



**DEFENSE HEALTH AGENCY**  
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DHA-Policy Memorandum 23-014  
November 28, 2023

MEMORANDUM FOR: SEE DISTRIBUTION LIST

SUBJECT: Military Medical Treatment Facility Management of Self-Initiated Referral Process  
for Mental Health Evaluations of Service Members

- References:
- (a) Department of Defense (DoD) Directives 5136.01, "Assistant Secretary of Defense for Health Affairs (ASD(HA))," September 30, 2013, as amended
  - (b) DoD Directive 5136.13, "Defense Health Agency," September 30, 2013, as amended
  - (c) Directive-type Memorandum 23-005, "Self-Initiated Referral Process for Mental Health Evaluations of Service Members," May 5, 2023
  - (d) Public Law 117-81, Section 704 "Self-Initiated Referral Process for Mental Health Evaluations of Members of the Armed Forces," December 27, 2021
  - (e) Department of Defense Instruction 6490.08, "Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members," September 6, 2023
  - (f) Department of Defense Instruction 6490.04, "Mental Health Evaluations of Members of the Military Services," March 4, 2013
  - (g) DoD Instruction 6025.18, "Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Compliance in DoD Health Care Programs," March 13, 2019
  - (h) DoD Manual 6025.18, "Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DoD Health Care Programs," March 13, 2019

This Defense Health Agency (DHA) Policy Memorandum, based on the authorities of References (a) and (b), and in accordance with the guidance in References (c) through (h), provides information and guidance on military medical treatment facility (MTF) procedures for a process that enables Service members to trigger a referral on their own for a mental health evaluation (MHE) through a commanding officer or supervisor in a grade above E-5. Reference (a) defines a MHE as a psychiatric examination or evaluation, a psychological examination or evaluation, an examination for psychiatric or psychological fitness for duty, or any other means of assessing a Service member's mental health. This memorandum provides interim guidance in advance of more detailed procedural guidance, which will be included in a future DHA-Administrative Instruction and related training for health care providers who conduct self-initiated MHEs.

In accordance with Reference (c), Service members can initiate a referral for an MHE. A self-initiated referral is when the Service member initiates a request to their supervisor (above the grade of E-5) or commander to refer and support scheduling the Service member with a behavioral health provider for a voluntary MHE. The Service member is voluntarily requesting care but asking leadership to assist with making the appointment. Consistent with References (g) and (h), MTF communication to unit leadership is limited to the date, time, and place of the scheduled MHE and, as requested, confirmation that the MHE was provided, unless the member condition or circumstances meet one (1) or more of the established reasons for required command notification as described in Reference (e). A self-initiated referral has different procedural requirements as compared to other types of MHEs (e.g., command-directed MHEs and independently requested MHEs). MTFs will follow the procedures as outlined in Attachment 1 in support of self-initiated referrals. The three (3) types of MHE referrals are summarized in Attachment 2.

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Attachments:  
As stated

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## ATTACHMENT 1: Self-Initiated Referral Procedures

1. MTF clinic front desk/scheduling staff will support self-initiated referral requests by completing the following requirements when contacted by a Service member's commanding officer or supervisor in a grade above E-5:

a. Obtain the commanding officer or supervisor's name, contact information, and unit information.

b. Obtain the Service member's name, DoD identification number, and contact information that is sufficient to schedule the requested appointment for a mental health evaluation (MHE).

c. Confirm the referral is a self-initiated referral and not a Command-directed mental health evaluation (MHE), as described in References (c) and (f). Reference (c) and Attachment 2 provides guidance in making this determination.

d. Schedule the MHE as soon as possible, based on local scheduling procedures. Depending on the requested appointment type, the MHE may be conducted as a scheduled "walk-in" appointment (e.g., in a 24-hour appointment slot) or any other appointment type with a behavioral health (BH) provider (including a BH provider in primary care) that will ensure an assessment of the Service member's mental health. At locations where there is not a privileged BH provider available, either in person or via telehealth, schedule the Service member with a primary care provider that is able to support completion of MHEs.

e. Provide the commanding officer or supervisor the date, time, and place of the scheduled MHE.

f. Comply with references (e), (g), and (h) and ensure the process associated with scheduling and conducting the MHE reduces the stigma associated with seeking help for mental health concerns by treating self-referrals for MHE in a manner similar to referrals for other medical services to the extent practicable in accordance with reference (e) and all appropriate guidance.

