

MILPERSMAN 1900-120

SEPARATION BY REASON OF CONVENIENCE OF THE GOVERNMENT - MEDICAL CONDITIONS NOT AMOUNTING TO A DISABILITY

Responsible Offices	NAVPERSCOM (PERS-832)	Phone: Toll Free	1-833-330-MNCC (6622)
	NAVPERSCOM (PERS-834)	Phone: Toll Free	1-833-330-MNCC (6622)
	NAVPERSCOM (PERS-913)	Phone: Toll Free	1-833-330-MNCC (6622)
MyNavy Career Center	Phone: Toll Free E-mail: MyNavy Portal:	1-833-330-MNCC (6622) askmncc@navy.mil https://my.navy.mil/	

References	(a) DoD Instruction 1332.14 of 27 January 2014 (b) DoD Instruction 1332.30 of 11 May 2018 (c) SECNAVINST 1920.6C (d) DoD Instruction 1332.18 of 5 August 2014 (e) SECNAVINST 1850.4E (f) OPNAVINST 1300.20 (g) DoD Instruction 6490.04 of 4 March 2013 (h) BUMEDINST 1300.2B (i) 38 CFR 4.129 (j) SECNAVINST 5300.30E
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1. Policy

a. Medical conditions interfering with a member's performance of duty, but not specifically listed as compensable under the veterans affairs schedule for rating disabilities, may be eligible for separation for conditions not amounting to a disability (CnD) as outlined in references (a) through (e), and covered under this article. Interference with a member's performance of duty specifically includes non-deployability as described in reference (f).

b. Separation on the basis of a mental health condition not constituting a physical disability (including personality disorders) is only authorized if a diagnosis by an authorized mental health provider, as defined in reference (g) and the American Psychiatric Association, "Diagnostic and Statistical

Manual of Mental Disorders," concludes that the disorder does not constitute a disability, and is so severe that the member's ability to function effectively in the military environment is significantly impaired.

c. Some non-disabling medical conditions may preclude the member from overcoming the deficiency (i.e., asthma or allergies). Commanding officers (CO), based on a written opinion of appropriate medical providers, will determine if the condition warrants an opportunity to overcome the medical condition and the resulting negative impact on performance.

d. Authorization from Office of the Chief of Naval Operations, Nuclear Propulsion Program Manager (OPNAV N133) must be attained, per reference (h), prior to commencing administrative separation (ADSEP) processing for nuclear-trained Sailors under this section.

e. Sailors may not be separated for chronic adjustment disorder without being medically evaluated for possible referral into the Disability Evaluation System (DES) per references (d) and (e).

f. Separation is **not** appropriate, nor should it be pursued under this article, when separation is warranted on the basis of unsatisfactory performance or misconduct.

g. The command or the member may initiate a separation request per this article.

(1) **Command-Initiated Request.** Involuntary separation processing may not be initiated until the enlisted Service member has been notified formally via NAVPERS 1070/613 Administrative Remarks entry, or until the commissioned officer has been formally counseled about performance deficiencies related to the medical condition and the Service member has been advised of medical resources (if applicable) that may assist in the member's retention, exhibit 1 refers. The CO must provide reasonable time to the Service member to overcome deficiencies as reflected in appropriate counseling or personnel records, unless an appropriate medical provider finds that the condition precludes the member from overcoming deficiencies. Documentation will include history from supervisors, peers and others as necessary to establish that the behavior is persistent, interferes with assignment to or performance of duty

and has continued after the member was counseled and afforded an opportunity to overcome the deficiencies.

(2) **Service Member-Initiated Request.** The Service member may request separation based on CnD that the Service member's attending military physician believes exists and hinders the member's potential for continued naval service. The member may request separation only after all medical avenues of relief have been exhausted, exhibit 2 refers. This request is considered a voluntary separation and the Service member will not receive separation pay entitlements. Selective reenlistment bonus, enlistment bonus, officer educational costs, and or officer community managed bonuses (if applicable) will be recouped.

h. Whether initiated by the command or the Service member, a letter from a medical officer recommending ADSEP for CnD is required. Medical officer recommendations must document

- (1) diagnosis warranting recommendation for ADSEP,
- (2) rationale for ADSEP recommendation,
- (3) determination that no conditions potentially warrant a DES referral and
- (4) international statistical classification of diseases and related health problems (ICD-10) code(s).

i. All medical officer recommendations for ADSEP for CnD must be endorsed by a Bureau of Medicine and Surgery (BUMED)- appointed medical evaluation board (MEB) prior to separating a Service member.

j. A flag medical officer review is required when one or more of the following conditions apply:

- (1) personality disorder is the basis for CnD ADSEP,
- (2) Service member has greater than 4 years of service,
- (3) Service member has deployed to an imminent danger pay area in the last 24 months or
- (4) Service member has ever completed or flagged to complete a post-deployment health assessment.

