Click on any of the below:

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6. Formal Physical Evaluation Board (FPEB)
7. Appeals: Air Force Personnel Board (AFPB)
8. Retirement and Separation
9. Concurrent Retirement and Disability Pay (CRDP)
10. Combat Related Special Compensation
11. Glossary
Introduction to the Disability Evaluation System

**Purpose**

The purpose of the Air Force Disability Evaluation System (DES) is to maintain a fit and vital force. To this end, the Air Force DES may transition an active duty, Air Force Reserve, or Air National Guard Airman from military service who can no longer reasonably perform the duties of their office, grade, rank or rating. The DES ensures fair compensation to Airmen whose military careers are cut short due to a service-incurred or service-aggravated medical condition.

**Pre-DES**

There are three elements preceding referral to the DES, consisting of medical treatment, the Deployment Availability Working Group (DAWG), and the Initial Review in Lieu Of (IRILO) a Medical Evaluation Board (MEB) process.

**DES Components**

There are four main components of the DES; the Medical Evaluation Board (MEB), the Informal Physical Evaluation Board (IPEB), the Formal Physical Evaluation Board (FPEB), and the Air Force Personnel Board (AFPB), a component board of the Secretary of the Air Force Personnel Council, SAF/PC.

For more additional information, search in MyPers for “Disability Evaluation System” or Air Force Disability Evaluation System on the AFPC website.

**Disclaimer**

If there is a difference in language or interpretation between these FAQs and any governing regulation, instruction, or law, the governing regulation, instruction, or law is the controlling reference material. Please notify your Physical Evaluation Board Liaison Officer (PEBLO) to email the DES Quality Assurance Branch at the Air Force Personnel Center (APFC/DPF-QA) and we will make any necessary corrections to ensure consistency and understanding.

**Feedback**

This list of frequently asked questions is meant to be helpful. If you have a question you wish had been answered, please ask your PEBLO to email AFPC/DPF-QA with the relevant information and why you think it would have been helpful to have this question answered. Thank you.
Commander’s Corner

1. **What is my role as the Commander for my Airmen as they go through the Disability Evaluation System (DES) and how should I be involved?**

   Commanders communicate critical information, to include a retention recommendation, to the disability evaluation board through the **Commander’s Impact Statement (AF Form 1185)**. This statement is your opportunity to detail how the member’s condition effects the performance of military duties and impacts the unit’s mission. Once completed, you will review the information with the Airman and obtain their acknowledgement and any comments on the form.

   The Airman’s chain of command can also help manage expectations and ensure they are ready to transition into civilian life if found unfit for continued military service. Commanders and First Sergeants should help their Airmen navigating the DES take steps to prepare for the strong likelihood of separation or retirement, including early participation in the Transition Assistance Program.

2. **What are some resources I can use to help my Airmen and their families?**

   The number of resources can be overwhelming, so your willingness to help your Airmen understand what is available and how to access the correct information can be critical to their care and recovery. Many times, Airmen receive incorrect information via word of mouth from a friend or an unofficial source, setting the Airman up for failure.

   A good resource to first push to your Airmen is the DES section of the **MyPers website**.

   There are a number of other resources. While many target “Wounded Warriors”, the resources are helpful to many Airmen going through the DES, regardless of how they became wounded, ill or injured:
3. **Why does this process take so long?**
   In two words: due process. The Air Force takes very seriously the discharge of a wounded, ill or injured Airman, to ensure they are treated fairly and compensated appropriately when their service is cut short due to a service-incurred or service-aggravated medical condition. The Air Force DES process starts when the Airman is referred to a MEB, and is expected to take approximately 230 days, assuming the Airman utilizes all levels of appeal.

4. **When can my command receive a replacement for a wounded, ill, or injured Airman going through the DES?**
   The replacement requisition process begins once the Airman has been processed through the Air Force DES and has an approved separation or retirement date.

5. **What manning, assignment, or staffing decisions can I make, or can I not make, while an Airman is going through DES?**
   Air Force Instruction 10-203, *Duty Limiting Conditions*, establishes procedures for the documentation and administrative management of Airmen with injuries or illnesses impacting their ability to perform military duties. These procedures ensure maximum utilization and readiness of personnel, while preserving their health and minimizing risk of further injury or illness. When your Airman is going through the DES, they are ineligible for PCS or re-enlistment. Your Airman will also likely have both an AF Form 469, detailing duty limiting conditions, and an AF Form 422, describing longstanding or permanent physical limitations, used for establishing suitability for career fields or AFSC’s.

6. **Can my Airman go on leave or TDY while they are being evaluated?**
   The following restrictions exist to ensure your Airman is available for necessary disability processing actions:

   (1) Airmen may not go TDY or take leave outside the local area. Coordinate leave outside the local area, TDY and other requests for your Airman through the PEBLO.

   (2) Airmen will not be reassigned during until they receive notification of their final disability determination.

   **EXCEPTIONS:**
   (a) Exceptions to the restrictions on TDY and reassignment are those actions necessary for completion of disability processing, i.e., TDY to the FPEB and TDY or permanent change of station (PCS) in a patient status for required medical evaluation or treatment.

   (b) Exceptions to the leave restriction outside the local area will be granted when warranted by circumstances and when approval of leave will not adversely affect case processing.
7. **Who should I contact when I need to find out my Airman’s status or if I have questions about the process?**

Physical Evaluation Board Liaison Officers (PEBLO's) are the primary point of contact at your local Military Treatment Facility (MTF) and are tasked with processing your Airmen's case. Do not hesitate to contact the PEBLO if you have a question. You can learn more about PEBLO’s in this section of the FAQ’s: Medical Evaluation Board (MEB). **What information can/can’t be shared with me and how does HIPAA apply?**

Commanders are notified when (1) an Airman is referred into the DES, (2) the case moves from the various phases and stages of the process, and (3) when disability findings are published. The PEBLO is the primary source for receiving this information.

