEBLO provides the MSC a memorandum describing the actions taken to locate the missing records and the determination that the medical records are not available. (for more information on STRs, please see FAQ's in attachments tab)

KEY PLAYERS

PEBLO - prepares memorandum describing the actions taken to locate the missing records and the determination that the medical records are not available.

TIMELINE

MEB Phase

AUTHORITY/REFERENCES

DTM - 11 -015, 19 December 2011, Appendix 4 to Attachment 4, 2j-k / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), e. I-E(1)b-g

ONLINE FORM LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf Appendix 4 to Attachment 4 C (2)

Table Of Contents

VA Form 21-0819 VA/DoD Joint Disability evaluation Board Claim Form

Purpose

Used for IDES case initiation. Documents the medical conditions to be considered as the basis of fitness determiniations for which the Soldier does not meet medical retendion standards, and allows the Soldier to claim additional Service-connected medical conditions for VA entitlement to benefits.

Used by the Department of Veterans Affairs (VA) to document the Soldier's additional medical condition(s) that were service-incurred or aggravated but for VA's compensation claim purposes only, not the fit/unfit determination. If the Soldier declines to claim additional conditions during the initial education session or does not claim additional conditions beyond those noted in part 1 of VA Form 21-0819, within 3 working days of their initial MSC session, the MSC seeks annotation from the Soldier that he or she does not desire to file a claim for VA disability benefits or does not want to claim any additional disabilities.

Key Players

MTF's Medical Care Provider - provides medical conditions for inclusion in Section I, "Medical conditions to be considered as the basis of fitness for duty determination."

PEBLO/Case Coordinator - reviews form, ensures completeness, uses it to initiate the IDES case file, provides the form to the MSC.

Soldier - Completes Section II-VII with MSC assistance.

VA's Military Service Coordinator (MSC) - assists Soldier in completing Sections 2-7, utilizes for to initiate the case, populate VA systems and request appropriate C&P medical exams.

Timeline

Treatment (Section 1): Medical Provider initiates Soldier into IDES using the VA 21-0819 form.

MEB Phase (MEB Stage): VA 21-0819 forwarded to the MEB within 10 days of referral for AC (30 days for RC); form received by MSC.

MSC forwards the VA 21-0819 form back to the PEBLO within 10 days of receipt for AC (30 days for RC).

Authority/References

DTM - 11- 015, 19 December 2011, Appendix 6 to Attachment 4, 2a(1)-(3)b, Annex O to MEDCOM OPORD 12-31

Online Form Link

http://www.vba.va.gov/pubs/forms/VBA-21-0819-ARE.pdf

Reference Guide

Table Of Contents

OMB Approved No. 2900-0704
Respondent Burden: 30 minutes

Department of Veterans Affairs

VA DATE STAMP
(DO NOT WRITE IN THIS SPACE)

VA/DOD JOINT DISABILITY EVALUATION BOARD CLAIM

IMPORTANT - Please read the Privacy Act and Respondent Burden on the back before completing the form.

Section I: To be completed by Military Treatment Facility referring Service member to Disability Evaluation System *(DES)*

SERVICE MEMBER NAME *(First, middle, last)*	GRADE
COMPONENT	UNIT ADDRESS
SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM,DD,YYYY)
SEX ☐ MALE ☐ FEMALE	
NAME AND PHONE NUMBER OF ASSIGNED PHYSICAL EVALUATION BOARD LIAISON OFFICER *(PEBLO)* *(First, MI, Last)* *Include Area Code*	NAME OF REFERRING MILITARY TREATMENT FACILITY *(MTF)*
DATE OF REFERRAL TO MEDICAL EVALUATION BOARD *(MEB)* (MM,DD,YYYY)	
MEDICAL CONDITIONS TO BE CONSIDERED AS THE BASIS OF FITNESS FOR DUTY DETERMINATION *(List only conditions referred by physician):*	
PREPARED BY	DATE PREPARED

Section II: Tell us about yourself. Please provide a contact name and address. If you are on Temporary Duty, please indicate that on the VA Form 21-4138, Statement in Support of Claim available on the internet at www.va.gov/vaforms

1. WHAT IS YOUR ADDRESS?

Street address, rural route, or P.O. Box — Apt. number

City — State — ZIP Code — Country

2. WHAT ARE YOUR TELEPHONE NUMBERS? *(Include Area Code)*

Daytime _____

Evening _____

Cell phone _____

3. WHAT IS YOUR E-MAIL ADDRESS *(If applicable)*

4. HAVE YOU EVER FILED A CLAIM WITH VA?

☐ Yes ☐ No

(If "Yes," provide file number) _____ *(VA File Number)*

5. POINT OF CONTACT NAME AND ADDRESS

6a. DID YOU SERVE UNDER ANOTHER NAME?

☐ Yes *(If "Yes," go to Item 6b)* ☐ No *(If "No," go to Item 7)*

6b. PLEASE LIST OTHER NAME(S) YOU SERVED UNDER

7. I ENTERED THIS CURRENT PERIOD OF ACTIVE SERVICE ON

mo / day / yr

8. PLACE OF ENTRY

Section III: Tell us about your military service. Enter complete information for your service. Tell us about your reserve duty or National Guard Duty

9. ARE YOU CURRENTLY ASSIGNED TO AN ACTIVE RESERVE UNIT OR NATIONAL GUARD UNIT?

☐ Yes *(If "Yes," provide date of activation below)*

☐ No mo / day / yr

10a. WHAT IS THE NAME AND MAILING ADDRESS OF YOUR CURRENT UNIT?

10b. WHAT IS THE TELEPHONE NUMBER OF YOUR CURRENT UNIT? *(Include Area Code)*

( )

Reference Guide

11. ADDITIONAL CONDITIONS - *(Do you have any disabling conditions, other than those referred for the fitness for duty determination, that you feel were incurred in or aggravated by, your active military service? Please list those disabilities below.) (If you need additional space, please use VA Form 21-4138, Statement in Support of Claim available at www.va.gov/vaforms)*

12. DO YOU HAVE DEPENDENTS?

☐ YES ☐ NO *(If "Yes," please complete VA Form 21-686c, Declaration of Status of Dependents, available at www.va.gov/vaforms)*

Section IV: MILITARY RETIRED PAY

IMPORTANT - Unless you check the box in Item 13 below, you are telling us that you are choosing to receive VA compensation instead of military retired pay, if it is determined you are entitled to both benefits. If you are awarded military retired pay prior to compensation, we will reduce your retired pay by the amount of any compensation that you are awarded. VA will notify the Military Retired Pay Center of all benefit changes. If you receive both military retired pay and VA compensation, some of the amount you get may be recouped by VA, or in the case of Voluntary Separation Incentive (VSI), by the Department of Defense.

13. ☐ No I do not want VA compensation in lieu of military retired pay.

Section V: DIRECT DEPOSIT INFORMATION

Generally, all Federal payments are required to be made by electronic funds transfer (EFT) also called Direct Deposit. Please attach a voided personal check or deposit slip or provide the information requested below in Items 14, 15 and 16 to enroll in Direct Deposit. If you do not have a bank account we will give you a waiver from Direct Deposit, just check the box below in Item 14. The Treasury Department is working to make bank accounts available to you. Once these accounts are available, you will be able to decide whether you wish to sign-up for one of the accounts or continue to receive a paper check. You can also request a waiver if you have other circumstances that you feel would cause you a hardship to be enrolled in Direct Deposit. You can write to: Department of Veterans Affairs, 125 S. Main Street Suite B, Muskogee, OK 74401-7004, and give us a brief description of why you do not wish to participate in Direct Deposit.

14. ACCOUNT NUMBER *(Please check the appropriate box and provide the account number, if applicable)*

☐ Checking _____ ☐ Savings _____ ☐ I certify that I do not have an account with a financial institution or certified payment agent

15. NAME OF FINANCIAL INSTITUTION *(Please provide the name of the bank where you want your direct deposit)*	16. ROUTING OR TRANSIT NUMBER *(The first nine numbers located at the bottom left of your check)*

Section VI: CERTIFICATIONS AND SIGNATURE

I certify and authorize the release of information.
I certify that the statements in this document are true and complete to the best of my knowledge.

17. YOUR SIGNATURE *(Do NOT print)*	18. DATE SIGNED

Section VII: WITNESSES TO SIGNATURE

19a. SIGNATURE OF WITNESS *(If claimant signed above using an "X")*	19b. PRINTED NAME AND ADDRESS OF WITNESS
20a. SIGNATURE OF WITNESS *(If claimant signed above using an "X")*	20b. PRINTED NAME AND ADDRESS OF WITNESS

PRIVACY ACT NOTICE: The form will be used to determine allowance to compensation benefits (38 U.S.C. 5101). The responses you submit are considered confidential (38 U.S.C. 5701). VA may disclose the information that you provide, including Social Security numbers, outside VA if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 58VA21/22/28 Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records - VA, published in the Federal Register. The requested information is considered relevant and necessary to determine maximum benefits under the law. Information submitted is subject to verification through computer matching programs with other agencies. VA may make a "routine use" disclosure for: civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration. Your obligation to respond is required in order to obtain or retain benefits. Information that you furnish may be utilized in computer matching programs with other Federal or state agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs. Social Security information: You are required to provide the Social Security number requested under 38 U.S.C. 5101(c)(1). VA may disclose Social Security numbers as authorized under the Privacy Act, and, specifically may disclose them for purposes stated above.

RESPONDENT BURDEN: We need this information to determine your eligibility for compensation. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 30 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

Reference Guide

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Table Of Contents

IDES IT Systems
System Name (click to jump to fact sheet)
Veterans Tracking Application (VTA)
Medical Operating Data System (MODS)
eProfile (Electronic Profiling System)
eMEB (Electronic Medical Evaluation Board)
ePEB (Electronic Physical Evaluation Board)
Defense Medical Human Resource System-internet (DMHRSi)
Electronic Military Personnel Office (eMILPO)
Enlisted Distribution and Assignment System eDAS
Armed Forces Health Longitudinal Technology Application (AHLTA)
Composite Health Care System (CHCS)
Interactive Personnel Electronic Records Management (iPERMS)
Army Strategic Management System (SMS)
Medical Electronic Data Case History and Readiness Tracking (MEDCHART)
Transition Point Processing Center (TRANSPROC)

Reference Guide

VETERANS TRACKING APPLICATION (VTA)

PURPOSE

The VTA is the database of record for measuring timeliness and case volume. Searchable, downloadable database, customizable for any authorized use. VTA is accessed through the Veterans Information Portal. VTA provides information on training, user's guides, and many pre-formatted reports in the IDES Program Knowledge Center on the IDES Homepage (on VTA).

KEY PLAYERS

PEBLO/Contact Representative: Enters case within 3 days of referral and enters/updates required case data within 3 days of it becoming available (Initial entry creates the case ID used for tracking, including subsequent entry of the same case ID into eMEB). Maintains the PEBLO tab entries and utilizes other tabs to follow the case through the IDES process.

MSC: Maintain timely, complete and accurate case data in appropriate modules.