Note: For Service members who have served or are currently serving in imminent danger pay areas, a diagnosis of a mental disorder not constituting a disability must be corroborated by a peer or higher-level mental health professional and endorsed by a full MEB prior to separation. Additionally, post-traumatic stress disorder (PTSD) and other mental illness co-morbidity must be addressed. Unless found fit for duty by the DES, separation for a mental disorder not constituting a physical disability or personality disorder is not authorized if Service-related PTSD, another trauma-related disorder, or any condition that may trigger the protections of reference (i) is also diagnosed.

k. Convening authorities will forward the convening authority separation recommendation to Commander, Navy Medicine East or West for endorsement (as appropriate). For Navy Service members assigned to U.S. Marine Corps activities, convening authorities will forward the convening authority separation recommendation to the Director of Health Services/Medical Officer of the Marine Corps.

Note: If the request is forwarded to Navy Personnel Command (NAVPERSCOM) for disposition without the specific documentation mentioned above, the request will be disapproved.

l. Members found fit for continued naval service by a physical evaluation board and found not world-wide assignable after completing a medical assignment screening will **not** be involuntarily administratively separated for the condition(s), per this article, **nor** will the member be denied reenlistment, per reference (d), unless the ADSEP is approved by the Secretary of Defense.

2. Separation Authority (SA)

a. Commanding officer, Navy Recruit Training Command (NAVCRUITRACOM) serves as SA for recruit personnel.

b. For all cases in which enlisted Service members are diagnosed with PTSD or traumatic brain injury (TBI), the SA is Chief of Naval Personnel (CHNAVPERS) or higher authority. For such cases, see [MILPERSMAN 1910-702](#) for guidance regarding required screening for Service members.

c. The first flag officer in the chain of command is the SA for all enlisted Service members who have not been diagnosed with PTSD or TBI.

d. For all commissioned officers, the SA and show cause authority (SCA) are listed in references (b) and (c). SA is delegated from the Secretary of the Navy (SECNAV) to the Assistant Secretary of the Navy (Manpower and Reserve Affairs) (ASN (M&RA)). The SCA is CHNAVPERS.

3. **Procedures**. ADSEP packages must include the following:

a. NAVPERS 1070/613 (exhibit 1) or official officer counseling (as appropriate) which specifically addresses performance deficiencies related to the medical condition and resources available, unless the Service member has requested the separation,

b. when initiated by an enlisted Service member, a request for separation from the member (exhibit 2) and letter of transmittal per [MILPERSMAN 1910-600](#),

c. when initiated by an enlisted member's command, ADSEP notification per [MILPERSMAN 1910-402](#), and Letter of transmittal per [MILPERSMAN 1910-600](#),

d. when initiated by a commissioned officer, CO's request for ADSEP for cause via the officer concerned and the first flag officer in the chain of command. Also include an unqualified resignation request, per [MILPERSMAN 1920-190](#), when an officer requests separation and

e. letter signed by a medical officer recommending ADSEP due to CnD which is endorsed by a BUMED-appointed MEB.

f. All requests should be sent via e-mail to: Enlisted Performance and Separations, PERS-832 at pers832adseps@navy.mil, Officer Performance and Separations, PERS-834 at pers-834@navy.mil and Reserve Enlisted Status, PERS-913 at pers-913_midlant@navy.mil, PERS-913_northwest(at)navy.mil, pers-913_southeast@navy.mil or pers-913_southwest@navy.mil. All disability related e-mail communication should be encrypted when possible. If unable to encrypt e-mail, use the [Department of Defense \(DoD\) Safe Access File Exchange \(SAFE\)](#) Web site to forward documents with personal identifiable information (PII) to COMNAVPERSCOM. When mailing PII, double wrap documents,

label the inside package "FOR OFFICIAL USE ONLY, PRIVACY SENSITIVE. Any misuse or unauthorized disclosure may result in both civil and criminal penalties." Ensure a Privacy Act Cover Sheet ([DD Form 2923](#)) is attached to the inside package. It is recommended (not mandatory) that mailing envelopes contain Tyvek when mailing PII. When mailing more than 25 SSNs the package must be tracked.