Some Protected Health Information (PHI) may be shared with Commanders, e.g., they will be made aware of all DES and Department of Veterans Affairs (VA) Compensation and Pension (C&P) examination appointments. Commanders will also be notified if an Airman fails to report for any scheduled examinations and if necessary, units may be asked to provide an escort.

In addition, in accordance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy rule pertaining to Military Command Exception, MTFs may disclose the minimum necessary amount of PHI to support mission accomplishment, e.g., if the Unit Commander contacts the Airmen’s Primary Care Manager (PCM) or military provider (for ANG) regarding the Airman’s medical condition in order to complete the AF Form 1185, Commander’s Impact Statement for Medical Evaluation Board.

At any time, Commanders may contact the PEBLO regarding non-clinical information pertaining to the Airman’s DES process status. All clinical questions should be posed to clinical representatives assisting in the DES process, e.g., clinical case managers, PCMs, etc.

8. **How do I find out the results of my Airman’s case and how am I involved in notifying the Airmen of their results?**

Disability evaluation decisions flow through the PEBLO to commanders. The Commander and PEBLO collaborate to share the PEB findings with the Airman. Additionally, the Commander is notified of their Airman’s (1) acceptance of findings, (2) request for reconsideration, or (3) request for an appeal to the Formal Board (FPEB). If a FPEB is requested, Commanders will be notified of the date the board will convene.

Commander notifications are limited to the overall findings. Detailed information such as disability ratings and severance payments are only released to the Airman by the PEBLO.

9. **What if I believe it’s in the best interest of the Air Force to expedite an Airman’s case through the Disability Evaluation System?**

A Commander may direct a Service member with potentially unfitting physical disabilities into the Legacy DES when processing through the Integrated DES would have detrimental impact on the member or the Air Force. See question #11 in Medical Evaluation Board (MEB) section of this FAQ document.

10. **What happens if an Airmen going through the DES gets in trouble?**

Misconduct and how it affects your Airman's DES processing is a complicated issue contingent upon a host of factors, including the type, severity, and timing of the misconduct - to name a few. It is critical to immediately notify the servicing PEBLO about the misconduct and potential disciplinary actions being
considered/taken. Your servicing legal office can help guide you through the implications your disciplinary choices will have on your Airman's DES processing.

11. **Are Airmen who are permanently retired due to a disability eligible for a retirement ceremony?**
   Airmen who are permanently retired due to disability have the same benefits as any other traditionally retired Airman, regardless of the injured or ill Airman’s total time in service.

12. **Are Airmen directed to the Temporary Disability Retirement List (TDRL) eligible for retirement recognition?**
   Yes. TDRL retirement ceremonies are discussed in the following MyPers article: [https://mypers.af.mil/app/answers/detail/a_id/12829](https://mypers.af.mil/app/answers/detail/a_id/12829). Unless an Airman has over twenty years, they are not eligible to receive certain recognition members receive for a voluntary service retirement or permanent disability retirement. However, there are steps a Commander can take to ensure their service is honored. A recommended script for a retirement ceremony can be accessed in the below pdf document.

![pdf](TDRL_Ceremony_Script Section M-4 o)

13. **Are Commanders’ responsibilities related to the Air Force Disability Evaluation System (DES) listed anywhere?**
   A complete list of Commanders’ responsibilities can be found in DoDM 1332.18-V2, Appendix 7 to Enclosure 4, “Commander Procedures”. This MyPers article and fact sheet for Commanders provides additional information about AF Form 1185 and discusses the process, roles and responsibilities, and best practices to assist Commanders in providing comprehensive support for their Airmen as they go through the DES.
1. **What is the DAWG?**

The DAWG is established at each wing/base level and meets at least monthly to review personnel with a deployment limitation code affecting mobility, retention, or long-term physical fitness. The DAWG identifies personnel not deployment eligible and tracks progress of their medical condition(s) through resolution or definitive disposition. The DAWG also reviews cases referred for potentially unfitting medical conditions.

2. **Who are the members of the DAWG?**

DAWG membership consists of the Chief of Aerospace Medicine (SGP), the Chief of Medical Staff (SGH), the Senior Profile Officer (SPO), all available profile officers, the Medical Standards Management Element (MSME), Physical Evaluation Board Liaison Officer (PEBLO), a primary care manager representative, and, as appropriate, an ARC Wing Fitness Program Manager (WFPM). Others may be assigned or invited to attend as needed (e.g. DoD/ Department of Veterans Affairs (VA) Military Services Coordinator (MSC)). In addition, a mental health representative may be invited or appointed to the DAWG depending on the number and complexity of mental health cases to be reviewed.

3. **Why are cases referred to the DAWG?**

Potentially unfitting cases are reported to the DAWG through five trigger events. A trigger event is a condition or occurrence indicating a service member has (a) medical and/or mental health condition(s) inconsistent with retention standards or deployability.

- a) Provider, after discovering a potential or questionable service-disqualifying medical condition for any Airman regardless of rank.
- b) DAWG surveillance tracking determines an Airman has a chronic condition precluding him/her from performing AFSC duties or deploying to field conditions, has an unfitting condition and/or will not return to mobility status prior to cumulative 365 days for condition or related issue(s).
- c) Commander requests evaluation of unit service members due to poor duty performance or deployment concerns stemming from a potential medical or mental health condition.
- d) DP2NP, Medical Retention Standards (or ARC/SGP), directs. DP2NP may identify conditions via an Annual or Modified RILO and direct the Military Treatment Facility (MTF) to submit an IRILO to a medical evaluation board.
- e) PCS, TDY or Deployment Cancellation or Curtailment for a medical or mental health reason.

