Audit of Military Services’ Processing of Coronavirus Disease–2019 Vaccination Exemptions and Discharges for Active Duty Service Members
Results in Brief
Audit of Military Services’ Processing of Coronavirus Disease–2019 Vaccination Exemptions and Discharges for Active Duty Service Members

March 12, 2024

Objective
The objective of this audit was to determine whether the Military Services processed exemption requests for the coronavirus disease–2019 (COVID-19) vaccination and discharged active duty Service members in accordance with Federal and DoD guidance.

Background
COVID-19 is an infectious disease that can cause a wide spectrum of symptoms. On March 11, 2020, the World Health Organization declared the COVID-19 outbreak a pandemic, and on March 13, 2020, the President of the United States declared the COVID-19 outbreak an emergency. On August 23, 2021, the U.S. Food and Drug Administration approved the first COVID-19 vaccine, and on August 24, 2021, the Secretary of Defense directed the Secretaries of the Military Departments to begin immediate vaccination of all members of the Armed Forces against COVID-19. In response, each Military Service ordered its active duty Service members to be vaccinated and established vaccination deadlines. The DoD allows active duty Service members to request medical or administrative exemptions, including religious accommodation exemptions, from vaccinations, including the COVID-19 vaccination. Although the Secretary of Defense rescinded the COVID-19 vaccination mandate on January 10, 2023, our recommendations apply to vaccination exemptions and discharges for all required Service member vaccinations.

The DoD Office of Inspector General received complaints through the DoD Hotline between August 2021 and June 2022 alleging that the Military Services were improperly processing COVID-19 vaccination exemption requests. In February 2022, we initiated this audit. We continued to receive complaints and, on June 2, 2022, the Acting DoD Inspector General issued a memorandum to the Secretary of Defense, alerting the Secretary to “potential noncompliance with standards for reviewing and documenting the denial of religious accommodation requests of Service members identified through complaints submitted to my office.” The memorandum identified two primary concerns: (1) the volume and rate at which decisions were made to deny requests, and (2) a lack of individualized review of religious accommodation requests, as required by Federal law and DoD policy.

Findings
The Military Services generally processed religious accommodation requests and appeals for COVID-19 vaccinations in accordance with Federal and DoD guidance. However, the Army and Air Force generally did not meet the DoD timeliness requirements for processing exemption requests. Specifically, the Army did not process the 12 requests we reviewed within its 90-day requirement, instead averaging 192 days, or more than twice as long as required, and the Air Force did not process the 35 requests we reviewed within its 30-day requirement, instead averaging 168 days, or more than five times as long. The delays occurred because of the unprecedented number of requests and the extended time that it took to process requests through the Service member’s chain of command and the decision authorities. While the COVID-19 vaccination requirement has been rescinded, untimely Army and Air Force decisions for religious accommodation requests could affect a Service member’s deployability and job assignments, and hinder the command’s ability to make informed deployment and assignment decisions.

The Military Services did not record 13 of the 111 medical and administrative exemptions we reviewed for COVID-19 vaccinations in accordance with DoD and Military Service guidance. While Military Service personnel told the DoD Office of Inspector General that the incorrect entries were clerical errors, command leaders did not sufficiently
Findings (cont’d)

monitor Service members’ vaccination status in the immunization tracking systems, which allowed incorrect entries to remain undetected. However, we did not identify any impacts to readiness or to the Service members’ deployability status from these 13 incorrect entries. Documenting health care provider or command leader approval for exemptions reduces the risk for incorrect entries and ensures that Service members’ vaccination status is accurate so that command leaders can make informed decisions to protect the health and safety of the force.

The Military Services discharged Service members who refused the COVID-19 vaccination in accordance with Federal and DoD guidance. However, discharged Service members did not receive the same discharge type or reentry code. The Military Services issued either honorable or general discharges for Service members who refused the COVID-19 vaccination. In addition, the Military Services assigned different reentry codes when discharging the Service members. This occurred because the DoD did not have department-level guidance requiring uniformity on the discharge type and reentry code for the Service members discharged for vaccination refusal. As a result, discharged Service members experienced different impacts to their educational benefits and eligibility to reenlist in military service after discharge.

The memorandum that rescinded the COVID-19 vaccination mandate directs that former Service members may petition their Military Department’s Discharge Review Board and Board for Correction of Military or Naval Records and request a correction to their personnel records, including the type of their discharge and reentry code.

Recommendations

We recommend that the Under Secretary of Defense for Personnel and Readiness:

- review the religious accommodation request process for vaccinations to identify efficiencies that could be achieved during periods of high-volume requests and issue guidance accordingly to decrease processing times, and
- develop and issue guidance to require uniform discharge types and assign uniform reentry codes for all Service members discharged for misconduct solely for vaccination refusal.

We recommend that the Director, Defense Health Agency, in coordination with the Secretaries of the Military Departments, develop and implement a requirement for personnel to maintain supporting documentation for medical and administrative exemptions in Service members’ medical and personnel records.

Management Comments and Our Response

The Acting Under Secretary of Defense for Personnel and Readiness agreed with one recommendation and disagreed with one recommendation. However, planned actions addressed the specifics of the two recommendations. Therefore, those two recommendations are open and resolved.

Responding on behalf of the Director, Defense Health Agency, the Acting Under Secretary partially agreed with the remaining recommendation, but it remains unresolved because the Acting Under Secretary did not provide planned actions.

We request that the Acting Under Secretary of Defense for Personnel and Readiness provide comments on the unresolved recommendation within 30 days in response to the final report. Please see the Recommendations Table on the next page for the status of the recommendations.
**Recommendations Table**

<table>
<thead>
<tr>
<th>Management</th>
<th>Recommendations Unresolved</th>
<th>Recommendations Resolved</th>
<th>Recommendations Closed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under Secretary of Defense for Personnel and Readiness</td>
<td>None</td>
<td>A.1, C.1</td>
<td>None</td>
</tr>
<tr>
<td>Under Secretary of Defense for Personnel and Readiness (responding on behalf of the Director, Defense Health Agency)</td>
<td>B.1</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

Please provide Management Comments by April 11, 2024.

