

DACOWITS RFI #1.3

Bureau of Medicine and Surgery: Service Medical Waiver Review Authority (SMWRA) for the Marine Corps

BUMED Code N10D, Force Medical Readiness 21 June 2024



BUMED N10D Review Timelines for Marine Corps Waivers

Q1.3.a: Average length of time to process each medical waiver:

- Marine Corps Recruiting Command (MCRC) submits waiver request to BUMED in electronic waiver system.
- SMWRA (BUMED N10D) provides letter with recommendation to Waiver Authority (WA):
 - Marine Enlisted: averaged 2 calendar days in FY23, averaged 4 calendar days in FY22.
 - Marine Officer: averaged 12 calendar days in FY23, averaged 6 calendar days in FY22.
- MCRC WA processes the BUMED letter (grant, deny, remedials needed) in ≤ 1 business day.
- If remedials needed, the resubmission is processed within the same timelines above.

Q1.3.b. Average length of time to obtain a medical recommendation from SMWRA:

- Marine enlisted waivers: FY2023: 2 calendar days, FY2022: 4 calendar days
- Marine Officer waivers: FY2023: 12 calendar days, FY2022: 6 calendar days



BUMED N10D Review Timelines for Marine Corps Waivers

Q1.3.c: Average length of time for Waiver Authority (MCRC WA) to decide whether to approve the waiver based on the recommendation from SMWRA (BUMED N10D):

MCRC WA generally adjudicates their waiver decision within 1 business day

Q1.3.d. Current backlog in each of the Military Services medical waivers for applicants:

BUMED N10D completes waiver reviews for 23 different waiver programs in addition to USMC enlisted and officer accessions. Cases are submitted 7 days per week, any time of day, with seasonal fluctuations for programs with a specific graduation or training deadline. The pending review case volume typically reflects submission volume. On 21 June 2024, the following was accurate:

- Marine Enlisted: 54 cases pending review or currently under waiver review
- Marine Officers: **21 cases** pending review or currently under waiver review
- All other BUMED waiver types (ROTC, USNA, USMMA, STA21, Recruit retention, Reserve retention, various others): 528 cases pending review or currently under review



SMWRA Approach for USMC Waivers

1.3.e. Which of these top female-specific disqualifying conditions is your Service (USMC) currently providing waivers for? All of these might receive a waiver, approach as follows:

Condition	Consideration #1	Consideration #2	Consideration #3
Pregnancy (within 6 months)	Typically, >3 months post-partum	Returned to high- intensity exercise	No complications (or low risk, resolved)
Abnormal bleeding (uterine or vaginal)	Basic work-up complete; stable on treatment, if needed	No prolactinoma, anemia, thyroid or eating disorder	No performance issues (school, work, sport)
Abnormal pap smear	Low risk findings (LGSIL, ASCUS)	If higher risk, treatment complete	If higher risk, had reassuring follow up
Endometriosis	No chronic pelvic or abdominal pain	No required surgery or Lupron	Asymptomatic with OCP, IUD or implant
Polycystic Ovarian Syndrome (PCOS)	No metformin or GLP needed to meet weight/BCA	No elevated HbA1c or metabolic syndrome	Asymptomatic with OCP, IUD, implant, +/- spironolactone

RFI Category and Number: Recruitment Barriers #1

RFI Question: The Committee continues to be interested in the recruitment of servicewomen, including barriers and facilitators that impact the pool of women qualified to join the Armed Forces as compared to men. The Committee seeks to understand potential recruitment barriers that continue to inhibit the accession of women into the Armed Forces. More specifically, DACOWITS is interested in the timeliness of Military Entrance Processing Stations (MEPS) appointments, any preliminary data pertaining to female recruits admitted through the Military Accession Record Pilot (MARP) program, the medical waiver process, and both the challenges and facilitators reported by recruiting commands. Additionally, by March 2022 all MEPS fully deployed a new congressionally mandated electronic health information system called Military Health System (MHS) Genesis. This marked a major change to medical record processing for accessions. The Committee understands that the Defense Department is now using medical data collected from MHS Genesis via the MARP program to review the recentness of 49 medical conditions for which the lifetime disqualification in Medical Standards for Military Service: Appointment, Enlistment, or Induction (DoDI 6130.03) was changed to 0.5, 3, 5, or 7 years. The Committee is also aware that in March 2024, a DoD report titled, "Military Medical Standards for Accession," was delivered to the Committee on Armed Services of the Senate and House of Representatives and that this report noted a need for increased MEPS personnel, including medical providers, technicians, and onboarding specialists. Last, the Committee received briefings from Military Services' recruiting Chiefs (senior enlisted personnel) in March 2023 (via RFI 1). Given the rapidly changing landscape of today's recruiting environment, the Committee would like an update on what recruiters are currently experiencing regarding the recruitment of women into the Armed Forces.

RFI Response:

- 1.3 Military Services' Medical Waiver Review Authorities (SMWRA):
- a. What is the average length of time to process each medical waiver?

The Navy's Bureau of Medicine and Surgery (BUMED) Force Medical Readiness Directorate, functions as the SMWRA for Marine Corps enlisted and officer waivers. Commander Navy Recruiting Command, N33 serves as the SMRWA for the Navy Recruiting Command for Navy enlisted and direct Commission waivers.