4. **What does the DAWG do?**

The DAWG will determine whether an Airman’s condition(s) meets standards for continued military service. Options for the DAWG include:

- a) Case dismissal when the Airman is found fit for continued military service.
b) Refer the case to AFPC/DP2NP, AFPC Medical Retention Standards Branch (see Question #8) for an IRILO when the condition does not meet medical retention standards and/or the Airman is not capable of deploying without some restrictions.

5. Who is AFPC/DP2NP?
The Air Force Personnel Center (AFPC) Medical Retention Standards Branch (DP2NP) is the reviewing body for all active duty IRILO reviews, the sole approval authority for Airman Medical Transition Unit (AMTU) assignments, active duty ALC-Codes, approved Medical Holds, and non-emergent surgery during an Airman’s final six months of service. DP2NP is the office of primary responsibility for implementing HQ USAF Surgeon General (SG) policy on medical standards for continued military service, and may provide interpretations of gray areas within AFI 41-210 consistent with current HQ USAF/SG intent.

6. What is an IRILO?
In order to minimize inappropriate referrals to the DES, there will be a two-step, pre-DES screening process on all potential cases. The first step will be accomplished by the MTF DAWG. The second step is the Initial Review In Lieu Of MEB (IRILO), accomplished by DP2NP (Medical Retention Standards Branch) or the appropriate ARC/SGP. Cases AFPC/DP2NP or ARC/SGP directs for a MEB will be entered into the Air Force DES process. The outcome of the reviews include:

a) Return to Duty (with/without an Assignment Limitation Code) and remove AAC 37.
b) Direct an MEB and maintain AAC 37.
c) Direct an MEB at another MTF and maintain AAC 37.
d) Returned without Action (reason and disposition of AAC 37 will be specified).
e) Continued Military Medical Observation and Care and maintain AAC 37.

7. What is an Assignment Limitation Code (ALC)?
Assignment Limitation Codes (ALC), permanent or semi-permanent, are used to alert personnel managers of long term constraints on assignment or utilization of Airmen. They broadly restrict, or limit the selection of Airmen for assignment to or from certain duties or areas and apply to a duration longer than just to the current duty assignment. ALC’s ensures Airmen are not assigned to locations lacking the appropriate specialized medical care needed and allow tracking of individuals with potentially deteriorating conditions.

8. What is Medical Hold?
Per AFI 41-210, medical hold is a method of retaining an Airman beyond an established retirement or separation date for reason of disability processing. It may be necessary to place members on Medical Hold if DP2NP directs a MEB, and the member is within 60 days of separation or retirement. It will not be used for the purpose of evaluating or treating chronic conditions, performing diagnostic studies, elective treatment of remedial defects, non-emergent surgery or its subsequent convalescence, civilian employment issues, preservation of terminal leave, or for any other condition not warranting termination of active duty.

GO TO THE NEXT STAGE OF THE DES → Medical Evaluation Board (MEB)
Medical Evaluation Board (MEB)

1. **What is a MEB?**
   The MEB makes a recommendation on your overall physical and mental ability to continue serving in the military. This recommendation is based on a review of your medical records to include a Narrative Summary accomplished by a medical provider. The board consists of three staff medical officers.

2. **Who is a PEBLO?**
   The Department of Defense (DoD) defines the Physical Evaluation Board Liaison Officer (PEBLO) as one of the most important contacts for Airmen entered into the Air Force Disability Evaluation System (DES). The PEBLO serves as a non-clinical case management specialist who assists Airmen once they are referred for a MEB and as they transition through the DES.

PEBLOs function as the principle liaison between the Airman, their unit commander and a multi-disciplinary team of clinical and non-clinical (i.e. recovery care coordinators) DES stakeholders. Clinical representatives include physicians, case managers and other health care professionals. Non-clinical representatives include, legal representatives from the Office of Airmen’s Counsel (OAC), Recovery Care Coordinators (RCC) and the Air Force Physical Evaluation Boards. The PEBLOs detailed knowledge of the DES process ensures effective collaboration among DES stakeholders to better support Airmen.

3. **What are an Airman’s obligations/responsibilities in the DES process?**
   - Ensure the PEBLO has your most current contact information (e-mail, work/home/cell numbers)
   - Make available all medical records from non-DoD treatment facilities
   - Attend all appointments. This includes medical (both at the Military Treatment Facility (MTF) and Department of Veterans Affairs (VA)) as well as non-medical appointments such as meeting with PEBLOs, Unit Commanders, or Legal Representatives
   - Seek legal advice as appropriate
   - Contact the RCC regarding enrollment in the Recovery Care Program (RCP) (Optional)
   - Coordinate with PEBLO before going on leave/TDY
   - Enroll in the Transitional Assistance Program (as early as possible in the process)
   - File any appeal options within established timeframe

4. **The MEB has told me I’m “unfit”. Will I be kicked out of the service?**
   No. A MEB does not have the authority to render final decision as to whether a member is fit or unfit for continued active duty.
5. **What does the MEB consist of?**

   The MEB is the medical portion of the DES process. The results determine whether an Airman meets the Air Force specific medical retention standards, but the MEB does not determine the Airman’s level of disability. The MEB consists of a minimum of three physicians, and in cases involving behavioral health conditions, one physician must be a mental health care provider. The MEB decision is based on the case file prepared by the PEBLO. The case file contains:
   - Service Treatment Records, to include civilian records
   - A narrative summary (NARSUM) of the Airman’s medical condition(s)
   - Results from tests and medical examinations performed related to the Airman’s condition(s)
   - The Commander’s Impact Statement describing how the injury or illness impacts the Airman’s ability to perform their duties
   - Other information the MEB may require

6. **What can a MEB recommend?**

   A MEB can recommend Return to Duty (RTD) or Referral to the Informal Physical Evaluation Board (IPEB).

7. **What is meant by Return to Duty?**

   If the recommendation of the MEB is Return to Duty, the opinion of the MEB is you are reasonably able to fulfill the demands of your purpose of employment on active duty.

