



DEPARTMENT OF DEFENSE
HEADQUARTERS, UNITED STATES MILITARY ENTRANCE PROCESSING COMMAND
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MECD

April 7, 2019

MEMORANDUM FOR SECTOR COMMANDERS
BATTALION COMMANDERS
MEPS COMMANDERS
DIRECTORS AND SPECIAL STAFF OFFICERS

SUBJECT: Policy Memorandum 2-6, Transgender Applicant Processing

References:

- (a) Directive-type Memorandum 19-004, "Military Service by Transgender Persons and Persons with Gender Dysphoria," March 12, 2019.
- (b) DoD Instruction 6130.03, "Medical Standards for Appointment, Enlistment, or Induction in the Military Services," May 6, 2018.
- (c) USMEPCOM Regulation 40-1, "Medical Qualification Program," July 24, 2017.
- (d) DoD Manual 1145.02, "Military Entrance Processing Station (MEPS)," July 23, 2018.
- (e) Policy Memorandum 2-5, "Transgender Applicant Processing," December 8, 2017.
- (f) Directive-type Memorandum 16-005, "Military Service of Transgender Service Members," June 30, 2016.
- (g) DoD Instruction 1300.28, "In-Service Transition for Transgender Service Members," October 1, 2016.

PURPOSE. This memorandum provides policy guidance for processing transgender applicants for military service in accordance with references (a) and (b). In accordance with reference (a), the term "transgender" applies to individuals who identify with a gender that differs from their biological sex, which is defined as "a person's biological status as male or female based on chromosomes, gonads, hormones, and genitals." Biological sex is sometimes referred to as a person's sex at birth or a person's birth sex. This Policy Memorandum shall remain in effect until expressly revoked.

APPLICABILITY. This policy applies to all USMEPCOM personnel and activities.

BACKGROUND. The medical accession standards set forth in references (a) and (b) will be implemented on April 12, 2019. Implementation is mandatory. Prior to that date, the civilian and military team of USMEPCOM must prepare to implement the necessary procedural adjustments for processing transgender applicants. In accordance with references (a) - (d), this Policy Memorandum establishes standard operating procedures and specific processing guidance that will be applied across the command. It is an administrative tool, not a health management tool or health policy document, and does not confer rights, procedural or substantive, to applicants. Any provision of USMEPCOM or individual Military Entrance Processing Station (MEPS) policy or guidance inconsistent with this memorandum is hereby superseded.

USMEPCOM mission requirements and physical space limitations often will not afford the opportunity for completely private screening procedures. All applicants, including those who are transgender, may express concern about privacy in bathrooms, ortho-neuro rooms, applicant hotel rooms, or similar venues. In these cases, Commanders may employ reasonable alternate measures to provide greater privacy, should daily capacity allow. Commanders or their representatives should review standard operating procedures during the morning Commander's Brief, highlighting the rights, sensitivities, and privacy needs of all applicants, while acknowledging that the daily production environment may limit a Commander's ability to provide individual screening procedures.

As always, every applicant will be treated with dignity and respect. Applicants will be evaluated per established DoD standards for the purpose of qualifying for Military Service. Out of respect for all applicants, an individual's gender identity, defined in reference (a) as "an individual's internal or personal sense of gender, which may or may not match the individual's biological sex," should not be disclosed without his or her permission, unless disclosure is a routine use made for official purposes, in accordance with applicable law and policy. Requests for privacy should be reviewed and adjudicated so as to avoid stigmatizing any applicant.

I have the utmost confidence that the actions of the USMEPCOM team will continue to exemplify our core values of Integrity, Teamwork, Professionalism, and Respect. Ultimately, Commanders are responsible for upholding and maintaining the high standards of the U.S. military at all times, and in all places.

POLICY.

Identity Validation:

Per reference (d), identity validation is a shared responsibility with Military Service recruiting command personnel. Service recruiting command personnel are responsible for notifying USMEPCOM (or the servicing MEPS) of an individual's identity. In order to access, applicants must provide at least one form of valid identification as specified in individual Service recruiting command policies that reflects their biological sex, unless they are exempt in accordance with reference (a). Applicants who are not exempt at the time of accession will have their biological sex recorded as their gender marker in DEERS. Applicants who are exempt must produce either a certified true copy of a state birth certificate reflecting their preferred gender, a certified true copy of a court order reflecting their preferred gender, or a U.S. Passport reflecting their preferred gender for enrollment of their preferred gender as their gender marker in DEERS.

Processing:

In accordance with reference (a), individuals are "exempt" if they, before April 12, 2019:

a. Entered into a contract for enlistment into the Military Services using DD Form 4, "Enlistment/Reenlistment Document Armed Forces of the United States," or an equivalent (commonly referred to as being a member of the Delayed Entry Pool/Program); or, were selected

for entrance into an officer commissioning program through a selection board or similar process;
and

b. Either:

(1) Were medically qualified for Military Service or selected for entrance into an officer commissioning program in their preferred gender in accordance with reference (f); or

(2) As a Service member, received a diagnosis of gender dysphoria from, or had such diagnosis confirmed, by a military medical provider.

