USNA INSTRUCTION 6130.1B

From: Superintendent, U.S. Naval Academy

Subj: PROCESSING MIDSHIPMEN MEDICAL EVALUATION BOARDS AND COMMISSIONING DECISIONS

Ref: (a) SECNAVINST 1850.4 series
(b) MANMED CH 18-29
(c) DoDI 6130.03
(d) Manual of the Medical Department NAVMED P-117 Ch. 15
(e) ASN(M&RA) Memo of 16 May 16 (NOTAL)
(f) BUMEDNOTE 1850

Encl: (1) Process Map: Retention and Commissioning Decision
(2) Process Map: Disability Evaluation System

1. **Purpose.** To set U.S. Naval Academy (USNA) policy and procedures, per references (a) and (b), to efficiently process Midshipmen Medical Evaluation Boards (MEB) and commissioning decisions. The procedures and policies stated in this instruction are designed to mirror fleet practices and to provide midshipmen with a clear understanding of their due process rights with regard to medical separation.

2. **Cancellation.** USNA Instruction 6130.1A

3. **Scope and Applicability.** This instruction applies only to midshipmen attending USNA.

4. **Policy.** Per references (a) and (b), midshipmen are eligible for evaluation by either an MEB or review by the Physical Evaluation Board (PEB), or both when it is determined by their primary care provider or a specialist that they have a potentially unfitting medical or mental health condition. The same condition may also disqualify them for commissioning. An MEB should be initiated when the Brigade Medical Officer (BMO) determines that a midshipman is potentially not commissionable based on commissioning standards set forth in references (c) and (d). This instruction explains the evaluation board process and creates a separate but parallel process by which a commissioning decision is made.

5. **MEB and PEB Process**

   a. Except when requested by a midshipman through a Voluntary Resignation (VR) request,
disenrollment from USNA because of medical disqualification shall not be made without conducting an MEB.

b. A midshipman MEB shall not be convened at a military medical facility other than Naval Health Clinic Annapolis (NHCA) due to the nuances associated with midshipmen that differ from the fleet. If a military medical facility other than NHCA determines that an MEB is warranted, that facility shall contact the USNA BMO to discuss the MEB.

c. Upon determination that a MEB will be conducted, the BMO will send the midshipman to the Medical Board Coordinator’s Office at NHCA to speak with the Physical Evaluation Board Liaison Officer (PEBLO) for counseling regarding the MEB process.

d. The BMO will prepare and submit a Narrative Summary, BUMED Commissioning Letter, Non-Medical Assessment (NMA), and the Legacy Disability Evaluation System (LDES) or Integrated Evaluation System (IDES) form to the NHCA PEBLO.

(1) When an MEB is initiated, the BMO shall draft and forward to the Bureau of Medicine and Surgery (BUMED) a narrative summary and request for a commissioning recommendation. BUMED will make a recommendation for or against waiving commissioning standards.

(2) If the MEB decides the case needs to go through the Disability Evaluation System (DES), a NMA must be completed by the midshipman’s chain of command and submitted to the Commandant of Midshipmen within 15 calendar days of notification from the BMO. An NMA is an assessment of the midshipman’s ability to perform their duties and summarizes the midshipman’s limitation from the perspective of the Commandant of Midshipman per reference (a). The NMA shall be reviewed by the Commandant’s Legal Advisor and signed by the Commandant of Midshipmen. The NMA and Initial Entry Training (IET) Enrollment form will be returned to the BMO by the Commandant of Midshipmen within 30 calendar days of notification of the NMA requirement.

(3) Choice of Disability Evaluation System. Per references (e) and (f), midshipmen are considered to be IET Service members. As such, their case may be directed through the LDES on a case-by-case basis by the Superintendent when processing through the IDES would have a detrimental impact on the Service member or the Military Service. If the midshipman had prior service, they will be directed to IDES unless they request LDES. The BMO will make a recommendation to the Superintendent, via the Commandant of Midshipmen, as to which system should be used in each case.

e. The PEBLO shall ensure the MEB cover sheet and the PEB Checklist is completed.

f. Two physicians (for midshipmen, typically the BMO and one other) comprise the MEB and will review the midshipman’s physical condition(s) that triggered the MEB and sign the MEB report. Whenever possible, one of the physicians should have a warfare qualification as
this adds expertise with fleet and operational medical requirements. An MEB for a mental health condition shall require an additional signature of a psychiatrist or Ph.D. level clinical psychologist as an additional provider.

g. The PEBLO shall provide the MEB report for review to the midshipman. The midshipman shall have five (5) business days, commencing the day after the midshipman receives the MEB report, to submit a rebuttal. An additional three (3) business days will be granted upon request to speak with legal counsel. Upon receipt of the midshipman’s rebuttal, if any, the BMO shall have five (5) business days, commencing the day after the rebuttal is received, to submit a surrebuttal. Once the surrebuttal is received, if any, the MEB report shall be forwarded to the NCHA Commanding Officer (CO) for review.

h. Within 100 days of initial submission by the BMO, the NHCA CO will forward a letter of findings to the Superintendent via the Commandant of Midshipmen per the procedures in paragraph 6. The CO’s letter of findings will include a medical recommendation in agreement or disagreement with BUMED’s findings and his or her commissioning recommendation.

i. At the same time, if the NHCA CO agrees with the midshipman’s MEB report recommendation, he or she shall forward the midshipman MEB report via certified mail to the PEB at the Washington Navy Yard.

j. If the NHCA CO disagrees with the MEB report recommendation, he or she will not forward the report or a recommendation, but shall direct further evaluation of the midshipman’s medical condition.