PEB: Enters eMEB case file data for IPEB, FPEB, and appeals and dispositions.

DRAS: Enters case status information on "RO/Rating Activity" tab, from PEB phase through Reintegration.

TIMELINE

MEB Phase: PEBLO Creates case in VTA, inputs all data requirements for the entries on the PEBLO Tab (all phases).

MSC uses system to track and update case status from MEB phase through Reintegration Phase.

PEB Phase: System is used by PEB to track and input case data of IPEB and FPEB.

Transition Phase and Reintegration: Continued use for tracking case to completion and close out of case after all actions are complete (automatic when DRAS enters separation data, or manual deactivation if case is terminated at any point in the process).

WEB LINK

https://vip.vba.va.gov/

MEDICAL OPERATING DATA SYSTEM (MODS)

PURPOSE

The Medical Operational Data System (MODS) is an MHSS objective system that provides the Army Medical Department (AMEDD) with an integrated automation system that supports all phases of Human Resource Life -Cycle Management in both peacetime and mobilization.

KEY PLAYERS

USAHRC & Northern, Southern, Western, Pacific Regional HRC Mangers: Use this system to process assignments, deletions and deferment of Soldiers.

ARNG HR: Use this system to create and validate requisitions and to add or modify requisitions.

USARC HR: Use this system to create and validate requisitions and to add or modify requisitions

Brigade Personnel Manager: Use this system to create and validate requisitions and to add or modify requisitions

Company Personnel Manager: Use this system to create and validate requisitions and to add or modify requisitions

TIMELINE

Treatment (Section 1): System is used by MTF Providers and clinical staff to enter those with profiles greater than 30 days using the e-Profile application.

MEB Phase: System is used to track those with a profile change from temporary to permanent and case has been submitted for an MEB

WEB LINK

http://www.mods.army.mil/

ePROFILE (ELECTRONIC PROFILING SYSTEM)

PURPOSE

e-Profile is a software application within the Medical Operational Data System (MODS) suite that allows global tracking of Army Soldiers who have a temporary or permanent medical condition that may render them medically not ready to deploy. It is a web-based application used to generate, approve and route physical profiles for the Army.

KEY PLAYERS

Refer to link for user defined role:

Https://medpros.mods.army.mil/eprofile/Public/RolesAndPermissions.aspx

USAHRC:

Brigade Personnel Manager

Company Personnel Manager

Physical Disability Agency (PDA)

PEB

PEBLO/Contact Rep

MTF Providers

MTF Clinical and Non-clinical administrative staff

Contact Representative

TIMELINE

Treatment (Section 1): Medical treatment provider issues profile on a DA 3349 through e-profile. Company-level commanders should review profiles at 60 days. Profiles reviews are conducted with Battalion-level commanders at 120 days, Brigade-level commanders at 180 days, and Division or Corps-level commanders at 240 days.

MEB Phase (Section 2): System is used by MEB Provider for profile modification when necessary, and

by PEBLO/Contact Rep to download the signed DA 3349 for the MEB case file.

PEB Phase: System is used by the PEB for profile modification when necessary.

WEB LINK

https://medpros.mods.army.mil/eprofile/

eMEB (Electronic Medical Evaluation Board)

Purpose

eMEB is the Army's official system of record for MEBs.

Key Players

PEBLO/Contact Representative: Assembles the IDES case file, enrolls the Soldier into system

MEB Providers: MEB convening authority reviews Medical Document Collection Objects (MDCOs)

Timeline

MEB Phase: PEBLO creates case identification number for tracking and uploads DA 5893.

Web Link

https://myforms.ecms.army.mil/wps/myportal

ePEB (Electronic Physical Evaluation Board)

Purpose

ePEB is used by the PEB and PDA to manage case files in the physical evaluation board process through the reintegration phase.

Key Players

PEB: Enter all data form eMEB for tracking Soldier's case file through PEB phase

Physical Disability Agency (PDA): PEB sends case file to PDA to approve findings.

PEBLO/Contact Rep: Track cases in ePEB after case has moved from eMEB through the ePEB portal. They update eMEB with data from ePEB as appropriate, and provide the PEB additional documents by uploading them into ePEB as necessary. Also download DA 199s or return memos.

Timeline

PEB Phase through Reintegration: System is used by the PEB and PDA for tracking of eMEB case file.

Web Link

https://medpros.mods.army.mil/eprofile/Public/About.aspx

DEFENSE MEDICAL HUMAN RESOURCE SYSTEM-INTERNET (DMHRSI)

PURPOSE

DMHRSi is a web-based tri-service human resources system. It is designed to provide ready access to essential manpower, personnel, labor cost assignment, education/training, and personnel readiness information across the Military Health System (MHS).

Requires CAC Access - for more information: http://www.ampo.amedd.army.mil/DMHRSi/DMHRSipages.html

Authorization for both Administrative and User accounts has to be approved at USAHRC level.

KEY PLAYERS

USAHRC & Northern, Southern, Western, Pacific Regional HRC Mangers: Uses system to Report personnel readiness.

ARNG HR: Uses system to report personnel readiness.

USARC HR: Uses system to report personnel readiness.

TIMELINE

Throughout the IDES process.

WEB LINK

https://sso.csd.disa.mil/amserver/email/updateemail.jsp

ELECTRONIC MILITARY PERSONNEL OFFICE (EMILPO)

PURPOSE

Electronic Military Personnel Office (eMILPO) is a Army Personnel Database accessible 24/7 by all echelons of field users through the World Wide Web. eMILPO provides the U.S. Army with a reliable, timely, and efficient mechanism for performing personnel actions and managing strength accountability. Provides visibility of the location, status and skills of soldiers both from a high level and a unit level.
Electronic Records Briefs (ERBs) are generated in eMILPO.

Requires CAC Access Authorization for both Administrative and User accounts has to be approved at USAHRC /ARNG HR / USARC HR level.

KEY PLAYERS

Human Resource Mangers: Uses system for performing personnel actions and managing strength accountability.

PEBLOs (where authorized access): Pull a PDF copy of the ERB for use in the IDES case file.

TIMELINE

Throughout the IDES process.

WEB LINK

https://emilpo.ahrs.army.mil/

Additional resource: eMILPO Field User's Guide - click or use the following web address:
https://g1arng.army.pentagon.mil/Pages/DisplayAnnouncement.aspx?AnnouncementID=19

ENLISTED DISTRIBUTION AND ASSIGNMENT SYSTEM EDAS

PURPOSE

EDAS supports the management of the enlisted force to include assignments, deletions, and deferments.

To obtain access to the Enlisted Distribution and Assignment System (EDAS), see your locally appointed HRC User Registration System (HURS)/Information Assurance Security Officer (IASO) assigned to your personnel service battalion.

KEY PLAYERS

USAHRC & Northern, Southern, Western, Pacific Regional HRC Mangers: Uses system for enlisted assignments and distribution functions.

ARNG HR: Uses system for enlisted assignments and distribution functions.

USARC HR: Uses system for enlisted assignments and distribution functions.

Brigade Personnel Manager: Uses system for enlisted assignments and distribution functions.

Company Personnel Manager: Uses system for enlisted assignments and distribution functions.

TIMELINE

Throughout the IDES prcoess.

WEB LINK

https://www.hrc.army.mil/

ARMED FORCES HEALTH LONGITUDINAL TECHNOLOGY APPLICATION (AHLTA)

PURPOSE

AHLTA, the military's electronic health record (EHR) is the clinical documentation engine for the Physicians to write their notes, put in orders, document procedures performed and provide the basis of medical coding information.

KEY PLAYERS

MTF Providers: Uses system to write their notes, put in orders, document procedures performed.

MTF Clinical and Non-clinical administrative staff: Uses system to provide the basis of medical coding information

PEBLO/Contact Rep: Uses the system to gather medical treatment records to develop member's case file.

TIMELINE

Treatment (Section 1): System is used by MTF Providers and Clinical staff to write notes, put in orders, document procedures performed.

MEB Phase: System is used by PEBLO and Contact reps to gather medical treatment records to develop members case file.

PEB Phase: System is used by PEBLO and Contact reps to gather medical treatment records to develop members case file.

WEB LINK

http://dhims.health.mil/products/garrison/ahlta.aspx

Composite Health Care System (CHCS)

Purpose

The Composite Health Care System allows clinicians to electronically perform patient appointment processes and scheduling, order laboratory tests and specialty consults, authorize radiology procedures and prescribe medications.

CHCS serves as the foundation for the Department of Defense's electronic health record, AHLTA. Through the EHR, CHCS enables DOD providers to document patient's health information and history, electronically order laboratory and radiology tests/services, retrieve test results and order and prescribe medications. CHCS's Computerized Physician Order Entry function continues to safeguard the care provided to our beneficiaries by reducing the risk of illegible orders and performing drug interaction and appropriateness checks.

Key Players

MTF Providers: Uses system to electronically perform patient appointment processes and scheduling, order laboratory tests, authorize radiology procedures and prescribe medications.

MTF Clinical and Non-clinical administrative staff: Uses system to electronically perform patient appointment processes and scheduling, order laboratory tests, authorize radiology procedures, and prescribe medications.

PEBLO: Uses the system to gather medical treatment records to develop members case file.

Contact Representative: Uses the system to gather medical treatment records to develop members case file.

Timeline

Treatment (Section 1) :MTF Providers and MTF Clinical staff uses system to electronically perform patient appointment processes and scheduling, order laboratory tests, authorize radiology procedures and prescribe medications.

MEB Phase and PEB Phase: PEBLO and Contact Representative use the system to gather medical treatment records to develop members case file.

Web Link

http://dhims.health.mil/products/garrison/chcs.aspx

INTERACTIVE PERSONNEL ELECTRONIC RECORDS MANAGEMENT (IPERMS)

PURPOSE

Interactive Personnel Electronic Records Management System (iPERMS) is a system used by Soldiers and HR professionals to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF). It provides web-based access with a unified user interface that provides encrypted, end-to-end, secure, remote access to, input to, and retrieval of, documents from a Soldier's Army Military Human Resource Record (AMHRR) and DA photo. iPERMS requires Internet Explorer 5.0 or above or Netscape 4.7 or above, though Microsoft Internet Explorer (IE) 6.0 or above is the preferred browser. Cookies and JavaScript should both be enabled and access is CAC enabled. Only accessible by HRC Command.

KEY PLAYERS

USAHRC & Northern, Southern, Western, Pacific Regional HRC Mangers: Uses system to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF) to input to, and retrieval of, documents from a Soldier's Army Military Human Resource Record (AMHRR) and DA photo.

ARNG HR: Uses system to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF) to input to, and retrieval of, documents from a Soldier's AMHRR and DA photo.

USARC HR: Uses system to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF) to input to, and retrieval of, documents from a Soldier's AMHRR and DA photo.

Brigade Personnel Manager: Uses system to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF) to input to, and retrieval of, documents from a Soldier's AMHRR and DA photo.

Company Personnel Manager: Uses system to maintain a secure (PKI) record of a Soldier's Official Military Personnel File (OMPF) to input to, and retrieval of, documents from a Soldier's AMHRR and DA photo.

