Guidance for all Service members completing the DoD PHA

Upon completion of the Self-Assessment portion of the PHA, the Service member shall notify the unit medical representative or the nearest Medical Readiness Department that their PHA Self-Assessment is ready for review. The review and certification may be completed at any military Medical Treatment Facility (MTF), ship, or other medical department where the Service member’s PHA has been completed in the past. The Service member should consult with the MTF or medical department to which they are enrolled or the medical representative attached to their unit for clear guidance on the preferred method for communicating that the Service member self-assessment has been completed.

The PHA is not recorded as complete until all four steps (Self-Assessment, Record Review, Mental Health Assessment Review, and final PHA Review) are accomplished. The record review will verify the Service member is up-to-date on all Individual Medical Readiness (IMR) items and assess if there are any potential duty/deployment-limiting conditions to be addressed. The MHA review will then be completed over the phone, in-person, or through video-teleconference (if available). Once this discussion is completed, the DoD PHA will progress to the final review step. Upon completion of the final review, to include the initiation of any necessary referrals, the DoD PHA will be signed as complete by the final reviewing provider. Referrals initiated during the PHA do not have to be completed for the PHA to be signed as complete. All steps should be completed ideally within a month and no longer than three months, however there is no time-limit currently (i.e., a started PHA will remain open and valid until all four steps have been completed and certified).

Service members who require additional IMR items to be completed or who are referred for further care shall complete all evaluations and referrals in a timely fashion to minimize impact on the Service member’s deployment readiness. Items with previously set deadlines before the PHA due date, including but not limited to the annual dental exam, immunizations, medical equipment, or labs ideally should be addressed prior to completing the PHA to ensure a status of Fully Medically Ready upon completion of the PHA.
Service members with new duty restrictions or referrals from the PHA review must ensure their chain of command is aware of the new duty restriction or referrals.

**Service members completing the DoD PHA at non-Navy MTFs.**

Service members seen at non-Navy MTFs shall contact the appropriate readiness department of that MTF (i.e. the Base Operational Medicine Clinic, or BOMC, for Air Force MTFs) prior to completing the Self-Assessment portion of the PHA in order to understand their MTF's current PHA standard operating procedure.

At this time, all Military Service readiness information technology (IT) systems communicate with each other to allow Service members to complete the PHA self-assessment in their service-specific system (i.e. Navy and Marine Corps through ePHA, Air Force through ASIMS, and Army through MEDPROS). Regardless of which Service completes the PHA review, the Service member's IMR status will be updated automatically.

As the new PHA is fully implemented across all services, Service members may encounter situations where they are told the full DoD PHA process cannot be completed electronically and are requested to perform a paper PHA and MHA. In these situations, Service members must inform their appropriate command representative or the nearest Navy MTF upon completion of the PHA so the member's IMR status can be updated manually. The completion of the PHA can be verified by the person responsible for updating the IMR status through a corresponding note within the electronic medical record (e.g. AHLTA).

**Service members stationed remotely completing the DoD PHA.**

Service members stationed in remote duty locations (CONUS and OCONUS) without access to a military MTF will utilize the Navy MTF identified as having medical cognizance in accordance with BUMEDINST 6320.85A. Contact the regional TRICARE Area Office for additional questions regarding medical cognizance.

1. Service members stationed remotely must ensure the Navy MTF with medical cognizance that will perform the review of the PHA has copies of all medical care documentation for any health care (including mental health care) received since the previous PHA. Service members must contact the MTF to determine the desired method of transmitting these documents.

2. Until further guidance can be developed and promulgated, Service members must contact the Navy MTF with medical cognizance to determine how the new DoD PHA will be reviewed and how the person-to-person review will be accomplished. If the Service member is found to have any conditions that require an in-person evaluation, the Service member must utilize the TRICARE Area Office, International SOS, and the MTF Fleet Liaison to coordinate an evaluation, which may include travel to the nearest military MTF. MTFs must accommodate the completion of the DoD PHA for Service members stationed in remote duty locations under their medical cognizance in accordance with enclosures (2) and (3) of BUMEDINST 6320.85A. MTFs must ensure all relevant staff (e.g. Fleet Liaison, TRICARE,
Medical Readiness) are knowledgeable about facilitating and providing this service to remotely located Service members.

**Guidance for Health Care Personnel reviewing PHAs.**

Training. Staff responsible to review and complete a DoD PHA, must first complete required training available on Swank Healthcare under the following modules:

1. Record Reviewer training course number: NMELTC-FY17-RRT
2. Mental Health Assessment Reviewer training course number: NMETC-FY17-MHA
3. Mental Health Assessment Reviewer certification. Additional training required for providers who will perform the person-to-person MHA review is found at [https://mhaquiz.dhhq.health.mil/](https://mhaquiz.dhhq.health.mil/). Providers must complete the training and pass the quiz to obtain a certificate.
4. PHA Provider training course number: NMETC-FY17-PHA Training
5. Once the appropriate level of training is complete, all staff reviewing or completing any step of the DoD PHA are required to submit a completed and signed System Authorization Access Request (SAAR) form. Further instructions on gaining account access may be found at the ePHA website: [https://data.nmcphc.med.navy.mil/pha/Index.aspx](https://data.nmcphc.med.navy.mil/pha/Index.aspx)

**Reviewing the PHA**

1. Only health care personnel who have completed the training listed above and who have been granted access to the ePHA website will be able to review the new DoD PHA within the ePHA website.
2. Only personnel with the appropriate credentials specified in the training listed above will be allowed to review the MHA and DoD PHA. For the purpose of completing the DoD PHA, Independent Duty Corpsmen who complete the training listed above are authorized to review the Mental Health Assessment with a Service member and place any necessary referrals telephonically in exception to the current language in OPNAVINST 6400.1C.
3. For Navy MTFs and clinics routinely completing PHAs on personnel from other services, the following guidance shall be followed:
   - As of the release of this message, PHAs completed by US Air Force personnel with Aeromedical Services Information Management System (ASIMS) and US Army personnel within Medical Protection System (MEDPROS/MODS) shall be reviewed through the Navy ePHA website using the same process as for reviewing Navy/Marine Corps PHAs.
   - US Coast Guard personnel, in addition to the standard ePHA process noted in this guidance, require a face-to-face interview with the reviewing provider for their MHA.
4. If limitations for the health care personnel or for the Service members do not allow the PHA to be completed utilizing the new DoD PHA with the integrated MHA, the health care
personnel performing the PHA must ensure a separate MHA is completed at the same time as the PHA, along with a person-to-person review. USCG personnel still require a face-to-face review as stated previously. The PHA will not be considered complete until both components (PHA and MHA) have been appropriately reviewed.

(5) Service members with a duty or deployment-limiting condition require written communication explaining restrictions to the Service member's command in addition to the documentation within AHLTA for medical visibility.

(6) Sailors and Marines with a duty or deployment limiting condition anticipated to exceed 90 days, or three consecutive 30 day periods of light duty, shall be referred to a Medical Evaluation Board, in accordance with Manual of the Medical Department Chapter 18 and SECNAVINST 1850.4E.

(7) Once the final review has been completed, the PHA shall be signed as complete. Outstanding readiness items, such as the annual dental exam, immunizations, medical equipment, labs, other ongoing medical concerns, or active referrals (either initiated from the PHA or in previous medical encounters) do not need to be completed for the PHA to be considered complete. The Service member shall be informed of all additional outstanding readiness items and any referrals initiated and directed to complete them as soon as possible.