For exempt individuals, the processing for military service shall be conducted using reference (e).

For prior service applicants re-accessing into the regular or reserve components of the Military Services, including federally recognized units or organizations of the National Guard:

a. Service members who are exempt pursuant to reference (a) who then subsequently separate from military service, regardless of the period of separation, will continue to be considered exempt and be re-accessed pursuant to the medical standards in reference (a), attachment 3, para. 1.b., provided they are medically qualified in all other respects in accordance with DoDI 6130.03.

b. The Military Departments and USCG may not waive or revoke a prior-service applicant's exempt status pursuant to reference (a), attachment 3, para 3.a.

For individuals who are not exempt, the provisions of this Policy Memorandum apply.

For clarification on whether an applicant is exempt, contact the MEPCOM Operations Center (MOC) through the established MOC ticket system.

All projections and processing actions for non-exempt applicants will be based on the biological sex of the applicant.

During the routine preliminary screening of non-exempt applicants required by reference (d), recruiters will refrain from screening out transgender applicants based on the information contained solely in the Accessions Medical Prescreen Report (DD Form 2807-2), and will instead allow the MEPS medical provider to perform a medical prescreening of all applicants for military service. This is not intended to eliminate the recruiter's ability to perform preliminary screening of applicants as allowed in existing policy and regulations. It is intended to emphasize the use of existing access to local MEPS medical departments, enabling recruiting personnel to obtain answers to questions concerning an applicant's medical condition(s) in accordance with reference (c), para 2-1 a-d, "MEPS Dial-A-Doc/Email-A-Doc" programs. Due to the complexity of this issue, the use of these existing programs will ensure recruiters are making an informed preliminary screening determination on medical conditions that were previously qualifying and/or disqualifying. MEPS Medical Departments will ensure timely response to recruiter inquiries through the Dial-A-Doc/Email-A-Doc programs. As outlined in reference (c), medical

inquiries that require additional policy clarification will be forwarded to the MOC through the established MOC ticket system. Consistent with reference (b), the Military Service concerned may allow applicants who do not meet the physical and medical standards prescribed in this DTM to be considered for a medical waiver.

For the purposes of military entrance processing, the non-exempt applicant's biological sex will be used on all forms asking for the "sex" of the applicant. The only form on which any difference between biological sex and preferred gender will be indicated is the DD Form 2807-2.

For the purposes of identity validation, the non-exempt applicant's signature verifying his or her biological sex on the USMEPCOM Form 680-3A-E certifies that the applicant is willing and able to adhere to all applicable standards, including the standards associated with the applicant's biological sex.

For non-exempt applicants who do not identify with either male or female, their biological sex will be used on all forms when asking for the "sex" of the applicant. For example: if an applicant was born male and does not identify as male or female, male will be selected in the "sex" category.

Non-exempt transgender applicants who have a history or diagnosis of gender dysphoria, have transitioned to a preferred gender, or have received or are receiving transition-related treatment (i.e., cross-sex hormone therapy, sex-reassignment surgery, or genital reconstruction surgery) will be identified from their responses on the prescreen submission forms (DD Form 2807-2), and this information will be used to make medical qualification decisions using references (a) and (b).

Pending release of the updated DD Form 2807-2, the current DD Form 2807-2 "SECTION III-APPLICANT COMMENTS" will be used to identify transgender applicants to the medical department. The following annotations will be placed in Section III for **ALL APPLICANTS**, "Biological Sex: (male or female)" and "Preferred Gender: (male or female)." If biological sex and preferred gender are different, the recruiter will:

a. If the applicant has a history or diagnosis of gender dysphoria, obtain letter(s) from the appropriate licensed mental health provider(s), attesting that the applicant has been stable in his or her biological sex according to the standards prescribed in references (a) - (b) and this policy guidance.

b. Include with the prescreen submission all relevant medical documents provided by the applicant (e.g., documentation of counseling, surgery, hormone treatments, if any).

Room assignment, height/weight standards, ortho-neuro exam, specimen observation, underwear requirements, chaperone, and bathroom assignments will be made based on the applicant's biological sex.

FOR MEPS MEDICAL DEPARTMENT

In accordance with reference (a) - (c):

a. As to any non-exempt applicant, a history or diagnosis of gender dysphoria will be disqualifying unless:

(1) As certified by a licensed mental health provider (psychiatrist, clinical psychologist, clinical social worker with a master's degree or doctorate in clinical social work, or psychiatric nurse practitioner), the applicant can demonstrate 36 consecutive months of stability in his or her biological sex immediately preceding submission of the application (DD Form 2807-2) without clinically significant distress or impairment in social, occupational, or other important areas of functioning.

(2) The applicant can demonstrate he or she has not transitioned to his or her preferred gender and a licensed medical provider has determined that gender transition is not necessary to protect the health of the individual.