(1) If the condition resolves during the suspension of the report, then the NHCA CO will direct the withdrawal of the MEB report from the DES system. In the event a report is withdrawn, BMO shall initiate a new request to BUMED for a commissioning recommendation.

(2) If the condition does not appear to be resolving, then the BMO will prepare an addendum to the original Narrative Summary. The NHCA CO will then forward the supplemented MEB report to the PEB at the Washington Navy Yard and provide a commissioning recommendation to the Superintendent via the Commandant of Midshipmen, per the procedures in paragraph 6.

k. IDES and LDES findings

(1) If the PEB finds the midshipman “Fit to Continue on Active Duty,” then the midshipman does not have a compensable disability. Retention and commissioning decisions will be made separately.

(2) If the PEB finds the midshipman “Unfit to Continue on Active Duty,” then the midshipman may be eligible for disability compensation if it is determined that the condition did
(3) Only in the case of unfit findings, the midshipman may accept the findings or request a formal PEB for review. The formal PEB may uphold the original finding or reverse the findings. The formal PEB finding has no bearing on the commissioning decision.

(4) In the case of final “Unfit” findings, a message will be generated by PERS-954 and the member will be discharged.

(5) In the case of final “Fit” findings the member is determined not to have a compensable disability. The Superintendent will still make a determination as to retention and commissioning. The results of the PEB determine if a midshipman has a compensable disability and is not dispositive for the commissioning recommendation or decision.

6. Retention and Commissioning Decision Process

   a. When an MEB is initiated, as stated above, the BMO shall draft and forward to BUMED a Narrative Summary and request a commissioning recommendation. BUMED will make a recommendation for or against waiving the commissioning standards. The Superintendent’s commissioning decision and the MEB and PEB disability disposition are processed concurrently, but are completely separate from each other.

   b. The Commandant of Midshipmen’s Legal Advisor shall afford the midshipman the opportunity to provide a preference for or against commissioning and a personal statement.

   c. The BMO will forward BUMED’s commissioning recommendation letter, the commissioning recommendation from then NHCA CO, the midshipman’s personal statement, and the BMO’s surrebuttal, if any, to the Superintendent, the commissioning authority, via the Commandant of Midshipmen, for final retention and commissioning decisions.

      (1) As the commissioning authority, the Superintendent may choose to waive a medical commissioning standard, even against medical recommendation(s), and commission any midshipman.

      (2) If it is unlikely that a fourth or third class midshipman will meet medical commissioning standards by the time they are scheduled to graduate, the Superintendent may disenroll the midshipman from USNA.

      (3) If it is unlikely that a second class midshipman will meet medical commissioning standards by the time the midshipman is scheduled to graduate, the Superintendent may recommend to the Secretary of the Navy that the midshipman be disenrolled from USNA and that recoupment of the cost of the education benefit be waived.
(4) If the midshipman is in his or her first class year when a medical board is initiated, the Superintendent, as the commissioning authority, may allow that midshipman to graduate but not commission.

d. Midshipmen who the Superintendent has decided not to retain and who have MEBs pending will be out-processed and placed on administrative leave pending medical separation. Advised by the BMO, the Commandant of Midshipmen may allow the midshipman to complete the current semester prior to being placed on administrative leave when such action would be in the best interest of the midshipman and USNA. USNA does not have a Medical Hold Unit in which to place midshipmen pending medical separation. Prior to commencing administrative leave, all midshipmen must obtain a separation physical, a medical letter of instruction regarding access to care while in a leave status, and a signed copy of a Page 13 explaining the MEB and PEB process from the BMO. Midshipmen must provide up to date contact information to include a phone number, email address, and permanent address to Midshipmen Personnel (MIDPERS).

7. Records Management. Records created as a result of this instruction, regardless of media and format, must be managed per SECNAV Manual 5210.1 of January 2012.

8. Review and Effective Date. The Naval Health Clinic will review this instruction annually on the anniversary of the effective date to ensure applicability, currency, and consistency with Federal, DoD, SECNAV, and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will automatically expire five years after the effective date unless reissued or otherwise canceled prior to the five-year anniversary date, or an extension has been granted.

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Releasability and distribution:
This instruction is cleared for public release and is available electronically only via USNA's Intranet Web site, https://www.usna.edu/AdminSupport/Inst/.
Midshipman identified by a Primary Care Provider or subspecialist as having a disqualifying medical or mental health condition

The BMO sends midshipman to PEBLO or Medical Board Coordinator to commence MEB

MEB determines the case does not need to go through the DES

BMO will forward the MEB report along with the recommendation from BUMED to the NHCA CO for review and approval

NHCA CO's recommendation will be routed to the Superintendent, through the Commandant's Office for endorsement, for final decision on retention and commissioning

Midshipman will be notified of final disposition by MIDPERS on receipt of the Superintendent's disposition letter

Follow the process map: DES

BMO notify COC to issue NMA from the Commandant of Midshipmen within 30 days

Enclosure (1)
Midshipman is referred into the DES

PEBLO enters midshipman’s info into DES Tracker

PEBLO sends Service member’s contact information to Navy DES Counsel

Navy DES Counsel contacts Service member; election of options sent to PEBLO

PEBLO routes IDES or LDES referral form to Superintendent via Commandant and BMO

The Superintendent directs midshipman into LDES

PEBLO enrolls service member into IDES using VTA entry and VA form 21-0819

PEBLO continues gathering case file information: Non-Medical Assessment, narrative summary, medical records

If Election of Options are not received within 3 business days of DES referral: PEBLO contact OJAG hotline

Referring provider document if case is catastrophic

YES

PEBLO continues processing case as LDES

NO