8. **Do I have any rights related to the MEB process?**

   Although you do not appear before the MEB, after the board is held and approved by the MEB President, you will be given an opportunity to review the MEB results. If you disagree with the MEB recommendation, then you may request an Impartial Medical Review (IMR) by a physician or other appropriate health care professional who is independent of the MEB. The purpose of an IMR is to:
   a) Serve as an independent source of review of the MEB findings and recommendations, and
   b) Advise and counsel the Service member regarding the findings and recommendations of the MEB, and
   c) Advise the Service member on whether the MEB findings adequately reflect the complete spectrum of the Service member’s injuries and illnesses.

   Separate from the IMR, Airmen have the right to submit a rebuttal to the MEB as well.

9. **Does the MEB recommend disability percentages?**

   No. The MEB is only the means of referring a case for disability consideration. The MEB has no authority to recommend disability percentages. Essentially the MEB’s sole function is to recommend an Airman’s case for consideration to the IPEB for fitness or unfitness determinations.

10. **Can I go on leave or TDY while being evaluated?**

    The following restrictions exist to ensure you are available for necessary disability processing actions:
    - Airmen may not go TDY or take leave outside the local area.
    - Airmen will not be reassigned until they receive notification of their final disability determination.
    - Exceptions to the restrictions on TDY and reassignment are those actions necessary for completion of disability processing, i.e., TDY to the FPEB and TDY or permanent change of station (PCS) in a patient status for required medical evaluation or treatment.
    - Exceptions to the leave restriction outside the local area will be granted when warranted by circumstances and when approval of leave will not adversely affect case processing.
    - Coordinate leave outside the local area, TDY and other requests through your PEBLO.
11. **What's the difference between IDES and LDES?**

The DES provides for two different procedures to process an Airman through the Air Force Disability DES because of an illness or injury; the Legacy Disability Evaluation System (LDES) and the Integrated Disability Evaluation System (IDES). The creation of the IDES in 2008 had two primary goals: streamlining the disability evaluation process, and making it easier for service members discharged because of a medical disability to secure care and associated benefits. The LDES process is similar to the IDES except it doesn’t involve the Department of Veterans Affairs (VA), meaning the process can, on average, be faster.

Because there are potentially significant compensation issues related to the LDES versus the IDES, “It is DoD policy for Service members to process through the IDES unless a compelling and individualized reason for process through the LDES is approved by the Secretary of the Military Department.” [DoDI 1332.18, page 2].

The Air Force Medical Treatment Facility (MTF) Commanders, or designee (0-6 or GS- 15 equivalent), will have the overall approval authority for determinations when directing an Airman into LDES vice IDES. If the Airman is requesting LDES, they must acknowledge in writing he or she had the opportunity to consult with legal counsel regarding the procedural differences between the LDES and the IDES.

**GO TO THE NEXT STAGE OF THE DES ➔ Informal Physical Evaluation Board (IPEB)**
Informal Physical Evaluation Board (IPEB)

1. **QUESTION: What decisions can the IPEB make?**
   - a. Fit
   - b. Unfit - Permanent Disability Retired List (PDRL)
   - c. Unfit - Temporary Disability Retired List (TDRL)
   - d. Unfit - Discharge with Severance Pay (DWSP)
   - e. Unfit – Existed Prior to Service, no disability severance pay or retirement benefits
   - f. Discharge Under 10 U.S.C. 1207 with no benefits; disability caused by intentional misconduct, negligence, or incurred during a period of unauthorized absence.
   - g. The IPEB can also return the case to the referring hospital for more detailed explanation, further information and description, corrections and/or non-compliance with governing directives.

2. **I've been found Unfit by the IPEB. What does it mean?**
   The IPEB, based on the medical evidence, determined your medical condition does not allow you to reasonably perform the duties of your office, grade, rank, or rating. Two other reasons you may be found Unfit include when your medical condition creates a decided medical risk to your health or impacts the welfare or safety of other service members, or your medical condition creates an unreasonable requirement on the military to maintain or protect you.

3. **I've been found Fit by the IPEB. What does it mean?**
   Being found Fit by the IPEB means you didn’t meet any of the criteria in the last question. It doesn’t necessarily mean your Assignment Limitation Code (ALC) will be removed or you will be worldwide deployable.
   
   An important aspect of being found Fit by either the IPEB, FPEB, or the AFPB is codified in Title 10 §1214a of the US Code. Once found Fit, you may not be administratively separated or denied reenlistment based on a determination you are unable to deploy or be assigned worldwide for the same condition you were found Fit. The Secretary of the Air Force may direct your case be reviewed again by the Air Force DES.

4. **Can I appeal a Fit finding to the Formal Physical Evaluation Board (FPEB)?**
   If the IPEB finds you fit for duty, you do not have the right to a Formal Board as a fit finding is not considered a derogatory finding. You may request a FPEB and the AF Physical Disability Division (DPFD) Chief will either grant or deny your request.

5. **Where does the disability rating percentage come from and why is it different from what I received from the Department of Veterans Affairs (VA) Compensation and Pension Exam?**
   The VA, as part of your Compensation and Pension exam, will evaluate all medical conditions related to your military service. The VA will then assign a disability percentage rating to each medical condition if
they are compensable. Based on all your medical compensable medical conditions, you will be assigned a VA total disability rating.

The IPEB, the FPEB, and AFPB each make determinations of Fit or Unfit. Once one of these boards finds a member Unfit, the member’s case file is forwarded to the VA for assignment of a disability rating percentage, but only for those medical conditions the board found you Unfit.

Because the VA considers all medical conditions, while the Air Force DES only considers those medical conditions not allowing an Airman to do their Air Force job, do not be surprised if there is a difference between the total disability percentage rating between the two.