TIMELINE

System is used by HR personnel throughout the IDES process

WEB LINK

Only accessible by USAHRC - https://iperms.hrc.army.mil/rms/login.jsp

Note - Veterans (separated or retired) may obtain access to their own personal AMHRR by logging into the e-benefits portal at www.ebenefits.va.gov

ARMY STRATEGIC MANAGEMENT SYSTEM (SMS)

PURPOSE

The Strategic Management System (SMS) is a performance management tool available to all Army organizations and components. Available since 2006, SMS is a web-based application secured through CAC authentication that meets Army needs to track performance and mission objectives on both classified and unclassified networks. Organizations define strategy via their core mission, strategic goals and objectives and then SMS provides the framework necessary for leaders to maintain situational awareness of strategic performance. SMS also has the ability to automatically connect to authoritative data sources and decrease the amount of organizational effort devoted to information gathering which allows users to instead focus efforts on analysis and resource allocation.

Requires CAC Access

KEY PLAYERS

Regional Medical Centers (RMC): Uses system as performance management tool to maintain situational awareness of strategic performance.

TIMELINE

Throughout the IDES process

WEB LINK

http://www.sms.army.mil

Medical Electronic Data Case History and Readiness Tracking (MEDCHART)

PURPOSE

is a NG system that was developed as a customizable, centralized approach to manage all aspects of a Soldier's medical readiness information and care history. The electronic Medical Management Processing System (eMMPS) application is a module of MED-CHART. The Electronic Medical Management Processing System (eMMPS) application is used by the Army National Guard to administer and manage the following medically-related personnel actions: Line of Duty (LOD), Incapacitation Pay (INCAP), Appeal, Post Deployment Health Re-Assessment (PDHRA) referral, Military Medical Support Office (MMSO) Pre-authorization, Active Duty Orders Process (ADOP), and executive reporting across commands. Each action is a module within the eMMPS application. eMMPS is a web-accessible, comprehensive, data interface/repository, and user-friendly tool to facilitate case handling and documentation. The built-in workflow control elements provide users the ability to easily forward cases to the next appropriate reviewing authority, which assists in a timely review process from case creation through determination. Supporting documentation can be captured, sorted, stored, and retrieved through the eMMPS platform. Automated templates, blank documents, checklists, and policies are readily available for eMMPS users. The eMMPS application adheres to DoD security policies and the Health Information Portability Accountability Act (HIPAA) by requiring Common Access Card (CAC) authentication, permission-specified user roles, government-purchased digital signature software, and an accounting of all actions. PII and PHI is available on a need-to-know basis. For auditing, all transaction entries are time stamped.

The LOD module LOD module provides LODs processed for National Guard Soldiers.
(*note, it is expected that the USAR will also utilize the LOD module in the near future, and potential additional use is being considered.)

Pre-MEB module is utilized by Compo-2 when preparing a Soldiers casefile in order to submit to the RC-SMSC for IDES processing.

KEY PLAYERS

Army National Guard *

TIMELINE

Phase 1 (MEB Stage)

AUTHORITY/REFERENCES

G1 ARNG

WEB LINK

https://g1arng.army.pentagon.mil/Systems/LODModule

Transition Point Processing System (TRANSPROC)

PURPOSE The Transition Point Processing System (TRANSPROC) is used by military personnel offices and military transition centers. The system produces DD Form 214 (Certificate of Release from Active Duty or Discharge). TRANSPROC is used by all Army components, to include the Army National Guard. The system also interfaces with the Defense Finance and Accounting System (DFAS) to stop active duty pay and start Reserve Component or Retiree pay.

Requires CAC Access

KEY PLAYERS

Military personnel offices and military transition centers.

TIMELINE

Throughout the IDES process.

WEB LINK

https://g1arng.army.pentagon.mil/Systems/TRANSPROC/Pages/default.aspx

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

Policy/Guidance

Forms

Systems

Counseling/Appointments

Soldier Options (Appeals, IMRs, Reconsideration)

Upon meeting criteria for entry into IDES, initial contact with the Soldier is made by the PEBLO/Contact Representative to schedule an initial PEBLO counseling session.
This section covers sessions where the Soldier receives and/or provides information through interaction with an IDES representative or other sources requiring Soldier attendance. The emphasis here is on direct IDES requirements, users must stay informed of local non-IDES requirements for Soldiers in transition. (Soldier and Family should be prepared for potential separation from service as early in the process as possible.)

Table Of Contents

Counseling/Appointments	
Title (Click to jump to the Fact Sheet)	**Final Timeline**
Initial PEBLO Counseling	MEB Phase (Section 2 in this guide)
Soldier and Family-Centered Multi-Disciplinary Orientation Meeting	MEB Phase (Section 2 in this guide)
Initial MSC Counseling	MEB Phase (Section 2 in this guide)
DA Form 199 / DA Form 199 - 1 Record of Proceeding / DA Form 199 - 2 Record of Proceeding of Army Physical Disability Appeal Board (APDAB) (Review of IPEB / FPEB / Appeal Findings)	PEB Phase (Section 3 in this guide)
MEB and PEB Counseling	MEB Phase (Section 2 in this guide)
MSC Exit Interview Counseling	Transition and Integration Phase (Section 4 in this guide)
Soldier MEB Counsel (SMEBC) Legal Counseling	MEB Phase (Section 2 in this guide)
Continuation on Active Duty (COAD)/Active Reserve (COAR) Counseling	PEB Phase (Section 3 in this guide) Transition and Integration Phase (Section 4 in this guide)
SPEBC Legal Counseling	PEB Phase (Section 3 in this guide)
Review of MEB Election Options	MEB Phase (Section 2 in this guide)
Independent Medical Review (IMR)	MEB Phase (Section 2 in this guide)
Compensation and Pension Exam Appointments	MEB Phase (Section 2 in this guide)

Reference Guide

INITIAL PEBLO COUNSELING

PURPOSE

The Initial PEBLO counseling session coupled with the DA Form 5893 "Soldier's Medical Evaluation Board/Physical Evaluation Board Counseling Checklist", provide the framework to help manage Soldier expectations throughout the process, while allowing them visibility of the DES process in an easy to follow format.

DA Form 5893 is initiated and explained by the PEBLO during the Soldier's initial counseling session and utilized throughout the DES process to ensure Soldiers are properly counseled and informed throughout each phase. The Soldier acknowledges understanding of the process within each phase by initialing and signs the form for inclusion with their final PEB election. The PEBLO acknowledges having informed the Soldier of all relevant information through each phase of the process by initialing and also signs the form.

KEY PLAYERS

PEBLO (counsel Soldier (or legal guardian, when appropriate) throughout physical disability processing)

Soldier or Soldier's Designated Legal Representative (acknowledge understanding, ask questions and sign DA 5893)

OWNER(S)

PEBLO

TIMELINE

MEB Phase

AUTHORITY/REFERENCES

DTM - 11 -015,19 December 2011, Appendix 4 to Attachment 4, 2.a.(2) - (5) / AR 635-40, Chapter 3, 3-8(a) & AR 635-40 Appendix C, C-1-C-4; C-16

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf
http://www.apd.army.mil/pdffiles/r635_40.pdf

Soldier and Family-Centered Multi-Disciplinary Orientation Meeting

PURPOSE

A multidisciplinary meeting will be provided for Soldier orientation to IDES and expectation management. This multidisciplinary meeting will include, at a minimum, PEBLO leadership, an MEB provider, and representation from the Soldier's MEB Counsel.
It is strongly encouraged that an MSC representative and a member of Soldier's chain of command also attend. This multidisciplinary meeting will ensure that:
(a) Soldiers and MEB team members know each other.
(b) Soldiers and MEB team share contact information.
(c) The MEB team establishes expectations for the MEB Process.
(d) The MEB team clearly communicates that all Soldiers in the MEB process have continued access to medical services (including Behavioral Health).

KEY PLAYERS

PEBLO and Contact Representative (coordinates the meeting and ensures Soldier is aware that family is encouraged to attend)

Soldier or Soldier's Designated Legal Representative (acknowledge understanding, ask questions and follow instructions provided.)

OTHER Presenters - as outlined above and/or in current policy

OWNER(s)

PEBLO

TIMELINE

MEB Phase - within 14 days of initiation of the MEB

AUTHORITY/REFERENCES

OPORD 12-31 - FRAGO 1 and FRAGO 8, Annex O

WEB LINK

https://www.us.army.mil/suite/files/35786119

Table Of Contents

INITIAL MSC COUNSELING

PURPOSE

MSCs provide the link between the Soldier and VA by keeping the Soldier, Veteran, and the PEBLO informed of VA role in MEB/PEB processes.

KEY PLAYERS

MSC (Inform the Soldier of his or her rights and VA actions in the IDES process)

Soldier or Soldier's Designated Legal Representative (acknowledge understanding, ask questions)

OWNER(S)

MSC

TIMELINE

MEB Phase

AUTHORITY/REFERENCES

DTM - 11 -015, 19 December 2011, Appendix 6 to Attachment 4, 2.a(1).- (3)b

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Reference Guide

Table Of Contents

PEBLO Counseling on DA FORM 199 (Including both 199-1 and 199-2) RECORD OF PROCEEDING OF ARMY PHYSICAL DISABILITY APPEAL BOARD (APDAB) (REVIEW OF IPEB / FPEB / APPEAL FINDINGS)

PURPOSE

The PEBLO will provide counseling at the following stages of case processing: Upon referral of the Soldier's case to a MEB; When approved findings and recommendations of the MEB are received by the Soldier or next-of-kin; When the findings and recommendations of the PEB informal hearing are received by the Soldier or next-of-kin; When the Soldier demands a formal PEB hearing; After the PEB president announces the findings and recommendation of the formal hearing; When the USAPDA informs the Soldier or next-of-kin of a proposed modification to the findings and recommendations of the PEB; When the results of an appeal to the APDAB are received by the Soldier or next-of-kin.

KEY PLAYERS

PEBLO (informs Soldier of PEB outcome and any subsequent changes, refers Soldier to SMEBC/SPEBC or legal representative for counseling as appropriate)

Soldier or Soldier's Designated Legal Representative (records his or her election to the informal PEB findings and recommendations on DA Form 199, section IX. The Soldier has 10 calendar days from the date of receiving the informal PEB determinations to make his or her elections)

OWNER(S)

PEBLO & PEB Administrator

TIMELINE

PEB Phase

AUTHORITY/REFERENCES

DTM - 11 -015, 19 December 2011 / AR 40-400, Chapter 7,7-18a. / AR 635-40, Chapter 4. 4-20d / AR 635 - 40, Appendix C, Section 1, C - 3a(1) - (7)

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

http://www.apd.army.mil/pdffiles/R40_400.pdf

http://www.apd.army.mil/pdffiles/r635_40.pdf

Reference Guide

MEB and PEB Counseling

Purpose

MEB Counseling - The PEBLO will review the MEB Findings and counsel the Soldier on MEB election options when the MEB Approving Authority approves the case file (and, if applicable, when the MEB Appellate Authority approves the post-appeal DA 3947) (DTM 11-015 Appendix 4 to Attachment 4).

