SECNAVCORB POLICY LETTER 2017-4

From: Director, Secretary of the Navy Council of Review Boards

Subj: EVIDENCE AND THE REQUIREMENT FOR ALL CONDITIONS SUBMITTED TO THE PHYSICAL EVALUATION BOARD (PEB) TO BE PROPERLY REFERRED

Ref: (a) DODI 1332.18
(b) SECNAVINST 1850.4E

1. This cancels and replaces SECNAVCORB Policy letter 2016-3.

2. Reference (a) requires Disability Evaluation System (DES) processes to run in collaboration with the Department of Veterans Affairs (VA) to ensure continuity of care, timely processing, and seamless transition of Service members from the Department of Defense to the VA in cases of disability separation or retirement. It further requires the standards for all determinations related to disability evaluation to be consistently and equitably applied.

3. In 2017, the Bureau of Medicine and Surgery issued a revised NAVMED Form 6100/1 (Medical Board Report Cover Sheet), which is the required form for a Military Treatment Facility (MTF) Medical Evaluation Board (MEB) to certify referred conditions to the Physical Evaluation Board (PEB).

4. The PEB shall only assess conditions that have been properly referred by an MEB. Properly referred conditions shall meet all of the following standards:

   a. Each referred condition must be specifically addressed in a Medical Evaluation Board Report, Narrative Summary, or an appropriate Medical Addendum. The MEB will be comprised of two or more physicians (civilian employee or military). One of these physicians must have detailed knowledge of the standards pertaining to medical fitness, the disposition of patients, and disability separation processing. Any MEB listing a behavioral health diagnosis must contain a thorough behavioral health evaluation and include the signature of at least one psychiatrist or psychologist with a doctorate in psychology.

   b. Each referred condition must be supported by a VA disability examination that has been completed by a qualified examiner. This does not, however, apply to Legacy DES cases.
c. All referred conditions must appear on a single NAVMED Form 6100/1, which must be digitally signed and dated by the Convening Authority after the MEB has concluded. If a referred condition is added after the initial 6100/1 is completed, a new 6100/1 is required. In the event that a new 6100/1 is submitted, it must list the new condition, all previously referred conditions, and it must be signed in full by all parties, including the Convening Authority. No handwritten comments or additions will be accepted, and physicians must state their credentials after their signatures.

5. Conditions presented to the PEB via any other means are not considered to be properly referred and will not be considered. If Service members desire to have additional conditions referred by the MEB, they must work with their commands, treating providers, PEB Liaison Officers, and counsel to seek NARSUM addenda and an updated NAVMED Form 6100/1 in a timely manner.

6. Per reference (a), the PEB will consider all relevant evidence in determining a Service member’s fitness/unfitness (e.g., all medical entries in the Armed Forces Health Longitudinal Technology Application, performance evaluations, and other information contained in the member’s official service record). This includes evidence obtained by the PEB following a formal hearing and before publication of PPEB findings. New relevant evidence obtained will be provided to the Service member upon request per reference (a).

7. Questions regarding these matters should be directed to Mr. Roger Claussen at 202-685-6398.

J. A. RIEHL

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