6. How can I check the status of my case?
Your Physical Evaluation Board Liaison Officer (PEBLO) is your POC for status updates related to your case. In addition, as your case proceeds, assuming you have provided a correct email to your PEBLO, you should receive status updates for the following:
- When your MEB is sent to the IPEB
- When your findings from any stage of the process are delivered to your PEBLO
- When your case is sent to the FPEB
- When your case is sent to the AFPB
- When your case is being finalized and orders (if appropriate) are being cut

7. What disability rating percentage do I need to be medically retired?
Airmen who receive a rating of 30% or greater after the IPEB (or FPEB or AFPB) will either be placed on the Temporary Retirement Disability List (TDRL) or the Permanent Retirement Disability List (PDRL).
Individuals are placed on the TDRL when their condition is not stable. Airmen will be reevaluated at least every 18 months and after 3 years will either be found Fit, permanently retired, or separated with severance pay (if rated 20% or less). Airmen with over 20 years of active service will be retired (permanently or TDRL) regardless of disability percentage.

8. Are there special rules applied to Reserve Component members?
Yes, for example, Title 10 of the US Code, Section 12731b permits a Reserve Component member who has 15 years of satisfactory service but is separated for unfitness to be deemed to have met the required years of satisfactory service for retired pay. There are also special protections for Air Reserve Technicians. Your representative, either from the Office of Airman’s Counsel or a privately hired representative, can advise you further. If you do not have a representative, please consult your PEBLO.

9. What does it mean to be referred into the Air Force DES for a “fitness only” review?
“Fitness only” is the term used to describe some cases within the IDES for Reserve Component members. These members will not be compensated for their separation because their medical condition was not incurred or aggravated in the line of duty. However, the member has the same rights to argue he/she is in fact fit and should be retained as in cases involving compensation.

10. My injuries were combat related. Does the DES consider this fact?
Yes. There are four different categories when injuries or illnesses are considered combat related. The following are discussed in more detail on page 45 of DoDI 1332.18 (Appendix 5 to Enclosure 3):
- As a direct result of armed conflict
- While engaged in hazardous service
- Under conditions simulating war.
- Caused by instrumentality of war
If an Airman is separated or retired for a disability caused by one of these combat related reasons, their portion of their federal retirement or separation pay related to their disability will be excluded from federal gross taxable income. In addition, if you were separated for a combat-related disability, you (or your family) will not be required to pay back any bonuses or incentive pays. If you have specific questions about your pay, it’s highly recommended you contact DFAS at 1-800-321-1080.

Please note an injury or illness qualified as “combat related” by the DES may still not qualify for Combat Related Special Compensation (CRSC) because of the specific statutory definitions for each category.

11. I have 18 years in the Air Force. Will I automatically be found Fit?
No. For individuals who are incapable of performing their duties, there is no guarantee you will be found Fit and there is no “sanctuary” associated with 18 years of service guaranteeing you will be allowed to make it to 20 years.

There are provisions for retaining certain Airmen found Unfit under the Limited Assignment Status (LAS) process.

12. What is LAS?
The Limited Assignment Status (LAS) program allows the Air Force to keep needed experience and skills. To apply for LAS, you must first be found Unfit by either the Informal Physical Evaluation Board (IPEB) or the Formal Physical Evaluation Board (FPEB) and concur with the Board findings. You will also have an opportunity to apply for LAS after findings are issued by the Air Force Personnel Board (the last level of appeal in the Air Force DES). The Air Force Physical Disability Division (AFPC/DPFD), is the approval/disapproval authority for LAS applications. Additional information about LAS can be found on MyPers: Limited Assignment Status.

13. Can my ETS (Expiration Term of Service) be extended during the disability process?
Yes. DP2NP (Medical Retention Standards) can place a member on Medical Hold to allow for processing through the DES.

14. If I want to waive the disability process, and get out at my ETS or retire, what actions do I need to take?
There are three categories of Airmen who can waive the DES process:
- Airmen with an approved retirement or separation date,
- Airmen within 6 months of mandatory separation/retirement due to length of service
- Airmen currently within 6 months of mandatory separation/retirement due to length of service, High Year Tenure (HYT), Continuation Board results/failure to select to next senior rank, SERB Board results, or Reduction in Force requirements;

Prior to waiving the DES process, recommend consulting with your PEBLO, your Commander, and potentially legal counsel. Then, your PEBLO can walk you through the process of applying for a waiver.

15. I have over 20 years of service. Can I waive processing through the DES and apply for voluntary retirement?
There are a couple of different scenarios when an Airman can waive processing through the DES:
- Have an approved retirement (not the intention to retire) or separation date and do not consent to being placed on medical hold.
- Within 6 months of Expiration Term of Service (ETS)/Date of Separation (DOS) (whichever is controlling) and have no remaining Reserve obligation.
Within 6 months of mandatory separation/retirement due to length of service, High Year Tenure (HYT) Continuation Board results (and failure to next senior rank), SERB Board results, or Reduction in Force (RIF) requirement and have no remaining Reserve obligation.

You are required to discuss this option with your PEBLO and a military medical provider and then formally waive disability processing in writing. Your PEBLO will have the required paperwork.

16. **What's the 8-year rule and what does it mean?**

   Title 10 USC 1207a permits a medical condition existing prior to service (and would not normally be compensable) to be compensable if the member has 8 or more years of active service.

17. **Where do I find the VA rating schedule?**

   Title 38, Code of Federal Regulations, Book C, Schedule for Rating Disabilities. This is online in several places including https://www.benefits.va.gov/warms/bookc.asp#

18. **Can I revert to the original IPEB recommendation if I am dissatisfied with the FPEB results?**

   No. Once you have disagreed with the IPEB results and appeared before the Formal Board, the recommendation of the IPEB no longer applies.

GO TO THE NEXT STAGE OF THE DES ➔ **Formal Physical Evaluation Board (FPEB)**
1. I’ve decided to appeal my IPEB results to the FPEB. What do I need to do to prepare for my formal hearing?