**Note:** The following categories are used to describe agency management’s comments to individual recommendations.

- **Unresolved** – Management has not agreed to implement the recommendation or has not proposed actions that will address the recommendation.

- **Resolved** – Management agreed to implement the recommendation or has proposed actions that will address the underlying finding that generated the recommendation.

- **Closed** – The DoD OIG verified that the agreed upon corrective actions were implemented.
MEMORANDUM FOR UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS
DIRECTOR, DEFENSE HEALTH AGENCY
AUDITOR GENERAL, DEPARTMENT OF THE ARMY
AUDITOR GENERAL, DEPARTMENT OF THE NAVY
AUDITOR GENERAL, DEPARTMENT OF THE AIR FORCE

SUBJECT: Audit of Military Services’ Processing of Coronavirus Disease—2019 Vaccination Exemptions and Discharges for Active Duty Service Members
(Report No. DODIG-2024-061)

This final report provides the results of the DoD Office of Inspector General’s audit. We previously provided copies of the draft report and requested written comments on the recommendations. We considered management’s comments on the draft report when preparing the final report. These comments are included in the report.

This report contains one recommendation that is considered unresolved because the Acting Under Secretary of Defense for Personnel and Readiness did not provide planned actions for the recommendation. Therefore, the recommendation remains open. We will track this recommendation until management provides planned actions that we determine to be sufficient to meet the intent of the recommendation and management officials submit adequate documentation showing that all agreed-upon actions are completed.

This report contains two recommendations that are considered resolved and open. Therefore, we will close the recommendations when you provide us documentation showing that all agreed-upon actions to implement the recommendations are completed.

DoD Instruction 7650.03 requires that recommendations be resolved promptly. Therefore, please provide us within 30 days your response concerning specific actions in process or alternative corrective actions proposed on the recommendations. Send your response to audityorktown@dodig.mil.

If you have any questions, please contact me at [Contact Information].

FOR THE INSPECTOR GENERAL:

[Signature]

Carmen J. Malone
Assistant Inspector General for Audit
Acquisition, Contracting, and Sustainment
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Introduction

Objective

The objective of this audit was to determine whether the Military Services processed exemption requests for the coronavirus disease–2019 (COVID-19) vaccination and discharged active duty Service members in accordance with Federal and DoD guidance. See the Appendix for a discussion on the scope, methodology, and prior coverage related to the audit objective.

We initiated this audit in February 2022 when the COVID-19 vaccine mandate was in effect. Accordingly, we reviewed vaccination exemptions and discharges specific to the DoD COVID-19 vaccination mandate. Although the Secretary of Defense rescinded the COVID-19 vaccination mandate on January 10, 2023, our recommendations apply to vaccination exemptions and discharges for all required Service member vaccinations.

Background

COVID-19 is an infectious disease that can cause a wide spectrum of symptoms. On March 11, 2020, the World Health Organization declared the COVID-19 outbreak a pandemic, and on March 13, 2020, the President of the United States declared the COVID-19 outbreak an emergency. On August 23, 2021, the U.S. Food and Drug Administration (FDA) approved the first COVID-19 vaccine, the Pfizer-BioNTech vaccine marketed as “COMIRNATY.” The FDA subsequently approved the Moderna vaccine, SPIKEVAX, on January 31, 2022.

DoD COVID-19 Vaccination Mandate and Rescission

On August 24, 2021, the Secretary of Defense issued a memorandum directing the Secretaries of the Military Departments to begin immediate vaccination of all members of the Armed Forces against COVID-19.1 The memorandum limited mandatory vaccinations to FDA-approved COVID-19 vaccines but allowed for voluntary vaccinations with vaccines granted with an FDA Emergency Use Authorization or World Health Organization Emergency Use Listing.2 In response to the memorandum, each Military Service ordered its members to be vaccinated and established vaccination deadlines for its active duty Service members. See Table 1 for a list of COVID-19 vaccination deadlines for each Military Service.

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2 As of August 24, 2021, the only vaccine that had received full licensure from the FDA was the Pfizer-BioNTech vaccine.
Table 1. COVID-19 Vaccination Deadline for Active Duty Service Members

<table>
<thead>
<tr>
<th>Military Service</th>
<th>COVID-19 Vaccination Deadline by Military Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>December 15, 2021</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>November 28, 2021</td>
</tr>
<tr>
<td>Navy</td>
<td>November 28, 2021</td>
</tr>
<tr>
<td>Air Force/Space Force</td>
<td>November 2, 2021</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Each of the Military Services issued COVID-19 vaccination guidance, including disciplinary actions for vaccination refusal. Service members awaiting adjudication of a pending medical, administrative, or religious exemption for the COVID-19 vaccination were not considered to be refusing the COVID-19 vaccination. The Military Services determined that Service members refusing the COVID-19 vaccination were “disobeying a lawful order.” Accordingly, the Military Services processed the discharge of Service members for COVID-19 vaccination refusal as an Article 92 violation of the Uniform Code of Military Justice with the basis of discharge as “Misconduct.” When a Military Service administratively discharges an active duty Service member, the Service member receives one of three types of discharges: (1) honorable, (2) general (under honorable conditions), or (3) other than honorable conditions. However, the FY 2022 National Defense Authorization Act limited discharges solely for COVID-19 vaccination refusal to honorable or general. See Table 2 for descriptions of those discharges.

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4 Section 892, title 10, United States Code, Article 92, “Failure to obey order or regulation.”