PEB Counseling - The PEBLO will counsel the Soldier on PEB Findings and proposed VA ratings (DA Form 199) utilizing the Soldier's Medical Evaluation Board/Physical Evaluation Board Counseling Checklist (DA Form 5893). The PEBLO will also counsel the Soldier on their election options (DTM 11-015 Appendix 4 to Attachment 4).

DA Form 5893, MEB/PEB Counseling Checklist, is used to document the Soldier's attendance and understanding of each of the appropriate sessions.

Key Players

PEBLO (review the MEB findings (DA Form 3947) with the Soldier and/or Designated Legal Representative)

Soldier or Soldier's Designated Legal Representative (sign to acknowledge understanding, ask questions, if any)

MEB Provider (review the NARSUM)

Owner(s)

PEBLO & MEB Provider

Timeline

MEB Phase

Authority/References

AR 40-400, Chapter 7, 7-10 i.1 / DTM - 11 - 015, 19 December 2011, Appendix 4 to Attachment 4, 2i. / AR 635-40, Chapter 3, 3-8a(1)-a(8). Please see Guidebook for MEB and PEB Counseling References under PEBLO Responsibilities.

Web Links

http://www.apd.army.mil/pdffiles/R40_400.pdf

http://www.apd.army.mil/pdffiles/r635_40.pdf

MSC Exit Interview Counseling

Purpose

The MSC conducts an exit interview with the Soldier before the Soldier departs the installation. Within 3 days of receiving notification of the Soldier's separation date, the MSC advises the Soldier on his or her appeal rights for disability ratings and other post-separation VA processes.

Key Players

MSC (conducts an exit interview with the Soldier before the Soldier departs the installation)

Soldier or Soldier's Designated Legal Representative (attends exit interview and provides any additional information)

Owner(s)

MSC

Timeline

Phase 3

Authority/References

DTM - 11 - 015, Appendix 6 to Attachment 4, 2.g & h

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Table Of Contents

Soldier MEB Counsel (SMEBC) Legal Counseling

Purpose

The Soldier has an opportunity to request and receive free appointed military legal counsel at every step of the IDES process from referral through final determination. The Soldiers' MEB Counsel (SMEBC) assist Soldiers from IDES Referral up to and including the Informal PEB election.

SMEBC personnel inform, assist, and advocate for Soldiers. They may assist with the VA 21-0819, IMR requests, MEB and IPEB rebuttals (appeals), and VA rating reconsideration requests. SMEBC staff work with Soldiers to manage expectations, provide independent legal advice and assist in goal formation as early as possible the IDES process.

Key Players

PEBLO (Assist the Service member with the administrative portion of preparing a rebuttal to his or her IPEB finding)

Soldier or Soldier's Designated Legal Representative (acknowledge and sign)

SMEBC (counsel Soldier on his or her procedural rights)

Owner(s)

PEBLO, SMEBC

Timeline

MEB Phase

Authority/References

DTM 11-015, December 19, 2011

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

For more legal information:

https://www.jagcnet.army.mil/8525740300753073

Reference Guide

COAD/COAR Counseling

Purpose

When the PEBLO has a case of an active Army Soldier with 18 years but less than 20 years of active service, or an RC Soldier with 18 but less than 20 years of qualifying service, a declination to request a COAD or COAR, as applicable, should be in writing and attached to the MEB proceeding. If the Soldier refuses to indicate in writing his declination of COAD or COAR, the PEBLO will prepare and sign a statement that he or she counseled the Soldier on continuation, and the Soldier declined to request continuation.

Key Players

PEBLO (counsel Soldier throughout physical disability processing)

Soldier or Soldier's Designated Legal Representative (ask questions during case processing)

Owner(s)

PEBLOs, PEBs, DCS G-1(Wounded Warriors Program), AHRC-EPO-A (Compo 1 enlisted), AHRC-OPL-R (Compo 1 & 2 officers on the active duty list), DACH-PEZ (Compo 1 Chaplains), ARNG–HRP (Compo 3), USAPDA

Timeline

PEB Phase and Transition and Reintegration Phase

Authority/References

AR 635-40, RAR 20 March 2012, Chapter 6, 6-8a-b & AR 635-40, Appendix C, C-3a(1)-a(7)

Web Link

http://www.apd.army.mil/pdffiles/r635_40.pdf

SPEBC Legal Counseling

Purpose

The Soldier has an opportunity to request and receive free appointed military legal counsel at every step of the IDES process from referral through final determination. The Soldiers' PEB Counsel (SPEBC) assist with both Formal PEB review and post-FPEB appeals, when applicable. OSC staffs do not provide legal advice to Commanders, the MEB or the PEB.

SPEBC personnel represent Soldiers at Formal PEB hearings, prepare any post-PEB appeals, and assist in preparing VA Rating Reconsideration requests. SPEBC also prepares appeals before the Army Board for Correction of Military Records (ABCMR) or the DoD Physical Disability Board of Review (PDBR). (AR 635-40)

Key Players

Soldier or Soldier's Designated Legal Representative (will be present, conform to all procedural rules)

SPEBC (PEB Legal Counsel, other military counsel, Civilian counsel (will represent the Soldier at no expense to the Government), accredited veteran's service organization)

Owner(s)

PEBLO & SPEBC

Timeline

PEB Phase

Authority/References

AR 635-40, Chapter 4, 4-21,h(1)-h(3)

Web Link

http://www.apd.army.mil/pdffiles/r635_40.pdf

For more legal information:
https://www.jagcnet.army.mil/8525740300753073

REVIEW OF MEB ELECTION OPTIONS

PURPOSE

If the Soldier is located in the vicinity of the MTF, he or she will be advised of the approved findings (DA Form 3947) by the PEBLO and asked to check the appropriate box. If the Soldier disagrees with the findings, he or she will be asked to prepare a statement citing reasons for disagreement. The statement will be attached. The Soldier is authorized 5 days to decide his or her election. Extensions of time beyond 5 days may be granted for reasonable cause such as desire to consult with legal counsel. If the Soldier does not make an election, the case will be forwarded as if approved by the Soldier. When the Soldier is not at the MTF, a certified letter will be sent by the MTF advising the Soldier of the board's recommendations and requesting a written reply indicating his or her agreement or disagreement. The letter will indicate that the Soldier has 5 days following receipt of the letter to forward his or her election to the MTF. If the Soldier agrees and has completed MEDCOM Form 756, Medical Record Consent Form, the PEBLO can notify the member by e-mail.
Extensions of time beyond 5 days may be granted for reasonable delays. MEB processing, receipt of the Soldier's election and forwarding to the PEB is completed at the originating MTF. If the Soldier does not make an election, the case will be forwarded as if approved.

DA Form 3947 (Medical Evaluation Board Proceeding) is used.

KEY PLAYERS

PEBLO (review and check all entries for completeness and accuracy, ensure medical terminology is explained, confirm that the NARSUM is accurate)

Soldier or Soldier's Designated Legal Representative (ensure all medical conditions and physical defects appear in the report, and whether they have been adequately described.

OWNER(S)

PEBLO

TIMELINE

MEB Phase

AUTHORITY/REFERENCES

AR 40-400, Chapter 7, 7-10, i(1) - (2) / AR 635-40, Appendix C, C-6, c(1-4) / DTM 11-015, December 19, 2011

WEB LINK

http://www.apd.army.mil/pdffiles/r40_400.pdf

Impartial Medical Review (IMR)

PURPOSE

When requested, a physician who is independent of the MEB* will review a Soldier's MEB records and counsel them on the MEB findings and recommendations. The IMR is an important component of due process in IDES that promotes transparency and builds Soldier trust and satisfaction. It is distinct from the MEB Rebuttal and PEB Appeal processes and should focus on ensuring all relevant medical diagnoses have been considered.

*The IMR reviewer(s) cannot be one of the signature authorities for the Soldier's MEB, and/or NARSUM process. The IMR reviewer may be one of the treating providers and should have expertise in evaluating the condition(s) under review and have familiarity with the IDES process.

KEY PLAYERS

IMR provider - must complete the review and return the case to the PEBLO within 5 days

PEBLO (inform the Service member of his or her right to an IMR)

Soldier or Soldier's Designated Legal Representative (provides additional documentation or evidence that existing treatment records were not included) - decide whether to request an IMR within 5 days of receiving the MEB result (to include completed VA disability evaluation results).

TIMELINE

MEB Phase

AUTHORITY/REFERENCES

DTM - 11 -015, 19 December 2011, Appendix 4 to Attachment 4, 2j-k / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), e. I-E(1)b-g

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Compensation and Pension Exam Appointments

Purpose

Within 10 days of receiving the Soldier's IDES case file from the PEBLO, the MSC will request a VA C&P disability examination using the VA Compensation and Pension Record Interchange (CAPRI), the Veterans Examination Request Information System (VERIS), or other appropriate systems as required and agreed to by the ASD(HA) and VBA.

Key Players

MSC (request a VA C&P disability examination)

Soldier or Soldier's Designated Legal Representative (attend appointment)

PEBLO (monitor the Service member's completion of IDES appointments)

Soldier's Unit (ensure Soldier attend all IDES appointments)

Owner(s)

PEBLO, MSC & Unit Commander

Timeline

MEB Phase

Authority/References

DTM - 11 -015, 19 December 2011, Appendix 4 to Attachment 4, 2j-k / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), e. I-E(1)b-g

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

Table Of Contents

SECTION 5: CROSS-REFERENCED ITEMS BY CATEGORY

Policy/Guidance
Forms
Systems
Counseling/Appointments
Soldier Options (Appeals, IMRs, Reconsideration)

Options at Election (MEB)
Independent Medical Review
Rebuttal/Appeal
Request Formal PEB
Election (IPEB)
Formal PEB Appeal
VA Ratings Reconsideration Request

OPTIONS AT ELECTION (MEB)

PURPOSE

A member is notified by the PEBLO of the results of an MEB, the members options include:
- Agree with the findings and sign the DA Form 3947
- Ask for an Independent Medical Review (IMR) and / or Appeal (see Fact Sheets on each)
- Request an extension
- Disagree with findings, sign (submit appeal as an enclosure for the case file)
- Take no action (refuse to sign)

If the patient is located in the vicinity of the MTF, he or she will be advised of the approved findings (DA Form 3947) by the PEBLO and asked to check the appropriate box to indicate their agreement with the findings or to signal their intent to request an IMR or Appeal.
The patient is authorized 5 days to make his or her election. Extensions of time beyond the 5 days may be granted for reasonable cause - such as desire to consult with legal counsel.
If the patient does not make an election, and does not indicate a desire to have an IMR or Appeal, the case will be forwarded as if approved by the member.

When the patient is not at the MTF, a certified letter will be sent by the MTF advising the member of the board's results and requesting a written reply indicating his or her agreement or disagreement. The letter will indicate that the member has 3 working days following receipt of the letter to return the election to the MTF. If the Soldier agrees, and has completed MEDCOM Form 756, Medical Record Consent Form, the PEBLO may sent the MEB file to the Soldier by e-mail.
Extensions of time beyond 3 working days may be granted for reasonable delays.
MEB processing, receipt of the Soldier's election and forwarding to the PEB is completed at the originating MTF. If the member does not make an election, the case will be forwarded as if it were approved. If the Soldier decides to appeal the MEB decision (within the alloted time), an additional 7 days is allowed to prepare the rebuttal (starting immediately after the date of election).