Your first recommended step is to contact the Office of Airmen’s Counsel (OAC) at 665-0739 (DSN) or 210-565-0739 (commercial) to speak to an attorney. You may also contact them via e-mail at: Afloaja.disabilitycounsel@us.af.mil. When you call, you will be asked for information about your case by a paralegal so please have all your forms and information available.

Representation through the OAC is provided at no cost to you. Your attorney will help you prepare for your hearing and determine what supporting documentation will be needed, such as recent medical records, letters of support, etc. You also have the right to hire an attorney at your own cost or to request representation through a Veterans Service Organization.

2. What can the OAC do for me?

(Answer provided by the OAC) OAC attorneys provide legal services to Airmen who are going through the disability evaluation processes. At the beginning, they provide general advice and assist you in developing a strategy to reach your desired outcome. As you progress through the system, OAC attorneys can provide more specific advice and represent you should you request a hearing at the Formal PEB. If you are under the Integrated Disability Evaluation System (IDES), the OAC can also assist with appeals of your Department of Veterans Affairs (VA) rating. In general, if you have a question or feel uncomfortable about something you are told while in the process, you should call us!

3. Can I trust the attorneys at the OAC? I’ve heard they are paid by the Air Force and I should hire my own attorney.

(Answer provided by OAC) You can absolutely trust them! The OAC attorneys are Air Force employees but are similar to Area Defense Counsel attorneys. Their chain of command resides within the Air Force Legal Operations Agency so they function independently of the Air Force Personnel Center (AFPC) and the local Medical Groups. Their job is to represent you and your interests. Outside attorneys may not be as familiar with this very nuanced area of practice. If you choose to hire outside counsel, be sure to ask them how many DES cases they have worked on, when they worked on them and whether those cases were Air Force cases.

4. What can I do to help my appeal of the IPEB decision?

(Answer provided by the OAC) Make sure you have a copy of your MEB Narrative Summary, the results of your MEB (AF Form 618), your findings, AF Form 356, your commander’s input letter, and the VA rating decision. Also, you can start by getting copies of your medical records—your Physical Evaluation Board
Liaison Officer (PEBLO) can assist you. Ask for a copy of your medical notes after every appointment. This will be the most important evidence for your case! You can also begin deciding whether you want to return to duty or to be medically separated or retired. The OAC can give you general advice on what evidence will be most helpful depending on your desired outcome.

5. Can the OAC Attorneys represent me at the Informal PEB (IPEB)?

(Answer provided by OAC) Currently, the OAC does not have the capacity to represent Airmen at the IPEB level. However, they can provide you with important information and advice on how to proceed with your case.

6. When will my FPEB hearing be scheduled?

Once you’ve signed your intent to appeal the IPEB results, you will be scheduled for the next available FPEB reporting date. Please note: Your reporting date may be as early as 9 days after you’ve signed your election to appeal. The FPEB will send the reporting date and instructions to you and your PEBLO by email. To learn more about FPEB reporting instructions, please review this MyPers Article: Formal Board Hearing Reporting Instructions

7. What if my scheduled FPEB hearing conflicts with an event I already have planned?

You may request rescheduling of your FPEB date in writing through your PEBLO or attorney. However, the FPEB will only approve a delay of hearing for exceptional circumstances. Delays are not generally approved for scheduled leave, medical appointments, or to allow additional time to prepare for the hearing. As soon as you know you have a conflict with your scheduled FPEB hearing, contact your PEBLO or attorney. And remember there are other options for the hearings; see question #8.

8. Do I have to attend my FPEB hearing in person?

No, although you have the right to personally appear before the FPEB, it is not a requirement to travel and attend the hearing in person. You may elect to have your hearing over the telephone or you may have your attorney present your case for you “in absentia.” The FPEB also has video-teleconferencing capability. Contact the Office of Airmen’s Counsel (OAC) for additional information at DSN 665-0739 or Comm 210-565-0739 to speak to an attorney and determine the best option for you.

9. How long is the TDY to the FPEB?

Your TDY to JBSA-Randolph AFB in San Antonio, TX will typically be a total of four days. The first day is a travel day. On day two you will report to the FPEB building, in-process with the FPEB administration team, and meet with your attorney to complete your preparation for the hearing. Day three will be your hearing date. You’ll out-process the day of your hearing, and you may either travel back to home station in the afternoon/evening or return the next day (day four).

10. Do I have to wear a uniform to the hearing?

If you are Active Duty, Air Force Reserve, or Air National Guard, you must wear a uniform when reporting to the FPEB and your hearing. It is your choice whether to wear Service Dress, ABUs, OCPs or Blues. If you are on the TDRL (Temporary Disability Retirement List), you should wear appropriate civilian attire.

11. What happens in the FPEB hearing?

The FPEB hearing is a fact-finding board to determine information pertinent to your case not evident or available to the IPEB. It is not an adversarial process and will consist of a conversational discussion between you, your attorney, and the board members. The board members will consist of three field grade officers, or civilian equivalent, one of which is a physician. The hearing is scheduled for an hour but may be shorter or longer as required.
12. May I bring someone to the FPEB hearing with me?
Yes. You have the right to have someone testify on your behalf during the hearing. You may also have a
family member, friend, coworker or significant other attend your hearing to observe and support you.
Service dogs are also welcome, but children should be left at home or with a caretaker during your FPEB
hearing. Seating is limited in the hearing room, so you must notify your attorney of any witnesses or
observers before of your hearing.

13. Who pays for my travel to my FPEB hearing?
Your TDY orders will pay for your travel expenses. Your orders may authorize travel expenses if you
require an escort or medical/non-medical attendant. Any travel costs for witnesses and observers will be
at your personal expense.