**Table 2. Types of Administrative Discharges**

<table>
<thead>
<tr>
<th>Discharge Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honorable</td>
<td>Appropriate when the quality of the Service member’s service generally has met the standards of acceptable conduct and performance of duty for military personnel.</td>
</tr>
<tr>
<td>General (Under Honorable Conditions)*</td>
<td>Appropriate when significant negative aspects of the Service member’s conduct or performance of duty outweigh the positive aspects of the Service member’s military record.</td>
</tr>
</tbody>
</table>

* For the purposes of this report, we refer to a general (under honorable conditions) discharge as a general discharge.

Source: The DoD OIG.

On January 10, 2023, the Secretary of Defense issued a memorandum rescinding the COVID-19 vaccination mandate for all Service members as required by Section 525 of the FY 2023 National Defense Authorization Act. The memorandum instructs that:

- no current Service member will be separated solely on the basis of refusing the COVID-19 vaccination if they sought an accommodation on religious, administrative, or medical grounds;
- Military Departments will cease any ongoing reviews of current Service member religious, administrative, or medical accommodation requests solely for exemption from the COVID-19 vaccine or appeals of denials of such requests; and
- other standing departmental policies, procedures, and processes regarding vaccinations remain in effect, including the ability of commanders to consider, as appropriate, vaccination status of Service members in making deployment, assignment, and other operational decisions, such as determining when a vaccination is required for travel to, or entry into, a foreign nation.

**DoD Vaccination Program**

DoD Instruction 6205.02 establishes policy, assigns responsibilities, and provides procedures for the DoD vaccination program. The Instruction states that all DoD Service members and other beneficiaries required or eligible to receive vaccinations will be offered vaccinations in accordance with recommendations from the Centers for Disease Control and Prevention and its Advisory Committee on Immunization Practices. Regarding pandemics, the Instruction states:

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that the Director of the Defense Health Agency, in coordination with the Secretaries of the Military Departments, the Defense agencies, and other DoD organizations, will develop pandemic vaccination prioritization guidance in coordination with the Department of Health and Human Services, tailored to DoD operational requirements.

Joint Regulation, “Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases,” (the Joint Regulation), provides requirements for the military vaccination program, requires Service members to have nine vaccinations upon entrance to the Service, and states that Service members may require additional vaccinations based on occupation, location, and mission requirements.8

Vaccination Exemptions

The DoD allows active duty Service members to request exemptions from vaccinations. The Army, Marine Corps, Navy, and Air Force all use the Joint Regulation for guidance on Service member vaccinations and vaccination exemptions.9 According to the Joint Regulation, there are two types of exemptions—medical and administrative.

Medical Exemptions

Medical exemptions typically originate from discussions between the Service member and the health care provider; the Service member does not submit a formal request as they do with religious accommodation requests.10 Health care providers determine whether to approve a medical exemption based on the health of the Service member and the nature of the vaccination under consideration. Health care providers may approve a medical exemption in situations where vaccination may be harmful to a person due to a previous medical reaction or a specific existing medical condition. The Joint Regulation allows health care providers to approve medical exemptions for vaccinations, but the Army, Marine Corps, and Navy assigned authority to approve permanent medical exemptions for the COVID-19 vaccination to specific health care personnel.11

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9 The Space Force reported its exemption requests together with Air Force exemption requests; Space Force Service members follow Air Force policies for COVID-19 vaccine exemption requests.

10 Only personnel who the DoD authorizes to perform health care functions are authorized to approve medical exemptions.

The Air Force did not allow permanent medical exemptions for the COVID-19 vaccine. See Table 3 for permanent medical exemption approval authority for the COVID-19 vaccination for each Military Service.

### Table 3. Personnel Authorized to Approved Permanent Medical Exemptions for the COVID-19 Vaccination

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Personnel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>Commanding General, Regional Health Command¹</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>Command Surgeon²</td>
</tr>
<tr>
<td>Navy</td>
<td>Medical Department Flag Officer³</td>
</tr>
<tr>
<td>Air Force</td>
<td>N/A⁴</td>
</tr>
</tbody>
</table>


Source: The DoD OIG.

A medical exemption may be temporary (up to 365 days) or permanent. For example, health care providers may approve a permanent exemption for a Service member who had a previous reaction to a vaccine, or a temporary exemption for duration of a Service member’s pregnancy. The Joint Regulation provides a list of standard medical exemption codes that Military Service personnel record into the Military Services’ immunization tracking systems. See Table 4 for explanations of the standard medical exemption codes.

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¹³ To record the vaccinations and exemption status of Service members, the Army uses the Medical Protection System (MEDPROS), the Marine Corps and Navy use the Medical Readiness Reporting System (MRRS), and the Air Force uses the Aeromedical Services Information Management System (ASIMS).
Table 4. Medical Exemption Codes from the Joint Regulation

<table>
<thead>
<tr>
<th>Medical Exemption Code</th>
<th>Meaning and Explanation</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>MD</td>
<td>Medical, declined</td>
<td>Indefinite</td>
</tr>
<tr>
<td></td>
<td>Declination of optional vaccines (not applicable to military required vaccinations).</td>
<td></td>
</tr>
<tr>
<td>MA</td>
<td>Medical, assumed</td>
<td>Indefinite</td>
</tr>
<tr>
<td></td>
<td>Prior immunization can be reasonably inferred from an individual’s past experience but documentation is missing.</td>
<td></td>
</tr>
<tr>
<td>MI</td>
<td>Medical, immune</td>
<td>Indefinite</td>
</tr>
<tr>
<td></td>
<td>Evidence of immunity; natural infection presumed.</td>
<td></td>
</tr>
<tr>
<td>MP</td>
<td>Medical, permanent</td>
<td>Indefinite</td>
</tr>
<tr>
<td></td>
<td>HIV infection, prolonged or permanent immune suppression, upper age limit, other contraindication determined by physician. Can be reversed if the condition changes.</td>
<td></td>
</tr>
<tr>
<td>MR</td>
<td>Medical, reactive</td>
<td>Indefinite</td>
</tr>
<tr>
<td></td>
<td>Permanent restriction from receiving additional doses of a specific vaccine. Only used after severe reaction after vaccination.</td>
<td></td>
</tr>
<tr>
<td>MS</td>
<td>Medical, supply</td>
<td>Up to 90 days</td>
</tr>
<tr>
<td></td>
<td>Exempt due to a lack of vaccine supply.</td>
<td></td>
</tr>
<tr>
<td>MT</td>
<td>Medical, temporary</td>
<td>Up to 365 days</td>
</tr>
<tr>
<td></td>
<td>Pregnancy, hospitalization, events referred for medical consultation, convalescent leave, pending medical evaluation board, any temporary contraindication to immunization.</td>
<td></td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

