

Medical Actions Branch
(NGGA-PEM)

Chapter 3 Retention Evaluation

Joint Force Headquarters
Georgia Army National Guard
Marietta, GA
1 October 2024

SUMMARY of CHANGE

SOP

Chapter 3 Retention Evaluation

This major revision, dated 1 October 2024-

- o. Updates DA PAM 40-502 (Appendix A)**
- o. Updates AR 600-8-4 (Appendix A)**
- o. Updates AR 670-1 (Appendix A)**

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Chapter 1

Overview

1-1 Purpose.

A Chapter 3 Retention Evaluation is necessary to evaluate whether a Soldier meets retention standards in accordance with (IAW) AR 40-501 Chapter 3. This evaluation is performed by the Deputy State Surgeon-Clinical (DSS-C) and can be conducted either in person, telephonically or by a review of medical documents provided by the Soldier.

1-2 Applicability.

a. IAW AR 40-501, para 1-4c, it is the responsibility of each Soldier to maintain his/her individual medical and dental readiness requirements, and report health issues that may affect their readiness to deploy or retention in the Georgia Army National Guard.

b. The Commander may identify a Soldier to have a Chapter 3 Retention Evaluation if he/she believes the Soldier has a medical or behavioral health condition that affects his or her performance of military duties. A Soldier may also be identified during a Periodic Health Assessment (PHA) as having a medical injury, illness, or disease that may not meet retention standards or may have had temporary profiles (for the same medical/behavioral health condition) of 120 days or more in the past 12 months.

Chapter 2 Process Steps

2-1 Process Steps.

a. Chapter 3 Retention Evaluations for medical conditions are held by appointment with the DSS-C based upon availability. A Behavioral Health Officer (BHO) conducts Chapter 3 Retention Evaluations by appointment, based upon availability.

b. The Soldier will provide the battalion/unit readiness personnel all medical documentation to include the most current documentation (no older than 120 days from submission) concerning the medical condition(s). The battalion/unit readiness personnel will forward the Chapter 3 packet to the Major Subordinate Command (MSC) Medical Readiness Non-Commissioned Officer (MRNCO) or Case Manager (CM) for review.

c. The MSC MRNCO or CM will review the packet and ensure current medical documentation is uploaded in the Soldier's electronic Health Readiness Record (HRR) and an electronic Case Management (eCase) is created in the Medical Electronic Data for Care History and Readiness Tracking (MEDCHART). If the Soldier needs assistance obtaining the required medical documents, the MSC MRNCO or CM can use the Authorization for Disclosure of Medical or Dental Information (DD Form 2870).

d. The MSC MRNCO or CM will submit the completed Chapter 3 Retention Evaluation Packet to the Chapter 3 Program Manager (CH3 PM) via ng.ga.gaarnng.list.ngga-fit-for-duty@army.mil. Subject Line: CH3 Medical or CH3 Behavioral Health, Rank, Last Name, Last Four SSN. Prior to submitting a CH3 packet to Medical Actions Branch (MAB), an eCase must be opened and medical documents pertaining to the CH3 request must be uploaded into HRR.

e. The CH3 PM will compile the CH3 packet, and the DSS-C will review the packet within 30 days. If the packet is complete, the PM will contact the Soldier to schedule an appointment. A confirmation email will be sent to the Soldier, Case Manager (CM) and MRNCO. However, the DSS-C has the discretion to complete a Chapter 3 retention evaluation in the absence of the Soldier.

1. If the packet is deemed incomplete (i.e., documents older than 120 days, insufficient documents, missing documents from checklist), the DSS-C will return the incomplete packet via email to the CM or MRNCO.

2. The unit must resubmit only the missing medical documentation once it is obtained.

f. If a Soldier is scheduled for an in-person appointment, they will arrive in Operational Camouflage Pattern (OCP) or Improved Physical Fitness Uniform (IPFU) IAW AR 670-1. The Soldier must be in a military pay status to attend in person appointments. Units are responsible for Soldier's pay, travel, and meals. Appointments completed telephonically will not require a military pay status to attend.

g. When the CH3 retention evaluation is conducted, the DSS-C will review all medical conditions listed on the memorandum. At that time, the DSS-C will determine if the Soldier meets retention standards.