4. **Completed Cases**. Forward complete cases by letter or e-mail (as applicable):

- a. Enlisted (Active Duty or Full Time Support). NAVPERSCOM, Enlisted Performance and Separations Branch (PERS-832).
- b. Enlisted (Reserve). NAVPERSCOM, Reserve Enlisted Status Branch (PERS-913) for Reserve Enlisted.
- c. All Officers. NAVPERSCOM, Officer Performance and Separations Branch (PERS-834) for all officers.

Note 1: If separating condition also disqualifies the member from special duties (e.g., submarine duty, nuclear field duty, diving duty, etc.), the medical qualification package must be submitted concurrent to processing the separation package. In the case of nuclear trained personnel, OPNAV N133 is required to be notified prior to separation.

Note 2: Per [MILPERSMAN 1910-514](#) and [1611-010](#), if an administrative board or board of inquiry is required prior to a separation determination, the board may not disregard or change the approved diagnosis of a medical officer. Members may introduce evidence as to the impact that such a diagnosis may have on their potential for productive future naval service.

Note 3: If a member is being processed for a CnD that renders the member non-deployable, and the only interference with performance is the member's non-deployability, the member may request retention using the procedures in reference (f) after routing the request through the member's commanding officer.

5. **CO's Endorsement**. CO's endorsement must verify information provided in paragraph 2 of member's letter is correct and include why member's condition renders him or her incapable of completing obligated service in any capacity.

6. **Characterization of Service.** Honorable, unless an entry level separation (ELS) for Enlisted ([MILPERSMAN 1910-308](#)) or General (under honorable conditions) ([MILPERSMAN 1910-304](#)) is warranted. Selected Reserve personnel are not eligible for ELS.

7. **Human Immunodeficiency Virus (HIV) Personnel.** Personnel enrolled in the HIV Program are governed under reference (j) and not included in this article.

Exhibit 1
NAVPER 1070/613 Administrative Remarks

The following NAVPER 1070/613 entry must be presented to enlisted Service members for signature and witnessed.

(Date): ADMINISTRATIVE COUNSELING

1. You are hereby being counseled regarding your medical condition. You were diagnosed with (explain briefly the circumstances). Your present medical condition is not considered a physical disability; however, it may be a disqualifying factor in determining your suitability for further naval service.
2. You are being afforded any and all medical assistance as required by your medical condition. You will adhere to any and all of the recommendations of your attending physician and or medical board.
3. Further assistance is available through: LPO, DEPARTMENT HEAD, COMMAND MASTER CHIEF, CHAPLAIN, XO, CO, AND MEDICAL CORPS OFFICER.
4. This counseling is made to afford you an opportunity to undertake the recommended corrective action. Any failure to adhere to the guidelines cited above will make you eligible for administrative separation processing.

(Member's Signature)

Witness

Note: If the Sailor refuses to sign, print "SAILOR REFUSED TO SIGN" above the signature line and have a commissioned officer print and sign as the witness.

Exhibit 2
MEMBER'S REQUEST FOR ADMINISTRATIVE SEPARATION

(Use standard naval letter format)

(Date)

From: (Rank/Rate First MI. Last, USN/USNR
To: Separation Authority (first flag officer in chain of command/higher)
Via: Commanding Officer,

Subj: REQUEST FOR SEPARATION BASED ON MEDICAL CONDITION(S) NOT AMOUNTING TO
A DISABILITY

Ref: (a) [MILPERSMAN 1900-120](#)

Encl: (1) Copy of medical officer evaluation and medical evaluation board
endorsement
(2) Copy of investigation (if applicable)

1. Per reference (a), I request separation based on the medical condition
for which my attending physician believes to exist, but does not amount to a
disability per current Navy guidance. The medical condition is (briefly
describe and explain medical condition) and is supported by enclosure (1).
2. The following information is provided:
 - a. Active Duty Start Date:
 - b. Expiration of Service:
 - c. Date Reported Current Command:
 - d. Projected Rotation Date (PRD):
 - e. This medical condition (existed/did not exist) upon my entry into
Navy.
 - f. (If applicable) Enclosure (2) is an investigation into the
circumstances surrounding this medical injury/problem.
3. I acknowledge that I am not entitled to separation pay, and any
applicable bonuses or educational costs accrued may be recouped.
4. Remarks: Explain the history of your medical condition and why it
prevents you from completing your obligated service **in any capacity**.

(Signature)