**Administrative Exemptions**

Command leaders approve administrative exemptions and are responsible for monitoring the vaccination status of their personnel. Command leaders may approve an administrative exemption for non-medical reasons, including a pending discharge, retirement, or accommodation of a religious belief. Command leaders approve administrative exemptions, but health care providers typically record the exemptions in the Service members’ profiles in the Military Services’ immunization tracking systems because health care providers have authorized access to update
the Military Services’ immunization tracking systems.\textsuperscript{14} The Joint Regulation provides a list of standard administrative exemption codes that Military Service personnel enter into the Military Services’ immunization tracking systems.\textsuperscript{15} See Table 5 for explanations of the administrative exemption codes for vaccinations.

<table>
<thead>
<tr>
<th>Administrative Exemption Code</th>
<th>Meaning and Explanation</th>
<th>Explanation</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Administrative, emergency leave</td>
<td>Individual on emergency leave.</td>
<td>Up to 30 days</td>
</tr>
<tr>
<td>AP</td>
<td>Administrative, Permanent Change of Station</td>
<td>Permanent change of station.</td>
<td>Up to 90 days</td>
</tr>
<tr>
<td>AR</td>
<td>Administrative, refusal</td>
<td>Personnel involved in actions under the Uniformed Code of Military Justice, or seeking religious waiver.*</td>
<td>Until resolution</td>
</tr>
<tr>
<td>AS</td>
<td>Administrative, separation</td>
<td>Pending discharge, separation, and retirement.</td>
<td>Until 180 days</td>
</tr>
<tr>
<td>AT</td>
<td>Administrative, temporary</td>
<td>Absent without leave, legal action pending (other than code AR). The Army uses “Administrative, temporary” to record religious accommodation requests for the COVID-19 vaccination.</td>
<td>Until 90 days</td>
</tr>
</tbody>
</table>

* Use of administrative exemption codes varies by Military Service. The Marine Corps, Navy, and Air Force developed separate administrative exemptions codes to indicate that a Service member requested a religious accommodation for the COVID-19 vaccination.

Source: The DoD OIG.

**Documenting COVID-19 Vaccinations and Exemptions**

The Joint Regulation requires that command leaders monitor Service member vaccination status and ensure that personnel document vaccination exemption codes in the Military Services’ immunization tracking systems.\textsuperscript{16} To record the vaccinations and exemption status of Service members, the Army uses the Medical Protection System (MEDPROS), the Marine Corps and Navy use the Medical

\textsuperscript{14} While health care providers typically record administrative exemptions in the Military Services’ immunization tracking systems because they have access to the systems, administrative personnel may also record administrative exemptions into the immunization tracking systems. For the purposes of our report, we will refer to personnel who record administrative exemptions as “Military Service personnel.”

\textsuperscript{15} Military Service personnel enter medical and administrative exemptions into Service members’ profiles in the immunization tracking systems to explain why the Service members may not have received required vaccinations.

\textsuperscript{16} Command leaders are responsible for monitoring vaccination status, but they are not always the person who records the exemption in the immunization tracking system. Health care providers are responsible for recording medical exemptions, while health care providers or administrative personnel may record administrative exemption codes in the immunization tracking systems.
Readiness Reporting System (MRRS), and the Air Force uses the Aeromedical Services Information Management System (ASIMS). The DoD also tracks vaccinations for Service members in the Military Health System GENESIS electronic health record system, which communicates with, sends data to, and receives data from the three individual medical readiness systems.

**Review of COVID-19 Exemptions and Discharges**

The DoD Office of Inspector General received complaints through the DoD Hotline between August 2021 and June 2022 alleging that the Military Services were improperly processing COVID-19 vaccination exemption requests. In February 2022, we initiated this audit. We continued to receive complaints and, on June 2, 2022, the Acting DoD Inspector General issued a memorandum (Acting IG memorandum) to the Secretary of Defense, alerting the Secretary to "potential noncompliance with standards for reviewing and documenting the denial of religious accommodation requests of Service members identified through complaints submitted to my office."17 The Acting IG memorandum identified two primary concerns: (1) the volume and rate at which decisions were made to deny requests, and (2) a lack of individualized review of religious accommodation requests, as required by Federal law and DoD policy.18

To determine whether the Military Services processed exemption requests and discharges in accordance with Federal and DoD guidance, we randomly selected a nonstatistical sample of COVID-19 vaccination exemptions recorded in the immunization tracking systems as of June 2022 and discharges solely for COVID-19 vaccination refusal that had occurred before June 2022 across each Military Service. Table 6 identifies our sample sizes of exemption requests and discharges of active duty Service members by Military Service. For the total number of active duty Service members’ exemption requests and discharges by Military Service, see Table 17 in the Appendix. For additional information on how we selected samples, see the Appendix.