KEY PLAYERS

PEBLO: PEBLO creates the MEB Proceedings Form (DA Form 3947) based on Section 4 of the Integrated NARSUM; PEBLO counsels Soldier on election options; Routes completed case file to PEB or notifies unit and MSC of RTD determination.

Soldier / Soldier's Assigned Legal Representative: Soldier consults with legal counsel; Soldier makes election on MEB findings; Soldier elects an Independent Medical Review (IMR) to review case completeness; Soldier elects an appeal to review case conclusions.

TIMELINE

MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).

AUTHORITY/REFERENCES

AR 40-400, Chapter 7, 7-10i(1) /DTM 11-015, December 19, 2011

WEB LINK

http://www.apd.army.mil/pdffiles/R40_400.pdf

Independent MEDICAL REVIEW (IMR)

PURPOSE

Within 5 days of receiving the completed and signed MEB results, to include completed VA disability evaluation results, submit to the PEBLO, if desired, request(s) for an independent medical review (IMR).

KEY PLAYERS

PEBLO: PEBLO counsels Soldier on election options.

Soldier / Soldier's Assigned Legal Representative: Can request IMR within 5 days to receive an independent clinical review of the MEB case for completeness.

IMR Provider: Reviews the final MEB packet to make sure all diagnoses and notes have been accurately recorded on the NARSUM and the DA Form 3947. This review must be completed and returned to the PEBLO within 5 days.

TIMELINE

MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).

AUTHORITY/REFERENCES

DTM - 11 -015, December 19, 2011, Appendix 4 to Attachment 4, 2j-k / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), e. I-E(1)b-g

WEB LINK

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

MEB Rebuttal / Appeal

Purpose

Within 5 days of receiving the completed and signed MEB results, to include completed VA disability evaluation results, submit to the PEBLO, if desired, a request to appeal. The Service member has 7 days to prepare the rebuttal (after submitting the request to appeal). The Service member or representative may request an extension of time to prepare the IMR or MEB rebuttal, which shall be granted by the MEB convening authority when good cause is shown.

Key Players

PEBLO: Routes complete case file to PEB or notifies unit and MSC of RTD determination.

Soldier / Soldier's Assigned Legal Representative: Soldier has 5 days to elect to appeal the MEB findings, and has 7 days from the time of that election to submit a written rebuttal, frequently called an Appeal, to the MEB Appellate Authority.

Appellate Authority: Has 5 days to review the case and send a response to the PEBLO.

Approval Authority: Another senior physician within the MTF designated as the MEB Approval Authority; this will ensure the integrity of the proceedings and due process for the Soldier.

Timeline

MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).

Authority/References

DTM - 11 -015, December 19, 2011, Appendix 4 to Attachment 4, 2j-k / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), e. I-E(1)b-g

Web Link

http://www.dtic.mil/whs/directives/corres/pdf/DTM-11-015.pdf

REQUEST FORMAL PEB

PURPOSE

Whenever more than one hearing (including a reconsideration) is held on a case, a copy of the DA Form 199 for each hearing will be attached to the final DA Form 199 to reflect and explain the multiple considerations. For example, a copy of an informal board's DA Form 199 attached to the copy of the formal board's DA Form 199 will record the Soldier's demand for a formal hearing without further comment or explanation.

DA Form 199, section IX is used.

KEY PLAYERS

Soldier /Soldier's Assigned Legal Representative: The Soldier has 10 days to make an election on the IPEB findings. If the Soldier disagrees with the fitness decision, they may non-concur with the fitness decision and/or request a Formal PEB.

PEBLO: The Soldier is notified of the findings by the PEBLO and counseled on their election options.

FPEB: The Formal PEB (FPEB) consists of a panel of medical and non-medical adjudicators.

USAPDA: The USAPDA has the authority to issue revised findings or return a case to the PEB for reconsideration if the PDA determines that the evidence of record does not support the PEB findings and recommendations.

TIMELINE

PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).

AUTHORITY/REFERENCES

AR 635-40, 8 February 2006/RAR 20 March 2012, Chapter 4, 4-20, e(7)

WEB LINK

http://www.apd.army.mil/pdffiles/r635_40.pdf

ELECTION

(CONCUR OR NON-CONCUR WITH IPEB FINDINGS)

PURPOSE

Concur or Non-Concur with PEB findings. The Soldier records his or her election to the informal PEB findings and recommendations on DA Form 199, section IX. The Soldier has 10 calendar days from the date of receiving the Informal PEB determination to make his or her election.

DA Form 199, section IX

KEY PLAYERS

PEBLO: Counsels Soldier on Informal PEB findings and election options.

Soldier / Soldier's Assigned Legal Representative: Soldier consults with legal counsel; Soldier may non-concur with Informal PEB determination; Soldier may request a Formal PEB if the Soldier disagrees with the Informal PEB fitness determination.

TIMELINE

PEB Phase: PEB Phase (120 DAYS) Informal PEB Stage (15 DAYS)

AUTHORITY/REFERENCES

AR 40-400, 27 January 2010, Chapter 7, 7-10i(1)

WEB LINK

http://www.apd.army.mil/pdffiles/r635_40.pdf

FORMAL PEB (FPEB) APPEAL

PURPOSE

- Consideration of rebuttal.

(1) After considering the Soldier's rebuttal to the revised findings, USAPDA will make one of the following determinations:

(a) Accept the rebuttal; issue new findings and recommendations according to the rebuttal; and forward the case to USAHRC for final action.

(b) Concur with the original recommendations of the PEB; forward the case to USAHRC for final action.

(c) Adhere to the revised findings and recommendations and forward the case to APDAB.

(2) The USAPDA will inform the Soldier in writing of the results of its consideration of the rebuttal.

- Soldier's election to revised findings. The Soldier records his or her election to revised findings on DA Form 199–2, section X. If the Soldier fails to submit an election within the allotted time, USAPDA will deem that the Soldier has waived his or her right to file a rebuttal and take final action on the case.

The official board that evaluate a Soldier fit or unfit for military service.

DA Form 199 - 2 is used.

KEY PLAYERS

Soldier / Soldier's Assigned Legal Representative: The Soldier records his or her election to revised findings on DA Form 199–2, section X.

USAPDA: If the case file is to be forwarded to APDAB for appeal action, USAPDA will prepare a cover letter explaining the reasons for referral and note that final decision is deferred to the APDAB.

APDAB: It reviews cases forwarded by the CG, USAPDA. The APDAB will determine if Findings and recommendations of the PEB, as changed or modified by the CG, USAPDA are supported by the evidence.

TIMELINE

PEB Phase: Formal PEB Appeal Stage (30 DAYS)

AUTHORITY/REFERENCES

AR 635-40, 8 February 2006/RAR 20 March 2012, Chapter 4, 4-25

WEB LINK

http://www.apd.army.mil/pdffiles/r635_40.pdf

VA Rating Reconsideration Requests

Purpose

The Soldier may submit a written request for reconsideration for each unfitting condition.

Key Players

Soldier: The Soldier may submit a written request for reconsideration for each unfitting condition. In order for the rating to be reconsidered by DRAS, additional medical evidence must be submitted with the request.

PEBLO: Within 72 hours of receipt , the PEBLO will inform and counsel the Soldier of the IPEB findings and their election options.

VA DRAS: Has 15 days to deliver the rating reconsideration findings to the PEB.

Timeline

PEB Phase: FPEB Stage (120 DAYS) DRAS Reconsideration (15 DAYS).

Authority/References

DTM - 11 -015, December 19, 2011, Appendix 4 to Attachment 4, 2*j-k* / Annex O (MEB Phase Implementation Guidance) to OPORD 12-31(MEDCOM IMPLEMENTATION of the INTEGRATED DISABILITY EVALUATION SYSTEM), *e. I-E(1)b-g.*

Web Link

http://www.apd.army.mil/pdffiles/r635_40.pdf

Table Of Contents

SECTION 6: SPECIAL CIRCUMSTANCES AND DISENROLLMENT CRITERIA

Component-Specific Processes

OCONUS Cases

Disenrollment Criteria

Table Of Contents

Component 2 (Army National Guard) and Component 3 (Reserve Component) Variations	
	Description
Timeline	**Component 2 (Army National Guard) and Component 3 (Reserve Component) Variations in Timeline:** In the MEB Phase, the timeline for the Referral Stage and Claim Development Stage include an additional 20 days each. There is no Reintegration time allotted for Component 2 or 3.
Processing	**For Soldiers in Compo 2 or 3 who are not on Active Duty**, the initial documents for the MEB packet are initiated at the Reserve Component Soldier Medical Support Center (RC SMSC) IDES cases are referred to the RC SMSC by the state/ARMMC/HRC profiling authority. These authorities verify the Soldier has reached MRDP by signing the P3/P4 profile as the approving authority (second signature authority) and completing Part 1 of VA Form 21-0819. The profiling authority transmits the case to the RC SMSC and the Medical Evaluation Board Tracking Office (MEBTO) with a MEBTO Request Form within 72 hours. The RC-SMSC will send an email notification to SAMH.MEBTO@AMEDD.ARMY.MIL, SUBJECT: Remote Board Processing, and attaches the completed MEBTO Request Form (see Appendix 1) and the signed Medical Evaluation Board Remote Operating Center (MEBROC) Integrated Disability Evaluation System (IDES) Solider Acknowledgement Form for action (see Appendix 2). The MEBTO will determine the destination based on available board capacity and notify the RC-SMSC. The Soldier's location is not critical to this decision given the MEB will be processed remotely. The RC-SMSC will create a Medical Data Collection Object (MDCO) in eMEB and send to the MEBTO. Soldiers with clinical conditions requiring direct support and/or undergoing Uniformed Code of Military Justice action will be regulated to an MTF as close as possible to their home for processing.
	TRANSITION FOR ARNG SOLDIERS NOT ON ACTIVE DUTY ORDERS: The PDA will issue disability separation/retirement orders on all ARNG Soldiers who are not on active duty orders. Copies will be provided to ARNG-HRP-T, the Soldier's State or Territory Headquarters, unit of assignment, MTF and Defense Finance and Accounting Service in accordance with AR 623-10. These Soldiers will not be loaded in TRANSPROC but will be identified by PDA via disability orders to ARNG-HRP-T through email or regular mail. After receipt of the order, the State or Territory G1/MILPO will prepare the separation/retirement order(s), NGB Form 22 and complete any necessary actions to complete the separation process. The State discharge section will provide copies of separation orders and other documents to ARNG-HRP-T to ensure proper administrative controls. Soldiers who are being placed on the disability retired list must receive counseling on the Survivor Benefit Plan (SBP) prior to completing the DD Form 2656, Data for Payment of Retired Personnel. This assistance can be obtained at either the Soldier's State Headquarters Retirement Services Office or the closest Army Military Installation Retirement Services Office. Soldiers who are being separated with severance should be counseled by their State Retirement Services Office about possible eligibility for transfer to the Retired Reserve. This transfer would require the Soldier to waive the disability severance payment in order to receive military retired pay and benefits at a later date.
	Challenged Cases: Once a case is regulated to an MTF or MEBROC, any case that fails to meet administrative or clinical requirements will be defined as a "challenged case." Challenged cases are not returned to the RC SMSC. The PEBLO will document problems with the regulated case and must exhaust all efforts to resolve these issues before notifying the MEBTO. MEBTO makes a decision within 72 hours to either (1) have the MTF/ MEBROC continue efforts to resolve issues and complete the process, (2) redirect/ regulate the case to an MTF from a MEBROC, or (3) support disenrollment. The MEBTO will notify the State/ARMMC/HRC as appropriate and the RC SMSC. The Director, USAPDA reviews all returned cases and provides guidance on steps necessary for future completion of IDES.

