



POLICY CHANGE OVERSEAS INTEGRATED DISABILITY EVALUATION SYSTEM (OIDES) PROCESSING

Purpose. This Practice Advisory explains a change in Department of the Navy policy regarding Overseas Integrated Disability Evaluation System (OIDES) processing.

Background.

1. The statutory authority for all disability processing is Title 10 U.S.C. Chapter 61. When combined with the Veterans Administration (VA) Disability System, the process is referred to as the Integrated Disability Evaluation System (IDES). The Secretary of the Navy prescribes regulations to carry out disability processing within the Naval Service and exercises all powers, functions and duties incident to the determination of:

- a. Fitness for continued Naval Service of any Sailor or Marine under the Secretary's jurisdiction;
- b. Percentage of disability of any Sailor or Marine at the time of separation from active duty;
- c. Entitlement to, and payment of, disability severance pay; and,
- d. Suitability of any Sailor or Marine for reappointment, reenlistment, or reentry into active duty.

2. In order to expedite expansion of the IDES overseas, in 2011, ASN (M&RA) created an abbreviated disability evaluation process called the OIDES whereby Military Treatment Facilities (MTFs) forwarded cases to the Physical Evaluation Board (PEB) for a "quick look." Only when the PEB considered it likely the Sailor or Marine would be found unfit would it refer him or her into the IDES (encl. (1)). Those considered likely to be found fit were precluded from the due process protections of the IDES, which provides for legal counsel, the opportunity to have all disabling conditions considered by the PEB, the right to review evidence and accept or reject PEB findings, the right to a VA Compensation and Pension (C&P) exam, a full and fair hearing, and the right to appeal.

3. In CY2018, the PEB reviewed 35 OCONUS Marine packages and recommended that 16 not be referred into the IDES. In CY2019, the PEB reviewed 71 OCONUS Marine packages and recommended that 12 not be referred into the IDES.

Discussion.

1. On 20 March 2020, ASN (M&RA) issued a policy change covering all OIDES cases starting 3 January 2020, so that Sailors and Marines, wherever stationed, will have the same protections under the IDES. For those assigned overseas (OCONUS) or to remote duty locations, in most cases, will receive permanent change of station (PCS) order to a CONUS location where their cases can be processed by an MTF and VA (encl. (2)).

2. If, however, the VA is capable of offering C&P exams and the full IDES process is available, the Navy and Marine Corps may choose to leave service members in their OCONUS or remote duty locations. The duty station must include access to legal consultation, a Physical Evaluation Board Liaison Officer (PEBLO) at the MTF and a VA Military Service Coordinator.

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- Enclosures.** (1) ASN (M&RA) Memorandum, OIDES Policy Guidance, dtd 15 Aug 2011
(2) ASN (M&RA) Memorandum, Update - DES Policy Guidance Concerning Overseas and Remote Duty Stations, dtd 20 March 2020

Point of Contact: Questions should be directed to Ms. Mary Hostetter, Head, Legal Assistance Branch (JLA), Judge Advocate Division (JAD), at mary.hostetter@usmc.mil or (703) 692-7442.



DEPARTMENT OF THE NAVY

OFFICE OF THE SECRETARY
1000 NAVY PENTAGON
WASHINGTON, D.C. 20350-1000

AUG 15 2011

**MEMORANDUM FOR CHIEF OF NAVAL PERSONNEL
DEPUTY COMMANDANT, MANPOWER & RESERVE AFFAIRS
CHIEF, BUREAU OF MEDICINE AND SURGERY
DIRECTOR, SECRETARY OF THE NAVY COUNCIL OF REVIEW
BOARDS**

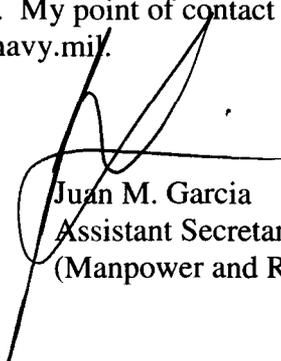
SUBJECT: Overseas Integrated Disability Evaluation System (IDES) Policy Guidance

In order to achieve Integrated Disability Evaluation System (IDES) expansion goals and objectives reported under the Joint Strategic Plan (JSP), Phase 3 - Stage 4 of the IDES expansion plan requires all IDES locations to be operational by the end of Fiscal Year (FY) 2011. This performance measure within the JSP has been identified as a High Priority Performance Goal (HPPG) for the Under Secretary of Defense (Personnel and Readiness). The Department of the Navy's goal is to achieve Initial Operating Capability (IOC) for our overseas personnel by August 31, 2011.