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Table 6. Sample Sizes of Active Duty Service Members’ Exemption Requests and Discharges by Military Service

<table>
<thead>
<tr>
<th>Exemption Requests or Discharge</th>
<th>Sample Size¹</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Army</td>
<td>Marine Corps</td>
<td>Navy</td>
<td>Air Force²</td>
<td>Total</td>
</tr>
<tr>
<td>Permanent Medical</td>
<td>18</td>
<td>6</td>
<td>6</td>
<td>5³</td>
<td>35</td>
</tr>
<tr>
<td>Temporary Medical</td>
<td>16</td>
<td>15</td>
<td>15</td>
<td>16</td>
<td>62</td>
</tr>
<tr>
<td>Administrative-Other Than Religious Accommodation</td>
<td>15</td>
<td>11</td>
<td>13</td>
<td>8</td>
<td>47</td>
</tr>
<tr>
<td>Administrative-Religious Accommodation</td>
<td>33</td>
<td>34</td>
<td>35</td>
<td>35</td>
<td>137</td>
</tr>
<tr>
<td>Approved For Discharge or Discharged Service members</td>
<td>25</td>
<td>29</td>
<td>26</td>
<td>24</td>
<td>104</td>
</tr>
<tr>
<td>Total</td>
<td><strong>107</strong></td>
<td><strong>95</strong></td>
<td><strong>95</strong></td>
<td><strong>88</strong></td>
<td><strong>385</strong></td>
</tr>
</tbody>
</table>

¹ We originally selected 97 medical exemptions for review. However, we later determined that 18 of those exemptions were not medical exemptions because Military Service personnel incorrectly recorded the 18 exemptions. Likewise, we originally selected 47 administrative exemptions for review but we later determined that 15 of those exemptions were not administrative exemptions because Military Service personnel incorrectly recorded the 15 exemptions. Therefore, we removed the 18 medical exemptions and 15 administrative exemptions from our samples.

² We combined the Air Force and Space Force exemptions and discharges.

³ Air Force officials explained that the permanent medical exemption applies to all vaccines and that it is often applied to a Service member’s record just before separation from military service. Additionally, we determined that all five Service members subsequently separated from military service.

Source: The DoD OIG.

In addition, in April 2022, the DoD OIG requested that the Office of the Naval Inspector General (Naval OIG) review six complaints to the DoD Hotline involving religious accommodation requests submitted by Navy Service members. The six complaints alleged that the decision authority and the appeal authority did not conduct individual assessments of their requests. The Naval OIG completed its review in November 2022, concluding that the decision authority and the appeal authority “provided personalized consideration” of each request and appeal. The Naval OIG also determined that “it is probable that the [decision authority] and [the appeal authority] did not personally spend an inordinate amount of time reviewing each package; however, it is clear that their respective staffs afforded each package considerable review.”
The Military Services generally processed religious accommodation requests and appeals for COVID-19 vaccinations in accordance with Federal and DoD guidance, but the Army and Air Force generally did not meet the DoD timeliness requirements for processing the requests. Specifically, the Military Services adjudicated (decided) religious accommodation requests and appeals for all 137 religious accommodation requests we reviewed through the appropriate decision authorities, and the request packages included all of the required chaplain, medical, legal, and chain of command recommendations. The decision authorities stated that they considered the subject matter expert recommendations; assertions of compelling governmental interest; and whether there were alternative means to address the accommodation. Additionally, we found no evidence of a lack of individual review by the decision authorities.

However, the Army did not process the 12 religious accommodation requests we reviewed within its 90-day requirement, instead averaging 192 days. The Air Force did not process the 35 requests we reviewed within its 30-day requirement, instead averaging 168 days. According to Army and Air Force personnel, the delays in processing the requests occurred because of the unprecedented number of requests and the extended time required for processing the requests through the Service member's chain of command and the decision authorities. While the COVID-19 vaccination requirement has been rescinded, if the Army and Air Force do not issue timely decisions for religious accommodation requests.

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19 DoD Instruction 1300.17 provides timelines for processing religious accommodation requests based on the need for a waiver of regulation or policy. For requests that do not require a waiver of policy, the Instruction requires final action within 30 days from Service member submission for requests submitted from the United States and 60 days for requests submitted outside of the United States. For requests requiring a waiver of policy, the Instruction requires final action within 90 days from Service member submission for requests submitted from the United States and 120 days for requests submitted outside of the United States.

20 We reviewed 33 Army requests; however, only 12 requests received decisions as of September 2022. Of the remaining 21 requests, 13 were still in process, 7 were canceled when the Service member voluntarily separated from Service, and 1 was canceled because the Service member received the vaccination.

21 Army, Marine Corps, and Navy religious accommodation requests require a waiver of policy, while Air Force requests do not. DoD Instruction 1300.17 instructs that, for requests that do not require a waiver of policy, the decision authority must take final on the request within 30 days from Service member submission (60 days for requests submitted outside of the United States).
requests, it could potentially affect a Service member’s deployability and job assignments and hinder their command’s ability to make informed deployment and assignment decisions.

**Religious Accommodation Request Background**

As of January 2023, more than 16,000 active duty Service members had submitted religious accommodation requests for the COVID-19 vaccination. DoD Instruction 1300.17, which incorporates the Religious Freedom Restoration Act, establishes policy, assigns responsibilities, and provides procedures for the accommodation of religious practices of Service members.\(^\text{22}\) DoD Instruction 1300.17 states that DoD Components will accommodate individual expressions of sincerely held beliefs (conscience, moral principles, or religious beliefs), which do not have an adverse impact on military readiness, unit cohesion, good order and discipline, or health and safety. DoD Instruction 1300.17 also states, “Officials charged with making recommendations or taking final action on a Service member’s request for the accommodation of religious practices will review each request individually, considering the full range of facts and circumstances relevant to the specific request.” The Instruction also states that if a military policy, practice, or duty substantially burdens a Service member’s exercise of religion, accommodation can only be denied if:

- the military policy, practice, or duty is in furtherance of a compelling governmental interest; and
- it is the least restrictive means of furthering that compelling governmental interest.