14. What is a VA Rating Reconsideration?
The VA Rating Reconsideration occurs after you’ve agreed with the DES findings (whether after the IPEB,
FPEB, or AFPB) and allows an Airman to submit new medical evidence or sufficient justification, such as an
error occurring, to the VA to reconsider your DES disability rating percentage.

15. When and how will I learn the results of my FPEB hearing?
You will not receive the results of your Formal Board hearing until after you have returned to your home
station. The results will be sent to your PEBLO, who will notify your Commander before briefing you of the
FPEB’s decision and your options. The PEBLO must notify you of the results within 3 duty days of receipt.
Once you’ve been notified of the FPEB decision, you will then have 6 days to decide whether to agree with
the decision, elect to appeal to the Air Force Personnel Board (AFPB), and/or to pursue a VA review of the
ratings for your unfitting conditions (a VA Reconsideration). We encourage you to follow-up with your
attorney as you make your decision.

GO TO THE NEXT STAGE OF THE DES ➔ **Appeals: Air Force Personnel Board (AFPB)**
1. **What is the Air Force Personnel Board?**

   The Air Force Personnel Board (AFPB) is a component board of the Secretary of the Air Force Personnel Council (SAF/PC). The AFPB reviews and acts on personnel matters, including acting as the final appellate authority for all Air Force members who are considered for retirement or separation due to physical disability (Title 10 U.S.C. Chapters 61 and 69; and AFI 36-3212). For additional information about the AFPB, read this MyPers article: [https://mypers.af.mil/app/answers/detail/a_id/38962](https://mypers.af.mil/app/answers/detail/a_id/38962)

2. **My condition has changed--will the Air Force Personnel Board (AFPB) consider this information?**

   Yes, the AFPB is not bound by the medical evidence available at the time your case met the IPEB/FPEB. If your condition has changed, and it is reflected in your military medical record or you provide evidence from non-military medical providers, the AFPB will take your current condition into consideration when reviewing your appeal.

3. **I have a new diagnosis--will the AFPB consider this information?**

   A new diagnosis/condition may need to be evaluated, potentially starting the case over at the beginning of the DES process. Your medical treatment facility, in coordination with the Air Force Personnel Center (AFPC), may recall your current DES case and include your new condition, if warranted. Please see AFI 36-3212, *Physical Evaluation for Retention, Retirement, and Separation* (2 February 2006, incorporating through Change 2, 27 November 2009) paragraph 2.6. for more information.

4. **How do I present new information to the Air Force Personnel Board (AFPB)?**

   Your representative, either from the Office of Airmen’s Counsel or a privately hired representative, can forward new information to the AFPB, but it must be done so within prescribed timelines. If you do not have a representative, please consult your Physical Evaluation Board (PEBLO) for the best way to forward the information.

5. **How do I know if the Air Force Personnel Board (AFPB) has the most current information about my medical condition?**

   If you believe there is new information available and want to confirm it will be considered, your representative, either from the Office of Airmen’s Counsel or a privately hired representative, can confirm the AFPB is aware of the new information. All new information must be provided within the prescribed timelines or it will not be considered. If you do not have a representative, please consult your PEBLO for the best way to bring new information to the attention of the AFPB.

6. **Who are the board members of the Air Force Personnel Board (AFPB)?**

   AFI 36-2023, *Secretary of the Air Force Personnel Council (SAF/PC)*, explains the structure of the AFPB for medical appeal cases. See paragraph 3.1. for more specific information. The AFPB is normally comprised
of five members, who are field grade officers or civilian equivalents. The Panel President will usually be an O-6 military member or GS-15 civilian. Additional members will normally consist of legal, medical, and personnel advisors, who may be permanent staff of the Air Force Review Boards Agency or collateral board members.

7. **Why can’t I make a personal appearance at the Air Force Personnel Board?**
   The Department of Defense, per DoDI 1332.18, states the rights members have within the Disability Evaluation System for all the services. The right to a personal appearance only exists for the Formal Physical Evaluation Board (FPEB).

8. **What are my options if I do not agree with the decision of the AFPB?**
**Retirement and Separation**

1. **What is the Permanent Disability Retired List (PDRL)?**
   If you are given a disability of 30 percent or more, or a lesser disability with over 20 years active service and your condition is stable, you may be placed on the PDRL. When placed on PDRL, you have been Permanently Retired. You are eligible for all benefits a 20-year non-disability retiree would be eligible for; benefits such as military medical care, TRICARE, Commissary and Exchange as well as retirement disability pay. Placement on the PDRL is appropriate when an Airman’s disability is stable.

2. **What is the Temporary Disability Retired List (TDRL)?**
   If you are given a disability of 30 percent or more, or a lesser disability (0%, 10%, or 20%) with over 20 years active service, and your condition is unstable, you may be placed on the TDRL. Placement on the TDRL is necessary to monitor those members whose conditions have not stabilized.

   When placed on TDRL, you have been Temporarily Retired. You are eligible for all benefits a 20 year non-disability retiree would be eligible for; benefits such as military medical care, TRICARE, Commissary and Exchange as well as a monthly retirement check.

   Airmen on TDRL are required to have periodic evaluations at 12-18 month intervals to assess unstable conditions. No later than three years after being placed on the TDRL (five years for those put onto TDRL prior to 1 January 2017), your case will be considered by the IPEB and your case finalized. If found Unfit, you will be either permanently retired or separated with severance pay. If you are found Fit, you will be eligible to reenter active duty if you meet Air Force accession standards. After the IPEB, you have the right to a Formal Physical Evaluation Board (FPEB) hearing and a final appeal to the Air Force Personnel Board (AFPB) if you disagree with your findings.

   You will be notified of the date and time of your TDRL evaluation, at least 30 days prior to the evaluation by the provider tasked to conduct your periodic evaluation. Re-evaluations may occur at a Department of
Veterans Affairs (VA) facility, a military MTF, or a civilian provider. It is extremely important you continue attending your VA or TRICARE-affiliated medical appointments and you respond immediately to any attempts by the Air Force TDRL office or to contact you.

