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## MILPERSMAN 1910-152

## SEPARATION BY REASON OF ALCOHOL REHABILITATION FAILURE

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

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References		OPNAVINST 5350.4D		
	(b)	SECNAVINST 5300.28F		
	(C)	DSN-5, Diagnostic and Statistical Manual of		
		Mental Disorders (5 <sup>th</sup> edition)		
	(d)	10 U.S.C. Chapter 47, Uniform Code of		
		Military Justice (UCMJ)		

1. <u>Policy and Procedure</u>. Per references (a) and (b), unless a written waiver is obtained, commands must process all members considered to be alcohol rehabilitation treatment failures for administrative separation (ADSEP) using the notice of notification procedure per MILPERSMAN 1910-402.

2. <u>Separation Authority (SA)</u>. Refer to <u>MILPERSMAN 1910-704</u> to determine SA. When an ADSEP board is held, refer to <u>MILPERSMAN</u> 1910-710 for guidance in determining SA.

3. Characterization of Separation. The characterization of separation should be "general" (under honorable conditions), unless an entry-level separation (MILPERSMAN 1910-308) or "honorable" is warranted per MILPERSMAN 1910-304.

4. **Treatment Failure**. Per reference (a), the following are examples of treatment failures:

a. Any member who incurs an alcohol incident any time in his or her career after a period of level I, or above, treatment that was precipitated by a prior incident. b. Any member who has incurred an alcohol incident and subsequently is a command referral, a self-referral, or has been found by medical personnel to be in need of treatment, and commences a prescribed level I, or above, treatment program but subsequently fails to complete the treatment, or incurs another alcohol incident during the treatment.

Note: Conduct, which amounts to a refusal, failure to complete, or non-amenability, must be determined by the medical officer or licensed independent practitioner (LIP). Conduct, which amounts to an alcohol incident, must be determined by the member's commanding officer (CO).

c. Any member who fails to participate in, fails to follow, or fails to successfully complete any medically prescribed and command-approved aftercare plan. This determination must be made by the member's CO in consultation with the Drug and Alcohol Program Advisor (DAPA) and a Substance Abuse Rehabilitation Program (SARP) counselor.

d. Any member who returns to alcohol abuse, as defined by reference (c) criteria, at any time during his or her career following level I or above treatment, and is determined to be a treatment failure by his or her CO in consultation with command DAPA, local SARP counselor, and appropriate medical officer or LIP.

5. What is an Alcohol Incident? A criminal act or episode of misconduct punishable under reference (d) or civilian authority, where the consumption of alcohol was a contributing factor to the misconduct.

6. <u>Waiver Requests</u>. Submit waiver requests per reference (a), enclosure (1). Waiver requests will be submitted to Navy Personnel Command (NAVPERSCOM) Enlisted Performance and Separations Branch (PERS-832) and Reserve Enlisted Personnel Branch (PERS-913) via the Office of the Chief of Naval Operations (OPNAV) Navy Alcohol and Drug Abuse Prevention Office (N170A).