Key Players

RC-SMSC; The RC SMSC is the enterprise that will compile MEB packets for the Referral Stage of IDES. This activity will compile the key MEB documents (Profile, VA 21-0819, Line of Duty, Commander's Statement, and available Compensation and Exam results), upload these documents to eMEB, and send the packet to the MEBTO. The RC-SMSC will also send a Request for Information (RFI) for missing documents to to the unit, the state (ARNG Soldiers), the Army Reserve Medical Management Center (ARMMC – for USAR Soldiers), or HRC (for IRR/ IMA/ DIMA Soldiers). Any Soldier who is not on active duty orders utilizes the RC SMSC due to increased coordination required for RC Soldiers who primarily receive civilian medical care.

MEBTO: The Medical Board Tracking Office (MEBTO) regulates flow, coordinates and tracks boards throughout the process to completion, This activity will direct cases to either a Medical Evaluation Board Remote Operating Center (MEBROC) or an MTF with proper capability, proximity to Soldier's residence, and site capacity. , The MTFs/ MEBROCs process these cases using standard IDES procedures, beginning with the Claim Development Stage.

Reference Guide

Table Of Contents

SECTION 6: SPECIAL CIRCUMSTANCES AND DISENROLLMENT CRITERIA

Component-Specific Processes
OCONUS Cases
Disenrollment Criteria

Table Of Contents

OCONUS Cases		
Title	**Description**	**Key Players**
Timeline	**MEDCOM, in conjunction with Army Commands (ACOM), Army Service Component Commands (ASCC) and Army Direct Reporting Units (DRU), will support Soldiers and their Families that meet MRDP, have been referred to IDES, and require PCS movement to CONUS based Warrior Transition Units (WTUs) to complete IDES. MEDCOM, ICW ACOMs, ASCCs AND DRUs, will take all measures to ensure Soldiers and their Families undergo a seamless process to ensure continuity of care and prevent undue hardship. OCONUS IDES process is applicable to all locations outside the Continental US (OCONUS) which do not have Veterans Administration (VA) Compensation and Pension (VA C&P) examination capability.**	**- European Regional Medical Command (ERMC) and Pacific Regional Medical Command (PRMC): Overall responsible for initiating, overseeing, developing policy and carrying out the OCONUS IDES Process in OCONUS locations. - Soldier: Comply with all policies, guidelines and instructions to facilitate a smooth transition from OCONUS to CONUS or TDY and Return trip to initiate the IDES Process - CONUS based MTF and WTB Commanders: Receive the Soldiers from OCONUS locations and serves as the command and control (C2) and continue to facilitate the smooth transition of Soldiers and Families as they process out of the Army. - Soldier Transfer and Regulating Tracking Center (START-C), MEDCOM: will regulate the movement of Soldiers referred to the IDES to designated CONUS based medical centers or facilities and assignment to the Warrior Transition Command (WTC). - OCONUS Warrior Transition Unit (WTU): Serves as the command and control (C2) liaison between the receiving WTB and the losing unit to facilitate the smooth transition of Soldiers and Families. - PEBLO: Processes candidates into IDES to include conducting the multi-disciplinary orientation requirements.**
Processing	**OCONUS organizational units will identify Soldiers that meet their MRDP for movement to CONUS via permanent change of station (PCS) or by exception, travel, temporary duty (TDY) to CONUS based MTFs to complete their MEBs as part of the IDES enterprise. Soldiers and their Family will PCS to a CONUS WTU location which will be identified and coordinated by Soldier Transfer and Regulating Tracking Center (START-C). The destination decision criteria are based on medical treatment requirements, MTF IDES capacity, as close as possible to Soldier's preferred location, and WTU capacity. Exceptions are determined by European Regional Medical Command (ERMC) and Pacific Regional Medical Command (PRMC) ICW Soldiers Chain of Command. Examples of exceptions are, but are not limited to, Soldiers desiring to leave service overseas, ie. Soldier has Family who permanently reside overseas, dual military couples program where the other Service Member is on OCONUS duty. Soldier will travel to CONUS, to pre-designated sites for two weeks to complete VA C&P exam, initiate MEB proceedings, and then return OCONUS. End State: Standardized, synchronized and resourced support to Soldier- and Family centered OCONUS IDES process to facilitate the successful transition of Soldiers and enhance Army readiness.**	

Link to : OTSG MEDCOM POLICY 11-103 fact sheet

Reference Guide

Table Of Contents

SECTION 6: SPECIAL CIRCUMSTANCES AND DISENROLLMENT CRITERIA

Component-Specific Processes
OCONUS Cases
Disenrollment Criteria

Table Of Contents

Disposition Disenrollment Criteria			
Dispositions which may result with a Soldier's disenrollment from the IDES process, includes but are not limited to the following categories and sub-categories.	Cat.	Sub-Category	Definition/References/Timeline
	A. Return to Duty	Found Fit for Duty by Presumption	Used when Soldiers are within 12 months of retirement (or for enlisted - their Retention Control Point) and are subsequently referred into the PDES.
			AR 635-40, 8 February 2006, 3-2.a(5)
		http://www.apd.army.mil/pdffiles/r635_40.pdf	Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).
		Sub-Category	Definition/References/Timeline
		Met Medical Retention at MEB	Use this subcategory when the MEB recommends or decides a disposition of return to duty. This type of case did NOT go to the IPEB.
			Phase 1: MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).
		Sub-Category	Definition/References/Timeline
		Profile Upgrade	Use this if (Service member) Soldier profile was changed to where the (Service member) Soldier no longer requires a MEB and is returned to duty. Profile downgrade prior to PEB is very similar to the stated above subcategory. The difference is at what step of the process the profile was changed.
			Phase 1: MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).
		Sub-Category	Definition/References/Timeline
		Continued on Active Duty and Continuation on Active Reserve of Unfit Soldiers	Continuation in a military status is generally subject to the Soldier's consent. However, the SA, or their designee, may involuntarily continue Soldiers determined unfit by the PDES in consideration of their service obligation or special skill and experience.
			AR 635-40, 8 February 2006, 6-2.b, pg. 31
		http://www.apd.army.mil/pdffiles/r635_40.pdf	Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).
		Sub-Category	Definition/References/Timeline
		MEB terminated at direction of referring physician	Use if the referring (or responsible) physician decides the disability process is no longer justified.
			Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).
		Sub-Category	Definition/References/Timeline
		Terminated by PEB	Use if the PEB decides to terminate the case.
			Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).

Disposition Disenrollment Criteria			
Dispositions which may result with a Soldier's disenrollment from the IDES process, includes but are not limited to the following categories and sub-categories.	Cat	Sub-Category	Definition/References/Timeline
	Other than Return to Duty	Involuntary non-disability separation (administrative discharge)	4–3. Enlisted Soldiers subject to administrative separation a. Except as provided below, an enlisted Soldier may not be referred for, or continue, physical disability processing when action has been started under any regulatory provision which authorizes a characterization of service of under other than honorable conditions. b. If the case comes within the limitations above, the commander exercising general court-martial jurisdiction over the Soldier may abate the administrative separation. This authority may not be delegated. A copy of the decision, signed by the General Court Martial Convening Authority (GCMCA), must be forwarded with the disability case file to the PEB. A case file may be referred in this way if the GCMCA finds the following: (1) The disability is the cause, or a substantial contributing cause, of the misconduct that might result in a discharge under other than honorable conditions. (2) Other circumstances warrant disability processing instead of alternate administrative separation. c. A Soldier being considered for separation because of unsatisfactory performance (AR 635–200, chap 13), must be referred for disability processing upon approved recommendation of a MEB (AR 635–200, para. 1–35a). Except for separation in lieu of court-martial, final disposition through the disability evaluation system (DES) takes precedence over administrative separation processing, regardless of when the medical determination is made (either before, during, or after initiation of an administrative separation). Soldier: Is to be advised that a PEB evaluation is required for receipt of Army disability benefits, but waiver of the PEB will not prevent applying for VA benefits. The Soldier will be furnished one copy of the approved report of medical board proceedings (with copy of the report of the medical examination). Unit: Commanders authorized to effect the discharge of Soldiers under provisions of this chapter will effect such discharge expeditiously. As part of the out-processing procedure, commanders will ensure that Soldiers complete VA Form 21–526 (Veteran's Application for Compensation or Pension) prior to separation. PEBLO: Will inform the Soldier of the rights and conditions outlined above. If the Soldier declines the opportunity to apply for discharge, the PEBLO will notify the commander in writing. Such notice will state that the Soldier has been fully informed of the provisions of this chapter and that the Soldier has declined to apply for discharge.
			AR 635-40, 8 February 2006, 4-3.a-c, pg. 8 / ALARACT 159-2012, Enlisted Administrative Separation Processing – Final Medical Disposition
		http://www.crdamc.amedd.army.mil/meb/_files/ALARACT_159_2012_ENLISTED_ADMIN_SEP.pdf_	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Voluntary Non-Disability Separation/Retirement	This chapter provides for separation of an enlisted Soldier for non-service aggravated EPTS conditions when Soldier requests waiver of PEB evaluation. b. This chapter is applicable to enlisted Soldiers on active duty for more than 30 days. c. Separation under the authority of this chapter is not to be confused with separation under the provisions of AR 635–200, chapter 5. The latter provides for involuntary separation within the first 6 months of entry onto active duty for failure to meet procurement fitness standards. If the time period exceeds 6 months or if the condition is disqualifying under AR 40–501, chapter 3, a Soldier is entitled to evaluation by a PEB or may waive evaluation under this chapter.
			AR 635-40, 8 February 2006/RAR 20 March 2012, Chapter 5, 5-1
		http://www.dtic.mil/whs/directives/corres/pdf/133238p.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Optional Surgery	Medically optional surgery will not be performed while the Soldier is being evaluated in the IDES process due to the potential to delay the return to duty or the evaluation process. The definitions of a medically optional surgery or procedure is one that may be beneficial but not required to preserve the life of the patient, prevent the loss of function, or return the Soldier to fit for duty status.
			OTSG/MEDCOM Policy Memo 11-038, 3 May 2011, 4.a-f, pg.1-2
		https://www.us.army.mil/suite/doc/29853421	Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).