Multiple external variables outside of the control of Marine Corps Recruiting Command (MCRC) and BUMED can impact the timeline for waiver submission. BUMED and MCRC aim to meet processing times once a waiver package is submitted. The processing time may differ for officers and enlisted based on agreements established between Marine Corps Recruiting Command (MCRC) and BUMED, as well as the overall volume of waiver requests and times of the year with other competing commission program deadlines (e.g., USNA and ROTC). The medical waiver steps and timelines between BUMED and MCRC are outlined below:

- MCRC loads waiver package into electronic waiver system.
- Waiver package is claimed by SMWRA at BUMED.
- SMWRA completes the waiver review and provides a recommendation to the Waiver Authority (WA) at MCRC in the form of a serialized letter.
 - Enlisted waiver reviews
 - Averaged 2 calendar days in FY23
 - Averaged 4 calendar days in FY22
 - Officer waiver reviews
 - Averaged 12 calendar days in FY23
 - Averaged 6 calendar days in FY22
- The SMWRA may request additional information be provided if there is not enough
 documentation available to make a recommendation in the initial package. Additional
 information can include personal statements, labs, radiology studies, consults, etc. The
 timeline for the additional medical information requested is outside of the control of
 the Service.
- If additional information was needed, a new case is submitted by MCRC, once the information is received.
- The SMWRA completes the review of waiver request with the new information in the timeline stated above and provides a final waiver recommendation to the WA.
- Once the WA receives the recommendation from the SMWRA, the WA adjudicates a final decision on the waiver within 1 business day.

b. What is the average length of time to obtain a medical recommendation from the branch's waiver authority?

BUMED has an informal agreement with MCRC regarding the completion of Marine Enlisted cases, as well as internal business rules for completing medical waiver reviews and recommendations for all submitted case types. These target timelines are listed below:

- Marine Enlisted medical wavier requests: 72 hours from submission
- Marine Officer medical waiver requests: 30 days from submission
- All other medical waiver requests: 30 days from submission

c. What is the average length of time for the recruiting command to make a decision whether to approve the waiver based on the recommendation from the branch's waiver authority or medical staff at the recruiting command?

On average, the WA at MCRC adjudicates waiver decisions within 1 business day.

d. What is the current backlog in each of the Military Services medical waivers for applicants?

BUMED completes waiver reviews for 23 different waiver programs in addition to USMC enlisted and officer accessions. Cases are submitted 7 days per week, any time of day, with seasonal fluctuations for programs with a specific graduation or training deadline. The backlog typically reflects submission volume. Waiver requests may need to be prioritized based on the unique situation of the candidate's program requirements, such as training deadlines or graduation dates. This need for prioritization may delay the overall processing time of all waiver requests coming through the BUMED SMWRA during months with a high volume of submissions. On 21 June 2024, the following was accurate:

- Marine Enlisted: 54 cases pending review or currently under waiver review
- Marine Officers: 21 cases pending review or currently under waiver review
- All other waiver types (USNA, ROTC, Reserve Retention, etc): 528 cases pending review or currently under waiver review

e. Which of these top female-specific disqualifying conditions is your Service currently providing waivers for? Please provide criteria for these waivers: pregnancy; abnormal uterine or vaginal bleeding; abnormal pap smear/test; endometriosis; and polycystic ovarian syndrome.

- Pregnancy within the previous 6 months: The Service is not waiving new applicants who are currently pregnant. Waivers can be considered around 3-6 months postpartum if the applicant has not experienced complications and has successfully returned to high intensity exercise. If a disqualification (DQ) was applied for a pregnancy that resulted in termination or perinatal loss, a waiver can be considered once the applicant has returned to high intensity exercise. This is usually seen around six or more weeks post pregnancy. A current Service member applying for commission who is pregnant can be waived if they meet other program and training requirements, which varies depending on the commission pipeline.
- Applicants with abnormal uterine or vaginal bleeding are often granted a waiver if basic screening evaluation shows no underlying undiagnosed medical conditions or adverse outcomes that need treatment (thyroid, eating disorders, prolactinoma, PCOS, anemia) and symptoms are not causing functional issues with work, school, athletic participation.
- Abnormal pap smear: Waivers are recommended if low risk findings (LGSIL, ASCUS). If an applicant has higher risk findings but follow on testing shows no evidence of cancer and only needs ongoing surveillance, waivers are often recommended.
- Endometriosis: Favorable waiver recommendations are usually given if endometriosis was an incidental finding noted on imaging or during an abdominal surgery, but no chronic pain or dysfunction associated, and no additional treatment beyond routine birth control is required. Endometriosis is not typically waived for a new accession to enlist or commission if the diagnosis was associated with a history of chronic pelvic pain, chronic abdominal pain, or severe dysmenorrhea, or if management required Lupron or surgical interventions. Current enlisted members applying for a commission, or

DACOWITS RFI ISO JUN 2024 Meeting

- individuals already contracted in a commission pipeline who have been successfully treated and do not have functionally limiting symptoms related to endometriosis would be considered for waiver if they meet deployability and shipboard assignability criteria.
- Polycystic ovarian syndrome: A favorable waiver is likely if the condition is controlled without medication or only requiring management with birth control and/or spironolactone. Favorable recommendations are not usually given for applicants needing metformin or GLP agonists, or with abnormal HbA1c, or outside of weight/body composition assessment (BCA) standards for the program to which they are applying.

Hours Expended Answering this RFI: 5

Office responsible: BUMED N10D- Force Medical Readiness