DoD Instruction 1300.17 also provides guidance on religious accommodation decision authorities and timelines. Table 7 shows the number of requests and appeals from active duty Service members as of January 2023, when the COVID-19 vaccine mandate was rescinded, and the number of requests and appeals we reviewed by Military Service.\(^\text{23}\)

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\(^{23}\) The Military Services required all active duty Service members to be fully vaccinated before the end of December 2021.
Table 7. Number of Religious Accommodation Requests and Appeals from Active Duty Service Members and Number Reviewed in This Audit

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Number of Religious Accommodation Requests Submitted (as of January 2023)</th>
<th>Number of Religious Accommodation Requests Reviewed by Auditors</th>
<th>Number of Religious Accommodation Request Appeals Submitted (as of January 2023)</th>
<th>Number of Religious Accommodation Appeals Reviewed by Auditors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>4,428</td>
<td>33</td>
<td>522</td>
<td>3</td>
</tr>
<tr>
<td>Marine Corps¹</td>
<td>3,709</td>
<td>34</td>
<td>1,601</td>
<td>14</td>
</tr>
<tr>
<td>Navy</td>
<td>3,409</td>
<td>35</td>
<td>1,536</td>
<td>18</td>
</tr>
<tr>
<td>Air Force²</td>
<td>4,767</td>
<td>35</td>
<td>2,785</td>
<td>18</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,313</strong></td>
<td><strong>137³</strong></td>
<td><strong>6,444</strong></td>
<td><strong>53³</strong></td>
</tr>
</tbody>
</table>

¹ The number of Marine Corps Service member requests includes both active duty Service members and Reserve members; when tracking requests, the Marine Corps did not distinguish between active duty Service members and Reserve members.

² Air Force amounts include requests from Space Force Service members.

³ Of the 137 requests we reviewed, 53 were appealed. During our audit, appeal authorities issued decisions on 36 of the 53 appeals, approving 5 and denying 31 requests.

Source: The DoD OIG.

The Military Services Adjudicated Religious Accommodation Requests and Appeals Through the Appropriate Decision Authorities

The Military Services adjudicated the religious accommodation requests and appeals we reviewed through the appropriate decision authorities. DoD Instruction 1300.17 states that religious accommodation requests that do not require a waiver of Military Department or Military Service policies can “be reviewed and acted on at the lowest appropriate level of command or supervision,” as provided in the Military Department and Military Service policies. If the religious accommodation request requires a waiver of Military Department or Service policy, the Instruction states that the Secretary of the Military Department should adjudicate the request but allows the Secretary to delegate that authority, within limits established by the Instruction.²⁴ In accordance with the Military Service-level regulations, the Army, Marine Corps, and Navy religious accommodation requests require a waiver of policy, while the Air Force does not.

²⁴ DoD Instruction 1300.17 limits the delegation of authority to no lower than the Deputy Chief of Staff, G-1 (Army), the Deputy Commandant, (Manpower and Reserve Affairs) (Marine Corps), and the Chief of Naval Personnel (Navy).
DoD Instruction 1300.17 directs that the Military Departments or Military Services provide a process for Service members to appeal a denial of a religious accommodation request. The Instruction requires an official in the chain of command or chain of supervision above the official who took final action on the request to review the appeal. Table 8 lists the decision authority and the appeal authority for each Military Service.

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Decision Authority</th>
<th>Appeal Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>The Surgeon General of the Army</td>
<td>Assistant Secretary of the Army (Manpower and Reserve Affairs)</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>Deputy Commandant (Manpower and Reserve Affairs)</td>
<td>Commandant of the Marine Corps*</td>
</tr>
<tr>
<td>Navy</td>
<td>Deputy Chief of Naval Operations for Manpower, Personnel, Training, and Education</td>
<td>Chief of Naval Operations</td>
</tr>
<tr>
<td>Air Force</td>
<td>Commanders of: Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies</td>
<td>The Surgeon General of the Air Force</td>
</tr>
</tbody>
</table>

* Marine Corps Order 1730.9 assigns appeal authority to the Commandant of the Marine Corps but allows the Assistant Commandant of the Marine Corps or the Director of the Marine Corps Staff to take action on behalf of the Commandant.

Source: The DoD OIG.

**The Military Services Adjudicated Religious Accommodation Requests Through the Appropriate Decision Authorities**

**Army**

The Army adjudicated the 12 religious accommodation requests we reviewed through the Surgeon General of the Army. DoD Instruction 1300.17 requires the Secretary of the Army to adjudicate requests, but allows the Secretary to delegate authority no lower than the Deputy Chief of Staff, G-1. Army Directive 2021-33 establishes the Surgeon General of the Army as the decision authority for religious accommodation requests for all vaccinations. The Surgeon General of the Army holds the same lieutenant general rank as the Deputy Chief of Staff, G-1, and therefore, is an appropriate designation to review the requests.

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25 We reviewed 33 Army requests; however, only 12 requests received decisions as of September 2022. Of the remaining 21 requests, 13 were still in process, 7 were canceled when the Service member voluntarily separated from Service, and 1 was canceled because the Service member received the vaccination.

Marine Corps and Navy

The Marine Corps adjudicated the 34 and the Navy adjudicated the 35 religious accommodation requests we reviewed through the Deputy Commandant (Manpower and Reserve Affairs) (DC [M&RA]) or the Deputy Chief of Naval Operations for Manpower, Personnel, Training, and Education (DCNO N1), respectively. DoD Instruction 1300.17 requires the Secretary of the Navy to adjudicate requests, but allows the Secretary to delegate authority no lower than the DC (M&RA) or the Chief of Naval Personnel. In 2008, the Secretary of the Navy delegated to the Assistant Secretary of the Navy (Manpower and Reserve Affairs) overall policy control for accommodation of religious practices. The Assistant Secretary of the Navy (Manpower and Reserve Affairs) subsequently delegated to the DC (M&RA) the authority to approve all Marine Corps requests and to the DCNO N1 the authority to approve all Navy requests. The DC (M&RA) is the same level position as the minimum level position designated in DoD Instruction 1300.17 and, therefore, is an appropriate designation to adjudicate requests. The DCNO N1 serves concurrently as the Chief of Naval Personnel and therefore is an appropriate designation to adjudicate requests.