It can’t be over-emphasized to keep in close contact with the Air Force’s TDRL office. This office will ensure you have a scheduled medical review after you get out of the service. You can email their office directly at: afpc.dpfdc.tdrl@us.af.mil.

Airmen placed on the TDRL should review a separate set of TDRL Frequently Asked Questions, accessible in the following pdf:

TDRL FAQs.pdf

3. **What is Discharge with Severance Pay (DWSP)?**

Severance pay is a lump sum payment given to those who are found Unfit for further military duty with a 0, 10 or 20 percent disability rating who have less than 20 active years of service. The calculation of severance pay is twice your monthly base pay times the number of active years. Title 10, Section 1212 of the US Code notes the number of years are calculated with the following caveats:

a. Six year minimum in the case of an Airman separated for a disability incurred in a combat zone or incurred during the performance of duty in combat-related operations.

b. Three year minimum in the case of any other Airman.

c. The maximum years of service of an Airman shall be 19 years.

For example, if your base pay is $1500 a month and you have ten years of active service, then your severance pay would be $1500 x 2 x 10 = $30,000. Also, active service years are rounded to the nearest year. For example, if you had 7 years 7 months of active duty service, you would receive 8 years severance pay.

The following are important aspects of disability severance pay; disability severance pay will be deducted from any compensation for the same disability an Airman becomes entitled through the VA, with the following caveats:

a. No deduction may be made in the case of disability severance pay received by an Airman for a disability incurred in a combat zone or incurred during performance of duty in combat-related operations.

b. No deduction may be made from any VA death compensation an Airman's dependents become entitled after the Airman’s death.

4. **I was placed on TDRL. Can I have a retirement ceremony?**

Yes. Definitely. The Air Force encourages retirement recognition for Airmen placed on the TDRL and have developed a recommended sequence of events, outlined in the Retirements PSD guide, Volume 1, Section M-4, to ensure these Airmen are recognized for their service. However, since placement on the Temporary Disability Retired List (TDRL) is a temporary status for Airmen, individuals placed on the TDRL are not eligible to receive certain recognition members receive for a voluntary service retirement or permanent disability retirement.
If you wish to have a ceremony, your commander should ensure it is conducted before you out-process and are placed on TDRL. At the ceremony, the unit will present you with: TDRL Order, TDRL certificate, (available on the [AFPC Disability Operations Branch Knowledge Exchange website](http://www.afpc.disabilityoperations.af.mil)), presentation of the U.S. Flag (if paid for by the member/supervisor-cannot be unit funded), and any awards, decorations, honors, or letters of appreciation.

Questions about TDRL should be referred to [afpc.dpfdc.tdrl@us.af.mil](mailto:afpc.dpfdc.tdrl@us.af.mil) and questions about retirements should be referred to the Air Force Personnel Center (AFPC) Retirements and Separations Programs office. This FAQ is also discussed in the [Commander’s Corner](http://www.airforcespecialist.com) set of this FAQ’s (Question #14).

5. **I’ve been found Unfit, accepted the findings and am expecting to separate or retire. What happens next? How long will it take until I am discharged?**

   The goal is to publish orders within 2 weeks following an Airman’s concurrence or after a final determination is made following all appeals, as long as there are no further pending actions (pending DOS/ETS extension, pending administrative action and/or grade demotion). The date of separation is established based on an anticipated 32 days of transition processing and the member’s leave balance (when approved by the Commander).
Concurrent Retirement and Disability Pay (CRDP)

1. What is CRDP?
   Concurrent Retirement and Disability Pay (CRDP) allows eligible military retirees to receive both military retired pay and Veterans Affairs (VA) compensation. This was prohibited until the CRDP program began on January 1, 2004.

2. How do I find out more about CRDP?
   The best information about CRDP can be found at the following DFAS website: https://www.dfas.mil/retiredmilitary/disability/crdp.html.
1. What is Combat-Related Special Compensation (CRSC)?
   CRSC is a monthly compensation paid for combat-related disabilities. CRSC was designed to restore a veteran's military retirement pay with tax-free dollars after it has been offset by VA compensation when sufficient evidence exists to confirm the veteran's disability is combat-related. Please note the CRSC is not part of the Air Force DES. Members can apply for CRSC once they've been separated or retired.

2. What's the best resource related to CRSC?
   The best resource to understand how the Air Force implements this program is to review this link: http://www.afpc.af.mil/Benefits-and-Entitlements/Combat-Related-Special-Compensation/. In addition to a full discussion of CRSC, the program has its own set of FAQ’s accessible from the Air Force Personnel Center (AFPC) website.
Glossary of Acronyms

Air Force Office of Airmen’s Counsel (OAC)
Air Force Personnel Board (AFPB)
Air Force Personnel Center (AFPC)
Air Force Wounded Warrior Program (AFW2)
Airman Medical Transition Unit (AMTU)
Assignment Limitation Code (ALC)
Compensation and Pension (C&P)
Department of Veterans Affairs (VA)
Deployment Availability Working Group (DAWG)
Disability Evaluation System (DES)
Discharge with Severance Pay (DWSP)
Formal Physical Evaluation Board (FPEB)
Informal Physical Evaluation Board (IPEB)
Initial Review in Lieu Of (IRILO) a Medical Evaluation Board
Integrated Disability Evaluation System (IDES)
Legacy Disability Evaluation System (LDES)
Medical Evaluation Board (MEB)
Medical Retention Standards (DP2NP)
Military Treatment Facility (MTF)
Military Services Coordinator (MSC)
Permanent Disability Retired List (PDRL)
Physical Evaluation Board Liaison Officer (PEBLO)
Primary Care Manager (PCM)
Recovery Care Coordinators (RCC)
Secretary of the Air Force Personnel Council (SAF/PC)
Temporary Disability Retired List (TDRL)