To support this goal, the Department of the Navy's concept of operations is for personnel assigned overseas who require referral into IDES, after initial screening by the Department of the Navy Physical Evaluation Board (PEB), to receive permanent change of station orders to a continental United States (CONUS) location where they can be entered into, and processed through, the IDES. Moving these members to a CONUS location for IDES processing will better support these members and their families as they face transition to post-service life.

Initial coordination efforts on the processes and procedures supporting this concept of operations has prepared us to take the necessary next steps and produce the policy and process documents needed to execute pre-IDES operations for our overseas service members. The attachment broadly outlines the responsibilities associated with these pre-IDES operations.

I appreciate your continuing support in making this process work smoothly for our overseas service members and their families. My point of contact in this matter is Mr. Robert Gaines, (703) 693-5303 or robert.j.gaines@navy.mil.


Juan M. Garcia
Assistant Secretary of the Navy
(Manpower and Reserve Affairs)

ATTACHMENT 1

RESPONSIBILITIES

1. CHIEF OF NAVAL PERSONNEL (CNP) AND DEPUTY COMMANDANT, MANPOWER & RESERVE AFFAIRS (DC(M&RA)). The CNP and DC (M&RA) shall:

a. Establish procedures to provide permanent change of station (PCS) orders to transfer overseas service members screened by the PEB as likely unfit for continued naval service and require IDES processing. Transfer must be to a CONUS location where sufficient medical, IDES and other resources exist to support IDES processing and the needs of the service member and their family. Selection of the CONUS location will depend, in part, on the member's medical condition, local transition assistance capabilities and the personal desires of the Sailor or Marine. The gaining command must be near a Navy or Marine Corps Military Treatment Facility (MTF) currently providing IDES processing. The transferring service member should report to their gaining CONUS command and to the Medical Evaluation Board (MEB) section of the receiving MTF for IDES processing within 90 days of receipt of notification from the PEB.

b. Establish procedures to ensure members transferred for IDES processing through a CONUS MTF are in a Limited Duty (LIMDU) status.

2. CHIEF, BUREAU OF MEDICINE AND SURGERY (CHIEF, BUMED): The Chief, BUMED shall:

a. Establish procedures for MTFs to identify service members stationed overseas who meet initial screening requirements for IDES processing and for ensuring these members are placed into a Limited Duty or Medical Hold status, as appropriate. These service members will not be placed into the Veteran's Tracking Application (VTA) or into the IDES while stationed overseas.

b. Establish procedures for overseas MTFs to develop necessary information for consideration of possible unfitness for continued naval service by the PEB. While this information is less than that required for a full MEB submission to the PEB for IDES adjudication, the MTF must provide, at a minimum:

(1) Medical information to substantiate the existence or severity of potentially unfitting conditions. This information will generally be no older than six months. Information exceeding this time frame may be used if more current information would not substantially affect the PEB's evaluation of potentially unfitting conditions.

(2) Minimum narrative summary (NARSUM) requirements for referral for PEB consideration will use the NARSUM in AHLTA process to document the following:

- Clearly identify the diagnoses of conditions that may make or contribute to making the service member unfit for continued naval service.
- Description of the current condition and treatment information for the conditions that may make or contribute to making the service member potentially unfit for continued naval service, including prognosis.
- Description of the impact of these conditions on the service member's performance of duties.

(3) Commander's non-medical assessment (NMA). This NMA should be no older than six months when received by the PEB.

(4) A memorandum to the President, PEB signed by the Convening Authority identifying the potentially unfitting conditions and requesting the PEB evaluate the case for potential referral into the IDES.

c. If the PEB determines the referred service member should be entered into the IDES, establish procedures to ensure all medical records and other information that will contribute to the IDES case file are forwarded to the gaining MTF's MEB section by the date of the service members detaching for PCS.