Air Force

The Air Force adjudicated the 35 religious accommodation requests we reviewed through the commanders of the Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies.27 Department of the Air Force Instruction 52-201 states that Air Force Service members may submit religious accommodation requests for vaccinations to their Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies.28 Staff Judge Advocate personnel from Headquarters Air Force Personnel Center confirmed that religious accommodation requests for vaccinations do not require a waiver of policy. DoD Instruction 1300.17 allows adjudication of requests at the lowest appropriate level of command or supervision, as provided in the Military Service policies. Department of the Air Force Instruction 52-201 assigns the decision authority to the commanders of the Major Commands, Field Commands, Field Operating Agencies, and Direct Reporting Units. The appropriate decision authorities adjudicated Air Force religious accommodation requests we reviewed. Specifically, the requests we reviewed were adjudicated by commanders of the:

- Air Mobility Command, Pacific Air Forces, and Air Education and Training Command (Major Commands);

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27 We reviewed 35 Air Force requests: Air Mobility Command (7); Pacific Air Forces (7); Air Education and Training Command (4), Space Systems Command (6); Space Operations Command (2); Air Force District of Washington (5); and Air Force Office of Special Investigations (4).

The Military Services Adjudicated Appeals of Religious Accommodation Requests Through Appropriate Decision Authorities

**Army**

Of the 12 requests that the decision authority adjudicated during our audit, Service members submitted 3 requests for appeal. None of the three requests received a decision during our audit; however, all were submitted to the Assistant Secretary of the Army (Manpower and Reserve Affairs). The Assistant Secretary of the Army (Manpower and Reserve Affairs) has overall supervision of the workforce and Reserve Component affairs of the Department of the Army and is therefore in the chain of supervision above the decision authority, the Surgeon General of the Army.

**Marine Corps**

Of the 34 requests we reviewed, Service members submitted 14 requests for appeal. The Assistant Commandant of the Marine Corps adjudicated all of the Marine Corps appeal decisions we reviewed. Marine Corps guidance assigns appeal authority to the Commandant of the Marine Corps but allows the Assistant Commandant to take action on behalf of the Commandant. When the Assistant Commandant of the Marine Corps acts on behalf of the Commandant, the orders issued have the same effect as those issued by the Commandant. The Assistant Commandant of the Marine Corps is therefore in the chain of command or the chain of supervision above the decision authority, the DC (M&RA).

**Navy**

Of the 35 requests we reviewed, Service members submitted 18 requests for appeal. The Chief of Naval Operations adjudicated all of the Navy appeal decisions we reviewed. The Chief of Naval Operations is the head of the Office of Naval Operations and is therefore in the chain of command or chain of supervision above the decision authority, the DCNO N1.

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29 Of the 14 appeals submitted, 8 were adjudicated, 4 were still in process, and 2 were canceled because the Service members separated from military service before the appeal was adjudicated.

30 The DCNO N1 approved 2 of the 18 appeals because the Service members’ circumstances changed and they had a pending discharge or retirement when they submitted their appeal requests. Of the remaining 16 appeals, 8 were adjudicated by the Chief of Naval Operations, 7 were still in process, and 1 was withdrawn by the Service member.
Air Force

Of the 35 requests we reviewed, Service members submitted 18 requests for appeal. The Surgeon General of the Air Force adjudicated all 18 Air Force appeal decisions we reviewed. The Surgeon General of the Air Force serves as the principal advisor to the Secretary of the Air Force on all health and medical matters of the Air Force and the Space Force. The Secretary of the Air Force assigned appeal authority to the Surgeon General for requests for accommodation of religious practices related to health requirements or medical practices. The Surgeon General of the Air Force is therefore in the chain of supervision above the Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies.

Religious Accommodation Request Packages Included All Required Recommendations

The religious accommodation request packages we reviewed included all of the required recommendations. The required documents vary by Military Service but generally included recommendations from chaplain, medical, legal, and chain of command personnel. The Marine Corps and Air Force policies also require recommendations from their respective religious review boards. See Table 9 for required recommendations by Military Service.

31 Section 9036, title 10, “Surgeon General: appointment; duties.”
33 The Marine Corps and Air Force require religious review boards to provide recommendations to decision authorities for religious accommodation requests; the Army and Navy do not have religious review boards. All Services required recommendations from the Service member’s chain of command.
Table 9. Required Recommendations for Religious Accommodation Requests

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Chaplain</th>
<th>Medical¹</th>
<th>Legal²</th>
<th>Chain of Command</th>
<th>Religious Review Board³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>Yes</td>
<td>Not required</td>
<td>Yes</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Navy</td>
<td>Yes</td>
<td>Not required</td>
<td>Yes</td>
<td>Yes</td>
<td>Not required</td>
</tr>
<tr>
<td>Air Force</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

¹ Army and Navy policies do not require medical recommendations for religious accommodations; however, the 33 Army and 35 Navy religious request packages we reviewed generally included a recommendation from the Public Health Directorate within the Army Surgeon General’s office and the Navy Bureau of Medicine and Surgery, respectively.

² The Marine Corps decision authority must consult with their staff judge advocate and the Marine Corps Religious Board includes a legal advisor.

³ The Marine Corps and Air Force require religious review boards to review religious accommodation requests and provide recommendations to the decision authority.

Source: The DoD OIG.

Each of the 137 religious accommodation request packages we reviewed contained the Service member’s request and individualized recommendations from chaplain, medical, legal, and chain of command personnel as required by Military Service policies. Each of the 34 Marine Corps and 35 Air Force religious accommodation packages we reviewed included recommendations from their respective religious review boards. See Table 10 for a description of each type of subject matter expert recommendation.