1. Soldiers that meets retention standards, and do not have any limitations, he/she will be returned to duty without a profile. If a Soldier meets retention standards, but has limitation(s) because of their condition, the Soldier will be returned to duty with a permanent profile. If a Soldier receives a profile, he/she must continue to perform their assigned duties within the limits of their profile.

2. Soldiers that meets retention standards but do not meet the standards of their Military Occupations Standard (MOS) will be referred to MOS Administrative Retention Review (MAR2).

3. Soldiers that are identified with a permanent condition(s) that do not meet retention standards, IAW AR 40-501, and has an approved line of duty determination (LOD) that is related to the disqualifying condition(s), will be referred to the Disability Evaluation System (DES) PM for counseling.

4. If the DSS-C determines an IDES Referral Memorandum (IDRM) can be used in lieu of an LOD determination to document service connection for the disqualifying condition(s), the Soldier will be referred to DES PM for counseling.

5. Soldiers identified with a permanent condition(s) that do not meet retention standards, do not have an LOD for the disqualifying condition(s), and do not meet the criteria for IDRM, will be referred for a Medical Retention Determination Point (MRDP) counseling.

6. If a Soldier has an LOD that has been initiated, the packet will be held until the LOD is adjudicated. If an LOD has not been initiated, then the Soldier will be referred to MRDP.

h. The DSS-C will verbally counsel the Soldier and email the DA Form 4856 and profile upon completion of the evaluation, unless further follow up is required. The outcome of the Chapter 3 Retention Evaluation will be updated in eCase and the MSC MRNCO and case manager will be notified of appointment results.

i. Soldiers who receive a BHE will receive a signed profile once the DSS-C and State Surgeon review the Report of Mental Status Evaluation (DA Form 3822) and the initiated profile. The Soldier and their MSC MRNCO will be notified of appointment results.

j. In coordination with the Human Resources Office (HRO) of the Georgia Army National Guard (GAARNG), Active Guard Reserve (AGR) and Long Term Active-Duty Operational Support (ADOS) Soldiers will be referred to a Military Treatment Facility (MTF) for a retention evaluation.

k. In accordance with NGR 635-102 para 3-2 b (3), Officers pending evaluation by a Medical Evaluation Board (MEB) or Physical Evaluation Board (PEB) as prescribed in AR 635-40 will not be separated until the final determination by the Integrated Disability Evaluation System (IDES). The separation date will be determined by IDES, or if retained by the IDES and non-selected for retention by the SRB, the separation date will be NLT 30-days following final determination by the IDES. All officers considered by the SRB are presumed to be fit as of the start date of the board, unless otherwise identified for a MEB/PEB upon notification for consideration. As such, the MEB/PEB must have been ordered prior to the convening date of the board.

Appendix A
References

AR 40-501

Standards of Medical Fitness, dated 27 June 2019

AR 40-502

Medical Readiness, dated 27 June 2019

DA PAM 40-502

Medical Readiness Procedures, dated 18 December 2023

AR 40-400

Patient Administration, dated 8 July 2014

AR 635-40

Disability Evaluation for Retention, Retirement, or Separation, dated 19 January 2017

DA PAM 635-40

Procedures for Disability Evaluation for Retention, Retirement, or Separation, dated 12 January 2017

AR 600-8-4

Line of Duty Policy, Procedures, and Investigation, dated 12 November 2020

AR 670-1

Wear and Appearance of Army Uniform and Insignia, dated 26 January 2021

NGR 635-102

Officers and Warrant Officers Selective Retention, dated September 2018

Appendix C
Glossary

ADOS

Active-Duty Operational Support

AGR

Active Guard Reserve

BHE

Behavioral Health Evaluation

CM

Case Manager

DSS-C

Deputy State Surgeon- Clinical

eCase

Electronic Case Management

HRO

Human Resources Office

HRR

Health Readiness Record

IDES

Integrated Disability System

IDRM

Integrated Disability Referral Memorandum

LOD

Line of Duty

MAB

Medical Actions Branch

MAR2

MOS Administrative Retention Review

MEDCHART

Medical Electronic Data for Care History and Readiness Tracking

MOS

Military Occupations Standard

MRDP

Medical Retention Determination Point

MRNCO

Medical Readiness NCO

MSC

Major Support Command

Appendix C
Glossary

MTF
Military Treatment Facility

OCP
Operational Camouflage Pattern

PHA
Periodic Health Assessment

PM
Program Manager