Reference Guide

Table Of Contents

Disposition Disenrollment Criteria			
Dispositions which may result with a Soldier's disenrollment from the IDES process, includes but are not limited to the following categories and sub-categories.	Cat	Sub-Category	Definition/References/Timeline
	Other than Return to Duty	Re-hospitalization of disabled Soldier	A Soldier who is re-hospitalized while undergoing disability evaluation or awaiting final disposition must be evaluated to decide if his or her condition may change the findings or recommendations of the PEB. If the Soldier's condition may change the findings and recommendations, the MTF commander will notify the PEB president. Further adjudicative and review action may be suspended pending resolution. When the Soldier has received optimum hospital improvement for disposition purposes, the hospital commander will prepare an addendum to the original medical board. The addendum will be forwarded to the PEB with any other pertinent records unless some other disposition is indicated. The PEB must be notified if other disposition terminates disability processing.
			AR 635-40, 8 February 2006, Chapter 4, 4-16, pg. 12
		http://www.apd.army.mil/pdffiles/r635_40.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Other Medical (Pregnancy, change of condition)	Use if the physician determines the Service member needs additional recovery or treatment or is pregnant and unavailable for medical exams. While this generally occurs before the case goes to the PEB phase, the PEB can decide to ask for additional information or decide the Service member needs additional time to recover / heal. MTF Provider: The pregnancy diagnosis will be certified in writing by a physician on duty at an Armed Forces MTF as soon as possible. (This does not prevent observation of the enlisted woman for a reasonable period of time to ensure that the diagnosis is correct.) Unit: The unit commander will direct an enlisted woman who believes that she is pregnant, or whose physical condition indicates that she might be pregnant, to report for diagnosis by a physician at the servicing Armed Forces MTF. When service medical authorities determine that an enlisted woman is pregnant, she will be counseled and assisted as required by chapter 8, section II.
			AR 635-200, 6 June 2005/RAR 17 December 2009, 8-8.c, pg. 73 AR 635-40, 8 February 2006, Chapter 4, 4-16, pg. 12
		http://www.apd.army.mil/pdffiles/r635_200.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Hospitalization Before Separation or Retirement Orders	If the physical evaluation board is not necessary, but additional medical care is, the retirement will be processed as a non-disability retirement. Continuing medical problems will be treated up to and after the retirement date. Retirement dates will not be changed to continue medical treatment that will extend past the approved retirement date.
			AR 635-200, 6 June 2005, 12-29.b, pg. 97
		http://www.apd.army.mil/pdffiles/r635_200.pdf	Following Phase 2
		Sub-Category	Definition/References/Timeline
		Death	If information is received that a Soldier being processed for physical disability has died, disability processing will be discontinued and the case file will be returned to the MTF.
			AR 635-40, 8 February 2006, 4-9.q.2, pg. 18
		http://www.apd.army.mil/pdffiles/r635_40.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Non-Duty Related Case (Application of line of duty policy)	Under the laws governing the Army PDES, Soldiers who sustain or aggravate physically unfitting disabilities must meet the following LD criteria to be eligible to receive retirement and severance pay benefits. (1) The disability must have been incurred or aggravated while the Soldier was entitled to basic pay or as the proximate cause of performing active duty or inactive duty training (IDT). (2) The disability must not have resulted from the Soldier's intentional misconduct or willful neglect and must not have been incurred during a period of unauthorized absence. PEB: The PEB may question the validity of a favorable LD determination. If so, the PEB will conditionally adjudicate the case as if a favorable LD decision is correct. The PEB believes the evidence warrants reconsideration of the LD finding, a referral of the case to USAHRC (AHRC–PDC–P) for review of the LD determination by TAG is authorized. When forwarding a case for such review, the PEB will explain in the forwarding memorandum its rationale for determining that the new evidence raises a question as to the correctness of the LD determination. Soldier: Will be informed of the conditional processing and advised that final disposition by HQDA will be held in abeyance until the LD decision is resolved.
			AR 635-40, 8 February 2006, 3-4.a.1-2, pg. 5
		http://www.apd.army.mil/pdffiles/r635_40.pdf	Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).
		Sub-Category	Definition/References/Timeline
		Severely Disabled Soldier	To qualify, a Service member's condition must be designated as "catastrophic" and the injuries/illnesses must have been incurred in the line of duty and received as a result of the causes prescribed under the statutory definition of "Combat-Related" as used in the combat-related special compensation program. The expedited DES process will allow the early identification of the full range of benefits, compensation, and specialty care offered by the VA.
			DOD Memorandum, January 6, 2009, Expedited DES Process for Members with Catastrophic Conditions and Combat-Related Cases, pg. 1
		http://prhome.defense.gov/WWCTP/docs/Expedited%20DES%20(Jan%206)%20sm.pdf	Phase 1: MEB Phase (AC 100 DAYS) (RC 140 DAYS)) MEB Stage (35 DAYS).
		Sub-Category	Definition/References/Timeline
		Pending UCMJ Action	When the PEB is notified that an enlisted Soldier is pending a chapter action that makes the Soldier ineligible to continue disability adjudication or officer or enlisted is pending court-martial that could result in dismissal or punitive discharge, the case will be terminated as of the date the PEB receives written communication from the unit commander confirming the initiation of that chapter or court-martial action.
			AR 635-40, 8 February 2006, 4-5, pg. 7-8
		http://www.apd.army.mil/pdffiles/r635_200.pdf	This type of disenrollment can happen at any point in the process.

Reference Guide

Table Of Contents

Disposition Disenrollment Criteria			
Dispositions which may result with a Soldier's disenrollment from the IDES process, includes but are not limited to the following categories and sub-categories.	Cat	Sub-Category	Definition/References/Timeline
	Other than Return to Duty	Absent Without Leave (AWOL)	A Soldier may not be processed through the Army PDES unless he or she is under military control. The Soldier must be available to be notified of the findings of the PEB and to indicate concurrence or non-concurrence with the PEB findings and recommendations. If absent without leave (AWOL), the Soldier's case file may not be sent to a PEB. If determined AWOL after the Soldier's case file has been referred, the PEB must be promptly notified in order to suspend processing. If the Soldier returns within 10 days, the PEB must be notified so that processing may resume. Any substantial change in the Soldier's condition during a period of AWOL must be recorded by an addendum to the original MEB or by a new MEB and furnished to the PEB. PEB: The PEB must be promptly notified in order to suspend processing. MEB: Any substantial change in the Soldier's condition during a period of AWOL must be recorded by an addendum to the original MEB or by a new MEB and furnished to the PEB. Soldier: May not be processed through the Army PDES unless he or she is under military control. PEBLO: If determined AWOL, promptly notified the PEB. USAPDA: Suspend disposition action; If the Soldier has been AWOL for 10 days or more; upon expiration of 10 days in AWOL status; verify with the unit commander the of AWOL; If AWOL status is confirmed; void the proposed disposition; Notify the Soldier's commander and the PEBLO of the revoke disposition; Return the case file to PEB.
			AR 635-40, 8 February 2006, 4-5, pg. 8
		http://www.apd.army.mil/pdffiles/r635_200.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Fraudulent Enlistment	Concealment of medical defect. Deliberate concealment of a medical defect or disability (for example, procurement medical fitness standards under AR 40–501, chap 2, for enlistment) known to the applicant before enlistment constitutes fraudulent entry. Deliberate concealment is defined as purposely concealing a medical defect or disability with the intent to deceive
			AR 635-200, 6 June 2005, 7-17.a.5, pg. 70
		https://www.hrc.army.mil/site/Active/TAGD/Pda/PDA_PM_18.pdf	This type of disenrollment can happen at any point in the process.
		Sub-Category	Definition/References/Timeline
		Noncompliance/non-response from MTF or RC	The PEB will generally administratively terminate duty and non-duty related cases when 60 calendar days have lapsed without adequate response from the MTF or RC referring organization.
			Policy/Guidance Memo #18, 8 February 2007, 3.a.3, pg. 1
			Phase 2: PEB Phase (120 DAYS); Formal PEB Stage (30 DAYS).

Reference Guide

Table Of Contents

SECTION 7: ADDITIONAL RESOURCES

This section contains additional resources not mentioned in the text of the IDES Guidebook, including a fact sheet on IDES-related training and a list of general resources that may be helpful in addressing issues that arise during the IDES process.

Table Of Contents

SECTION 7: ADDITIONAL RESOURCES

Training

Other Resources

Table Of Contents

IDES Training Resources				
Title/Subject	Location	Players	Definition	Timeline
Veterans Tracking Application (VTA) Training	VTA Site (accessed through the Veteran's Information Portal, requires activation for access) - Knowledge Center	All VTA users	The VTA is a data management system used to track IDES cases moving through the process from initial referral to Separation or disenrollment. See VTA under Systems for more information. Training resources are located under the Knowledge Center tab.	All phases/steps of IDES are currently documented in VTA
Annex J to OPORD 12-31 (Training) and Appendices	https://www.us.army.mil/suite/doc/38108349	RMCs and All IDES support staff	Describes training required for all IDES staff members including role-based training for PEBLOs, MEB Providers, Contact Reps, PEBLO Assistants, and MEB Administrative Assistants	Prior to performing duties as a member of the IDES staff, and periodic refresher training
AMEDD Center & School FT Sam Houston	http://www.cs.amedd.army.mil/		Formal training courses for topics related to IDES are conducted at the AMEDD Center & School, and IDES training topics are included in broader courses for awareness.	
Distance Learning Courses	After enrollment, member accesses training on AKO		Enrollment through ATRRS for course(s) (e.g. - for PEBLO course, 6I-F4/340-F3 (DL)) is required prior to accessing course content on AKO.	
IDES Mobile Training Team (MTT)	On-Site training provided by OTSG/MEDCOM staff	Varies	The IDES MTT provides on-site training for special circumstances such as standing up new sites or adding new functionality and can provide some training normally provided at the AMEDD Center & School, with the exception of the certification (MTT participants must be certified online using the Distance Learning option). Sites should contact their Regional PDES consultant if MTT training is indicated.	
Commanders/First Sergeants training	Standardized training material is made available through the RMCs		There is awareness training and specific role-based training designed to give commanders and first sergeants the necessary information to fulfil their role in the process.	