3. DIRECTOR, SECRETARY OF THE NAVY COUNCIL OF REVIEW BOARDS (DIRSECNAVCORB): The DIRSECNAVCORB shall:

a. Establish procedures for the PEB to receive and evaluate cases referred by overseas MTFs for potential referral into the IDES. The PEB will determine if the service member's condition(s) impact their ability to perform duties to such a degree that they should be referred into the IDES for full consideration of fitness to continue naval service. A determination that a service member should be referred into the IDES does not constitute a finding of unfitness.

b. Establish procedures and maintain staffing to ensure cases referred by overseas MTFs for evaluation can be completed within twenty-one calendar days. The starting time for this evaluation period begins when the referral has been accepted by the PEB and ends when the PEB issues a letter publishing their findings back to the MTF and notifying the appropriate military personnel command to initiate the PCS process.



THE ASSISTANT SECRETARY OF THE NAVY
(MANPOWER AND RESERVE AFFAIRS)
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MAR 20 2020

MEMORANDUM FOR CHIEF OF NAVAL PERSONNEL
DEPUTY COMMANDANT OF THE MARINE CORPS,
MANPOWER AND RESERVE AFFAIRS
SURGEON GENERAL OF THE NAVY
DIRECTOR, SECRETARY OF THE NAVY COUNCIL OF
REVIEW BOARDS

SUBJECT: Update – Disability Evaluation System (DES) Policy Guidance Concerning
Overseas and Remote Duty Locations

- References: (a) Principal Deputy Assistant Secretary of the Navy (Manpower and Reserve Affairs) memorandum dated February 3, 2011
(b) Assistant Secretary of the Navy (Manpower and Reserve Affairs) memorandum dated August 15, 2011
(c) Department of Defense Instruction 1332.18, Disability Evaluation System (DES), August 5, 2014, As Amended
(d) Secretary of the Navy Manual (M-1850.1) dated September 23, 2019
(e) BUMEDNOTE 6000 “Standardization and Prioritization of Medical Evaluation Board (MEB)” dated November 27, 2019

Effective immediately, references (a) and (b) are rescinded. This memorandum covers all cases starting January 3, 2020. The Navy and Marine Corps have agreed that Service members (SMs) assigned overseas (OCONUS) or remote duty locations, and require referral into the DES, in most cases, will receive permanent change of station orders to a continental United States (CONUS) location where sufficient resources exist to support the needs of the SM and family. The location must be near a Navy or Marine Corps activity for detailing and separation purposes and Veterans Affairs (VA) medical facility to accomplish the Compensation and Pension Examinations (C&P Exams). Service members can elect the Integrated Disability Evaluation System (IDES) or the Legacy Disability Evaluation System (LDES).

When a Sailor or Marine serving OCONUS develops or exacerbates a deployment limiting medical condition (DLMC), it is critical to determine if the DLMC will require early return for treatment on temporary limited duty (LIMDU) or referral to the DES. All early returns must be coordinated with Service Headquarters in accordance with references (c) and (d), which designate the decision-authority for early return for DES referral to Service Headquarters. Reference (e) establishes the role of the Medical Evaluation Board Approval Authority (MEBAA) with primary responsibility to ensure appropriate referrals to the DES. The MEBAA accomplishes this through collaboration with Service Headquarters, Bureau of Medicine and Surgery (Code M34), consulting

specialists, and Navy Specialty Leaders. The MEBAAs or the treating providers must provide a concise summary through placement on temporary limited duty, annotate either early return or referral to PEB, and communicate with Service Headquarters to guide their decision in issuing orders. In addition, the MEBAAs, treating providers, and patient administrative department must coordinate with the receiving Navy Medicine Readiness and Training Command or Unit to ensure appropriate clinical and administrative handoffs occur upon transfer. Any divergence of opinion on decisions from Service Headquarters can be directly adjudicated through communications by MEBAAs or convening authority.

If the VA is capable of offering C&P Exams OCONUS, and the full IDES process with benefits and services are available to Service members and their families, the Services may choose to leave Service members in their OCONUS or remote location. The Service member's duty station must include access to legal consultation, a Physical Evaluation Board Liaison Officer at a MTF and a VA Military Service Coordinator while going through the process. The Service members and their families must not be disadvantaged in any way while going through the IDES OCONUS. The Service member can still elect to process through the Legacy Disability Evaluation System OCONUS or in remote duty locations since C&P Exams are not required.

The Navy and Marine Corps shall update related directives and policies as appropriate NLT April 30, 2020. My point of contact for this matter is Mr. Mike Bridges who may be reached at (703) 571-9095 or mike.bridges@navy.mil.



Gregory J. Slavonic

Cc:
JAG
SJA to CMC