2. Following the initial communication with the member's commanding officer or supervisor, MTF staff will perform the following:

a. Contact the Service member to confirm the date, time, and place of the scheduled MHE.

b. If the Service member requests an alternate appointment date and/or time, reschedule the appointment to new appointment date and/or time.

c. Following completion of the MHE, if the referring commanding officer or supervisor calls to follow up on the Service member's appointment completion status, the MTF staff will confirm with the commanding officer or supervisor if the MHE was provided.

3. The healthcare provider that is completing the MHE, with the support of a BH technician or additional staff as available, will perform the following as part of the Service member MHE:

## ATTACHMENT 1: Self-Initiated Referral Procedures

a. Obtain information from the referring supervisor and/or commander on the circumstances that led to the Service member requesting the referral. If this information is not available, the MHE will still be completed. This is not a requirement for MHE completion.

b. Obtain information from the referring supervisor and/or commander that may be relevant and necessary to the health and welfare of the Service member or mission accomplishment. If this information is not available, the MHE will still be completed. This is not a requirement for MHE completion.

c. Follow all MTF and clinic procedures in conducting the encounter with the scheduled Service member (e.g., review limits of confidentiality, identify safety concerns, review purpose of encounter, etc.). Conduct the MHE in a fashion to reduce the stigma associated with seeking help for mental health concerns by treating self-referrals for MHE in a manner similar to referrals for other medical services to the extent practicable.

d. Follow all appropriate guidance in accordance with requirements in References (e) through (h), applicable privacy laws, and associated DoD guidance.

e. Provide a thorough enough assessment to provide recommendations to the Service member to address the primary stated concern(s) of the patient.

f. Assess the Service member's medical readiness for duty with specific consideration for mental health, risk of harm to self or others, symptom severity, prognosis for return to duty, and risk of decompensation, aggravation, or further injury if participation in occupational activities continues.

g. When a BH profile is warranted, healthcare providers will initiate the profile in accordance with requirements for documentation and communication to unit leadership as outlined in Reference (e).

h. Provide the necessary care as clinically indicated.

i. Document all MHEs in the Service member's medical record. Documentation must include any relevant forms and scanned copies of written requests submitted by the Service member.

4. Disclosures of information about the MHE will be limited to confirming that the MHE was provided pursuant to the referral; a disclosure authorized by reference (e); and any other disclosure for which the Service member provided authorization in accordance with reference (h).

ATTACHMENT 2: Types of Mental Health Evaluation Referrals

Type	Requested / Initiated by	Facilitated by	Voluntary	Required Communication to Leadership Beyond Requirements in DODI 6490.08	Who May Conduct Evaluation
<b>Independently Requested</b>	Service member	Service member or medical referral	Yes	No	Any appropriately trained and privileged healthcare provider may conduct
<b>Self-Initiated</b>	Service member	Leadership (E-6 or above)	Yes	Yes, <b>limited to</b> the date, time, and place of the scheduled MHE and, if requested, confirmation that MHE was provided	BH provider; <b>if MTF unable to schedule with a BH provider</b> , may be conducted by an appropriately privileged Primary Care provider
<b>Command-Directed</b>	Commander or Supervisor	Commander or Supervisor	No	Yes, as described in DODI 6490.04 (reference d)	BH provider, including psychologists, psychiatrists, psychiatric nurse practitioner and clinical social workers (defined in DoDI 6490.04, Reference d)