MEDICAL EVALUATION BOARD (MEB) w/in Integrated Disability Evaluation System (IDES)

Lead Physical Evaluation Board Liaison Officer (PEBLO)
References

- AFI48-123, Medical Examinations and Standards
- AFI41-210, Tricare Operations and Patient Administration Functions
- AFI36-3212, Physical Evaluation For Retention/Retirement/Separation
- AFI36-2910, Line of Duty (Misconduct) Determination
- NAVMEDINST 1850.4E, Dept. of the Navy Disability Evaluation Manual
- NAVMED P-117 Chpt. 18, Manuel of the Medical Dept.
- SECNAV INST 1770.3D, Management/Disposition of Incapacitation and Incapacitation Benefits for Members of Navy/Marine Corps Reserve Components
References Cont.

- DoDD 1332.18, Disability Evaluation System (DES)
- DoDI 1332.38, Physical Disability Evaluation
- DoDVA Integrated Disability Evaluation System
- AR 40-501, Standards of Medical Fitness
- AR 40-400, Patient Administration
- AR 635-40, Physical Evaluation for Retention/Retirement/Separation
- AR 600-8-4, Line of Duty Policy, Procedure, and Investigations
Initial Review In Lieu of (I-RILO) Process

Air Force Process

- Deployment Availability Working Group (DAWG) Chair
  - Reviews Medical documentation and Cmdr’s Statement
  - Recommends Member Returned to Duty or full MEB
- PEBLO submits documents to AFPC/DPANM* for disposition
- APFC/DPANM disposition
  - Sent to PEBLO
  - Member, initiating provider, member’s commander notified of decision
    - Return to Duty: Member provided ALC* accordingly
    - Full MEB: Member is enrolled in the IDES process

*AFPC/DPANM = Medical Standards
*ALC = Assignment Limitation Code
I-RILY Process (cont)

- **Army Process**
  - 6 MDG PEBLO provides US Army PEBLO at Ft. Stewart the following:
    - Pertinent Medical documentation
    - Commander’s statement
    - DA Form 4256’s (Developmental Counseling Form) to Army PEBLO, Ft Stewart
  - **USA Medical Dept Activity determines:**
    - **Return to Duty**
      - Army PEBLO generates new Profile (DA Form 3349)
      - Memorandum detailing the results of the Medical Record Review
      - Notifies 6 MDG PEBLO
    - **Full MEB**
      - Army PEBLO enrolls soldier in IDES
      - Notifies 6 MDG PEBLO
  - **Navy/Marines** - No initial review process

Prepare, Prevent, Heal, Deploy (P2HD)
Process Ownership

- Treatment Phase
  - Primary Care Manager or
  - Initiating provider

- Medical Evaluation Board Phase (MEB)
  - 6 MDG PEBLO
  - Veteran’s Admin Medical Services Coordinator

- Physical Evaluation Board Phase (PEB)
  - Department of Defense
  - VA
Provider Perspective

- NARSUM* requests too infrequent to recall process
- Additional workload is challenging to sustain
  - Incomplete records available for review
  - NARSUM (~2 hrs/mbr) is in addition to full schedule of patients
  - Other military requirements
  - Challenge to provide timely input to PEBLO
- Different requirements for different services
- Unfamiliar with patient’s medical history
- Role is primarily AF advocate, not patient advocate

*NARSUM = Narrative Summary
Patient Perspective

- Service Member (SM) finds process to be complicated
  - Lengthy decision timeline
  - Permanent/Temporary Disability Retirement List (P/TDRL) v/s Discharge with Severance Pay (DWSP)
  - Retirement pension vs VA compensation
- SM appreciates recognition of extensive medical conditions acknowledged through MEB process
- Uncertain future (i.e. return to duty, separated, medically retired)
Organization Impact

- Profile limitations
  - May be unable to perform duties within job requirements
  - In a duty position with no mission productivity
    - Awaiting MEB determination
  - Negatively impacts unit morale
    - Increase workload on others
- Worldwide deployment mission status
  - Requires replacement of unfit service member/s
Current:

- AFPC/DPANM determines whether mbr returns to duty (RTD) or is enrolled in IDES
- Mbr enrolled in IDES system
- MTF board signs AF 618 after IDES/VA process

Recommend:

- MTF board reviews I-RILO recommends to AFPC/DPANM* whether mbr should be RTD or enrolled in IDES
- MTF board president only signs AF 618 for quality check

Shorten MEB processing time by at approx 30 days

RTD = Return to Duty

*DPANM=Medical Standards

Prepare, Prevent, Heal, Deploy (P2HD)
Current
- No I-RILO process; mbrs complete VA eval process
- Mbr can be determined fit/return to duty at PEB

Recommend
- Adopt an I-RILO process
- Eliminate unnecessary IDES process/VA eval
- Divert resources to mbrs that req IDES/VA process
- Save 6-8 months in IDES/VA process
DoD Suggestion

Current

- Each mbr retains original PCM
- PCMs struggle w/ infrequent MEB rqmts & balance full empanelment

Recommend

- Dedicated PCM for MEB mbrs & those with ALCs
- Frequency ensures PCM familiar w/ MEB rqmts
- Single PCM writes narrative summaries/annual evals
- Promotes consistency/elim overdue annual evals

Prepare, Prevent, Heal, Deploy (P2HD)

ALC = Assignment Limitation Code
Questions?