(3) The applicant is willing and able to adhere to all applicable standards, including the standards associated with the applicant's biological sex.

b. A history of cross-sex hormone therapy or a history of sex reassignment or genital reconstruction surgery will be disqualifying.

c. Transgender persons without a history or diagnosis of gender dysphoria and without clinically significant distress or impairment in social, occupational, or other important areas of functioning as certified by a licensed medical provider, and who are otherwise qualified for service, may serve, like all other Service members, in their biological sex.

d. For the purpose of this Policy Memorandum, the term "licensed medical provider" is defined as a health care professional who is licensed, credentialed, and granted clinical practice privileges to provide health care services within the provider's scope of practice, in a medical treatment facility. This definition includes surgery, OB/GYN, urology, plastic surgery, primary care provider, endocrinologist, psychiatrist, clinical psychologist, clinical social worker with a master's degree or doctorate in clinical social work, and psychiatric nurse practitioner.

e. For the purpose of accession, the term "stability" is defined in reference (a) as an "absence of clinically significant distress or impairment in social, occupational, or other important areas of functioning associated with marked incongruence between an individual's experience or expressed gender and the individual's biological sex." Reference (a) directs that stability be demonstrated for a period of 36 consecutive months preceding submission of DD Form 2807-2.

f. The Services must submit DD Form 2807-2 with substantiating and supporting medical documents, as specified in the USMEPCOM Medical Prescreen Program Standard Operating Procedures, together with all other documentation requested by the MEPS provider, for an

applicant to be considered for a medical examination at the MEPS, in accordance with reference (c), para 2-2.

g. The following action will be taken for applicants who, during prescreening, disclose that they are transgender: The MEPS medical provider will determine if Processing is Authorized (PA) in accordance with paragraph 2-3 of reference (c) and this policy guidance. For applicants with a history or diagnosis of gender dysphoria, if medical treatment records substantiate stability, but do not substantiate that the applicant meets the requirement that he or she is stable (as defined in paragraph e above) for a period of 36 consecutive months preceding submission of DD Form 2807-2, the applicant will be given a Return Justified (RJ) date on the DD Form 2807-2 of 36 months minus the period of previously documented stability. In cases during prescreening in which an RJ date has been assigned, or in cases in which the MEPS medical provider has determined Processing is Not Justified (PNJ), the Service Medical Waiver Review Authority (SMWRA) (upon request of the Service) may Request Processing (PRW) in accordance with the procedures contained in paragraph 2-3 of reference (c). The applicant should be notified that he or she must resubmit a DD Form 2807-2 if the RJ date is beyond 90 days from the applicant's signature date on the DD Form 2807-2.

h. The following action will be taken for applicants who, during processing at the MEPS, disclose to the MEPS medical provider that his or her preferred gender is other than the applicant's biological sex as recorded on the applicant's DD Form 2807-2: The applicant is placed in an open status (S-O) and is returned to the recruiter or Service liaisons. The recruiter will:

(1) Have the applicant accurately complete the DD Form 2807-2 and submit with the prescreen form all related medical documents, to include any and all appropriate medical care or transition-related treatment records (e.g., documentation of counseling, surgery, hormone treatments).

(2) If the applicant has a history or diagnosis of gender dysphoria, have the applicant obtain letter(s) from the appropriate licensed mental health provider(s) attesting that the applicant has been stable according to the standards prescribed in reference (a) - (b) and this policy guidance.

i. The following action will be taken for applicants who, during processing at the MEPS, were found to have medical treatment records that substantiate stability (as defined in paragraph e above) but do not meet the 36 consecutive months of stability preceding submission of DD Form 2807-2: The applicant will be placed in a temporary disqualified status (S-3T) and will be given a Reevaluation Believed Justified (RBJ) date on the DD Form 2808 of 36 months minus the period of previously documented stability. In addition, the sponsoring Service may request a Medical Exception to Policy (ETP) to process sooner than the 36 month requirement for stability, using the procedures in reference (c) to submit the applicant for consideration for a medical waiver by the SMWRA, as authorized by references (a) and (b).

j. For consistency, as USMEPCOM implements these accession medical standards, and given the complexity and inter-dimensionality of medical qualification decisions, copies of the medical processing records (DD Form 2807-2, Report of Medical History (DD Form 2807-1),

Report of Medical Examination (DD Form 2808)) and the supporting medical records for all transgender applicants will be submitted to the USMEPCOM Medical Plans and Policy Directorate (J-7) for review after MEPS medical providers have rendered a medical qualification determination in regard to that applicant. The J-7 review is instituted to ensure consistency in the application of the new standard and to gather best practices and lessons learned as they pertain to this guidance. Supplemental guidance may be provided following J-7 review. The J-7 review will not delay medical qualification decisions under the foregoing standards from MEPS medical providers.

The point of contact for all medical related questions is the Clinical Operations Division, J-7/MEMD-COD, (847) 688-3680 ext. 7132, email osd.north-chicago.usmepcom.list.hq-j7-memd-clinical-ops-div@mail.mil.

The point of contact for operational aspects of this policy is the Accession Division, J-3/MEOP-AD, (847) 688-3680 ext. 7519, email osd.north-chicago.usmepcom.list.hq-j3-meop-accession-division@mail.mil.



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