



SECRETARY OF THE ARMY  
WASHINGTON  
AUG 25 2016

The Honorable Ron Wyden  
United States Senate  
Washington, DC 20510

SEP 1 2016

Hon Ron Wyden

Dear Senator Wyden:

I am writing to follow up on my November 30, 2015 response to you concerning Soldiers separated for misconduct who were diagnosed with Post-Traumatic Stress Disorder (PTSD) or Traumatic Brain Injury (TBI).

As I mentioned in my letter, I directed the Assistant Secretary of the Army (Manpower and Reserve Affairs) to oversee a thorough, multidisciplinary review of the misconduct separations of Soldiers with PTSD or TBI who deployed within 24 months of separation and for whom the Army provides medical examinations prior to administrative separation, in accordance with 10 USC § 1177. She recently completed that review and provided the following results:

From January 2009 through July 2015, the Army separated 469,294 active duty enlisted Soldiers, to include 67,697 Soldiers who had a behavioral health diagnosis in their records and were separated for misconduct. Of these 67,697 Soldiers, 22,194 deployed at some point during their enlistment, but only 3,327 were subject to 10 USC § 1177, because they deployed within 24 months of their separation and had a diagnosis of PTSD or TBI. Of these 3,327 Soldiers, 2,933 were separated under honorable conditions and, if otherwise qualified, were immediately eligible for Veterans Administration benefits. The remaining 394 Soldiers received an “Other than Honorable” characterization of service and were the focus of a review conducted by the Army Audit Agency (AAA).

The AAA determined that appropriate behavioral health evaluations were available to commanders in the vast majority of the cases reviewed. In 73 cases, however, there was insufficient documentation to confirm compliance with 10 USC § 1177. I will refer these cases – and any case where there was not full compliance with 10 USC § 1177 – to the Army Review Boards Agency to determine if the Soldier’s discharge should be upgraded based on evidence of record.

In addition, the Department of the Army Inspector General (DAIG) reviewed the separations of 12 Soldiers who previously served at Fort Carson, Colorado, and were subsequently identified in the October 28, 2015 National Public Radio article or

referenced in the July 2, 2014 Report of Investigation, under Army Regulation 15-6 directed by the Commanding General of U.S. Army Medical Command. The DAIG determined that 10 USC § 1177 applied to five of those cases and found the Soldiers were processed properly for separation in each case. For the remaining seven Soldiers, the DAIG found that they were separated in accordance with applicable laws and regulations.

To ensure full compliance in the future, the Army published an All Army Activities message on April 4, 2016, requiring separation authorities to document, in writing, that the results of the Soldier's medical examinations were reviewed pursuant to 10 USC § 1177. In addition, the Army will update applicable policies and regulations to specify the documents included in separation packets and the requirements for the transfer of those documents into the interactive Personnel Electronic Records Management System.

The Army remains confident in the administrative processes that define misconduct separation procedures. The results of the multidisciplinary review demonstrate that separation authorities are reviewing and considering whether a Soldier's history of PTSD and/or TBI may have been a factor in the misconduct that led to the Soldier's administrative separation.

As you know, we also have been cooperating with the Government Accountability Office, which is conducting its own review of this matter. We look forward to receiving their findings and recommendations in the fall of 2016.

The Army remains committed to the health and well-being of our Soldiers, and to providing appropriate due process for all Soldiers. Thank you for your continued support of our Soldiers and their Families.

Sincerely,

  
Eric K. Fanning