Reference Guide

Table Of Contents

SECTION 7: ADDITIONAL RESOURCES

Training

Other Resources

1 - Additional Resources and Related Links
2 - Attachments provided within this document:
(see Attachments tab to left of the screen)
eMILPO Field Users Guide (link provided)
ePEB PEBLO Users Guide
FAQs on the STR in IDES and PHI Disclosure

Table Of Contents

Additional Resources and Related Links	
Form Name	**Web Location**
Warrior Transition Command(WTC)	http://wtc.army.mil/index.html
MEDCOM	http://www.armymedicine.army.mil/
Department of Veterans Affairs	http://www.va.gov/
Behavioral Health 360	https://pasba3.amedd.army.mil/BH360/
Ombudsman Program	http://medcomombudsman.amedd.army.mil/index.html
Wounded Warrior Program	http://wtc.army.mil/aw2/index.html
AKO	https://akologin.us.army
Human Resource Command	http://www.hrc.army.mil/
National Resources Directory	https://www.nrd.gov/themhttps://www.nationalresourcedirectory.gov/
Army OneSource	http://www.myarmyonesource.com/default.aspx
My Army Benefits	http://myarmybenefits.us.army.mil
Warrior Care Blog	http://warriorcare.dodlive.mil/category/disability-evaluation/
Warrior Care	http://www.army.mil/warriorcarenews/
Community Based Healthcare Organizations	You must be in AKO and enroll to access this resource.
Military OneSource	http://www.militaryonesource.mil/MOS/f?p=MOS:HOME:0::::
eBenefits (VA benefits site)	https://www.ebenefits.va.gov
IDES U.S. Army Europe	http://www.eur.army.mil/ides/default.html
Ready and Resilient	http://www.army.mil/readyandresilient/personnel
VetSuccess	http://vetsuccess.gov
Turbo Tap Registration	http://www.turbotap.org/register.tpp
TurboTap - Disabled Veterans	http://www.turbotap.org/portal/transition/lifestyles/Diabled_Veterans/
Turbo Tap Compensation & Benefits Handbook	http://turbotap.org/portal/transition/resources/PDF/Compensation_and_Benefits_Handbook.pdf

Reference Guide

ARMY CAREER & ALUMNI PROGRAM
The Army's Official Transition website
https://www.acap.army.mil/transition/physical_evaluation_board.aspx

ACAP for Soldiers referred into the Integrated Physical Disability Evaluation System (IDES)

- **MEB**
- **PEB**

Soldiers referred to IDES will immediately contact the ACAP center at their installation to schedule and complete their transition training.

Soldiers without an ACAP center will call (800) 325-4715 or visit *www.acap.army.mil* to complete their transition training.

Immediately complete:	**Complete between 10 months and 3 months prior to anticipated transition date:**
❑ Preseparation counseling DD Form 2648 or DD Form 2648-1.	❑ Transition overview
❑ Individualized Counseling (IC).	❑ Military Family Concerns
❑ Register for ebenefits at (www.ebenfits.va.gov).	❑ Financial Planning
❑ Register for MyHealtheVet at (www.myhealth.va.gov).	❑ Value of a Mentor/Special Issues
❑ Begin your Individualized Transition Plan (ITP).	❑ MOS Crosswalk
	❑ Department of Labor Employment Workshop (3 days)
	❑ Veterans Administration Benefits briefing (No later than 6 months).
	❑ Veterans Administration Benefits sign-up (No later than 6 months).
	❑ Register for Department of Labor online (www.careeronestop.org).
	❑ Complete resume of choice (No later than 5 months)

Source https://www.acap.army.mil/transition/physical_evaluation_board.aspx

FAQ's on The Service Treatment Record (STR) in IDES and PHI Disclosure

1. What is a complete Service Treatment Record?

Per DoDI 6040.45, October 28, 2010, "Service Treatment Record (STR) and Non-Service Treatment Record (NSTR) Life Cycle Management", the standard STR content is all essential medical, dental, and mental health documentation required to ensure continued medical, dental, and mental health care given to a Service member during their military service.

A complete STR encompasses the Medical STR, Dental STR, and Mental Health documentation.

2. For IDES purposes, what do we hand-off to the MSC?

The PEBLO provides the MSC a copy of the member's IDES case file including a complete paper copy of the member's available Medical-STR, including :

- Entrance physical
- Mental health records
- Records from the Armed Forces Health Longitudinal Technology Application (AHLTA)
- Records from the Composite Health Care System (CHCS).

If the Service Member is referred for a *dental condition*, the complete copy of the SM's Dental-STR will also be provided to the MSC.

Point to remember:

The IDES Referral stage is measured from the date of referral to an MEB by an MTF medical care provider to the date the PEBLO provides the Service member's complete medical service treatment record, including the Service member's entrance physical and VA Claim Form 21-0819 to the VA Military Service Coordinator (MSC).

3. What if the complete STR is not available?

When a Service member's complete Medical -STR is not available; the PEBLO provides the MSC a memo describing the actions taken to locate the missing records and their determination that the medical records are not available.

4. What is the Veterans Claims Assistance Act (VCAA) and how does this affect medical records/relevant records?

The MSC provides the Soldier with notice required by the Veterans Claims Assistance Act (VCAA) and assists in obtaining additional information and evidence required to substantiate claimed medical conditions, such as health treatment records from previous periods of service, private medical treatment records, and additional information for the Service member. The MSC may request examinations necessary as required by the case.

(Note—the PEBLO will supply the MSC with a complete copy of available Medical STR for each IDES case)

For more info on VCAA, see Public Law 106-475 located at:

http://www.gpo.gov/fdsys/pkg/PLAW-106publ475/pdf/PLAW-106publ475.pdf

5. Who do PEBLOs provide a medical STR to & under what guidance?

PEBLOs provide Medical STR copies in the performance of their duties to the:

- MEB
- PEB
- MSC

Guidance can be found under AR 40-66, Medical Record Administration and Healthcare Documentation

- Chapter 2-2. Policies governing protected health information
- Chapter 2–4. Disclosure without consent of the patient
  - "The purposes for which any and all of the PHI of an individual who is a member of the Armed

Point to remember:

Soldiers are entitled to a copy of their complete STR upon request.

These requests should be processed by the PAD Medical Records section IAW AR 40-66 and local MTF policies

- Forces may be used or disclosed are the following:
- 1. To determine the member's fitness for duty, including but not limited to the member's compliance with standards and all other activities carried out under the authority of AR 40–501, AR 50–5, AR 635–40, and similar requirements.
- 2. To determine the member's fitness to perform any particular mission, assignment, order, or duty, including compliance with any actions required as a precondition to performance of such mission, assignment, order, or duty.

6. What about Protected Health Information (PHI) Disclosure to Commanders?

Read reference OTSG/MEDCOM Policy Memo 10-042, Release of Protected Health Information (PHI) to Unit Command Officials, 30 Jun 2010 and see AR 40-66, Chapter 2.

Commanders play a vital role in the health and wellness of Soldiers and therefore must receive Soldiers' protected health information (PHI) from medical providers to make informed decisions about a Soldier's fitness and duty limitations. There are however, limits to the information providers may release. The Army must balance a Soldier's right to privacy with mission requirements and the commander's right to know.

7. Do I need to take any precautions with Protected Health Information (PHI) in e-mail?

Yes, you should become familiar with MEDCOM/OTSG Reg 25-10, Information Management: "Telecommunications ELECTRONIC MESSAGING guidance".

At a minimum:

- E-Mail containing PHI must be encrypted
- FOUO – Privacy Act Information
- Each E-Mail must have the following warning banner:

This document may contain information covered under the Privacy Act, 5 USC 552(a), and/or the Health Insurance Portability and Accountability Act

(PL 104-191) and its various implementing regulations and must be protected in accordance with those provisions. Healthcare information is personal and sensitive and must be treated accordingly. If this correspondence contains healthcare information it is being provided to you after appropriate authorization from the patient or under circumstances that don't require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure and confidential manner. Redisclosure without additional patient consent or as permitted by law is prohibited. Unauthorized redisclosure or failure to maintain confidentiality subjects you to application of appropriate sanction. If you have received this correspondence in error, please notify the sender at once and destroy any copies you have made.

FAQ's on The Service Treatment Record (STR) in IDES and PHI Disclosure

Food for thought
(AR 40-66)

In accordance with DOD 6025.18-R, a Soldier's PHI may be disclosed to the Department of Veterans Affairs (DVA) for treatment, payment, and healthcare operations; for sharing between the DOD and DVA; upon the Soldier's separation/discharge; for sharing between the DOD and DVA when providing benefits for the same beneficiaries; and upon the Soldier's authorization.

Information may be provided to the Veterans Health Administration and Veterans Benefits Administration early in the medical evaluation board process for the purpose of an early determination by the DVA of the individual's eligibility for or entitlement to benefits under laws administered by the Secretary of Veterans Affairs.

MTFs must account for the disclosures upon separation/discharge and for disclosures when providing benefits for the same beneficiaries according to DOD 6025.18-R. Additionally, when a Soldier arrives at the WTU, as part of in-processing procedures, the WTU will notify the Soldier that their PHI will be shared with the DVA to facilitate their eligibility for Veteran's benefits and to promote continuity of care. The Army will then share their PHI with the DVA.

References:

a) DoDI 6040.45, Service Treatment Record (STR) and Non-Service Treatment Record (NSTR) Life Cycle Management, October 28, 2010
b) USD Memo dated 11DEC2008 "Policy and Procedural Update for the Disability Evaluation System (DES) Pilot
c) AR 40-66, Medical Record Administration and Healthcare Documentation, RAR 4 January 2010, (*Chp. 2-4 Disclosure without consent of the patient)
d) AR 40-400, Patient Administration, 27 January 2010
e) MEDCOM Suppl 1 to AR 40-66, 4 April 2011
f) AR 635-40, Physical Evaluation for Retention, Retirement, or Separation, 8 February 2006
g) PDA Policy/guidance Memorandum #6: Medical Records
h) OTSG/MEDCOM Policy Memo 10-042, Release of Protected Health Information (PHI) to Unit Command Officials, 30 Jun 2010
i) MEDCOM/OTSG Reg 25-10, Information Management: Telecommunications ELECTRONIC MESSAGING, 12 March 2008
j) OTSG/MEDCOM Policy Memo 09-021, Personally Identifiable Information (PII) Incident Reporting and Notification Procedures, 7 April 2009

FAQ's on The Service Treatment Record (STR) in IDES and PHI Disclosure

Definitions/Terms

Availability of records. The physical presence of the Service member's record for use at the point of service or for review.

IDES. Integrated Disability Evaluation System, a Joint DoD/VA disability evaluation system.

MEB. The Medical Evaluation Board

MSC. Military Service Coordinator, a VA employee

Mental Health Record. Record of information related to conducting psychological evaluations of individuals, and other consultations relating to mental health services, including social work case records in support of the Service member. All mental health encounters results in an annotation in the STR regarding, at a minimum, the subjective presentation, a brief mental status report, the formal assessment to include diagnosis, and the treatment plan and/or disposition (e.g., return to duty, profiling) including medication and psychotherapy.

Military Services. The Army, the Navy, the Marine Corps, the Air Force, and the Coast Guard, including their Reserve and/or National Guard components.

NSTR. Chronology of outpatient medical, dental, and mental health care received by non-Service members and applies to anyone that does not meet the criteria for STR.

PEB. Physical Evaluation Board

STR. Chronology of medical, dental, and mental health care received by Service members during the course of their military career on an outpatient basis (i.e., without admittance to a hospital, clinic, or any treatment facility). The STR is the official record used to support clinical care and the administrative, business-related, and evidentiary needs of the Department of Defense, the VA, and the individual.

Future Vision of health information sharing between VA and DOD

A single logical electronic record system through a collaborative effort using a unified data model, a unified graphical user interface, and common services

http://www.va.gov/vadodhealthitsharing/