Table 10. Description of Subject Matter Expert Reviews or Recommendations

<table>
<thead>
<tr>
<th>Subject Matter Expert</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chaplain</td>
<td>All of the Military Services require a chaplain to interview the Service member to determine if their religious accommodation request is based on a “sincerely held religious belief.” Chaplains documented interviews and recommendations in memorandums and included individualized information such as Service member name, rank, religious affiliation, specific objection to the vaccination, and other interview details.</td>
</tr>
<tr>
<td>Medical</td>
<td>Medical personnel provided medical recommendations and identified the Service member by name and rank. Medical recommendations we reviewed based their recommendations on the safety of the vaccine, the health and safety of the Service member, and the impact on the health and safety of other Service members.</td>
</tr>
<tr>
<td>Legal</td>
<td>Legal recommendations we reviewed were generally detailed, comprehensive reviews of the Service member’s request, supporting information, and subject matter expert recommendations; the reviews varied slightly by Service with some determining “legal sufficiency” to approve or deny a request and others recommending approval or denial.</td>
</tr>
</tbody>
</table>
Table 10. Description of Subject Matter Expert Reviews or Recommendations (cont’d)

<table>
<thead>
<tr>
<th>Subject Matter Expert</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chain of Command</td>
<td>Chain of command recommendations identified the Service member by name and rank and included detailed information on the Service member’s job duties, current assignments, specific religious objections, proximity to separation or retirement, and other relevant information such as a requirement to work in a sensitive compartmented information facility (“SCIF”). Generally, the recommendations addressed whether the vaccination was the least restrictive means of furthering the compelling governmental interest; either directly or indirectly by conveying information on the Service member’s work environment and the ability to perform their job while unvaccinated. Some Military Services only required a chain of command recommendation from the Service member’s immediate commander while others required recommendations from all levels of the Service member’s chain of command.</td>
</tr>
<tr>
<td>Religious Board</td>
<td>Both the Marine Corps and Air Force have religious boards that review the religious accommodation requests and make recommendations to their respective decision authorities. The Marine Corps Religious Accommodation Review Board is comprised of three voting members assigned by the Deputy Commandant (Manpower and Reserve Affairs), supported by non-voting advisors including a legal advisor and a chaplain. A senior chaplain leads the Air Force Religious Resolution Team that includes representatives from the staff judge advocate, medical, and the Service member’s command. The Air Force decision authorities sometimes received recommendations from Religious Resolution Teams at both the Wing-level and the Command level.</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Decision Authorities Considered Religious Accommodation Requests and Issued Decisions in Accordance with Federal Law and DoD Policies

All of the decision authorities we interviewed stated that they considered the subject matter expert recommendations, assertions of compelling governmental interest, and whether there were alternative means to address the accommodation, in accordance with DoD guidance. See Table 11 for a list of the decision authorities and office staff we interviewed. Additionally, we found no evidence of a lack of individual review by the decision authorities.

We found no evidence of a lack of individual review by the decision authorities.

34 DoD Instruction 1300.17 requires decision authorities to consider alternative means to address the accommodation. For example, if a Service member objects to the DoD-required vaccine but will accept an alternative vaccine, the decision authority may allow the Service member to become vaccinated with an alternative vaccine.
Table 11. Decision Authorities and Office Staff Interviewed by the DoD Office of Inspector General

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Decision Authority Interviewed</th>
<th>Decision Authority Office Staff Interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>The Surgeon General of the Army</td>
<td>The Office of the Surgeon General</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>Deputy Commandant (Manpower and Reserve Affairs)</td>
<td>Military Policy Office, Manpower &amp; Reserve Affairs, Headquarters, Marine Corps</td>
</tr>
<tr>
<td>Navy</td>
<td>N/A(^1)</td>
<td>Office of the Chief of Naval Personnel</td>
</tr>
<tr>
<td>Air Force(^2)</td>
<td>Commander, Air Mobility Command; Commander, Pacific Air Forces; Commander, Space Operations Command; Commander, Air Force District of Washington; and Commander, Air Force Office of Special Investigations</td>
<td>Various office staff of: Air Mobility Command; Pacific Air Forces; Space Operations Command; Air Force District of Washington; and Air Force Office of Special Investigations</td>
</tr>
</tbody>
</table>

\(^1\) The Chief of Naval Personnel, who signed the decision letters for religious accommodation for the COVID-19 vaccination, retired in June 2022 before we could conduct an interview. However, we interviewed the staff members in the Office of the Chief of Naval Personnel who processed the religious accommodation requests.

\(^2\) Air Force includes Space Force Service members.

Source: The DoD OIG.

Decision authorities we interviewed discussed in detail the religious accommodation request process, the nuances of the process within their offices, and the specifics of some of the requests they reviewed. During our interviews, we learned that most of the decision authorities’ office staff created approval and denial decision letter templates to streamline the documentation process and to ensure that the decision letters included the necessary, relevant information required by DoD and Military Service policies.\(^{35}\) One decision authority said that they were aware of media reports concerning possible “rubber stamp” denials and held discussions with their support team about potentially revising the wording in the denial decision letters. The decision authority said that they ultimately decided to keep the wording to provide a “uniform response” for denial decision letters because a change in wording could possibly create the perception of a change in standard, review, or decision criteria.

While some Service members may have been dissatisfied with the amount of individualized information in their decision letters, appeal decision authorities provided a more detailed response in their appeal decision letters. DoD and

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\(^{35}\) Decision authorities issue a decision letter to each Service member who submits a religious accommodation request. The decision letter is the official notification of the approval or denial of the Service member’s request.
Military Service policies provide the opportunity for all Service members to appeal religious accommodation request decisions. Service members appealed 53 of the 137 requests we reviewed. During our audit, appeal authorities issued decisions on 36 of the 53 appeals, approving 5 and denying 31 requests. For the 31 requests denied by the appeal authority, the appeal letter contained additional individualized information. For example, the Marine Corps and Navy decision authorities issued decision letters that identified the Service member by name and rank and referenced the date of their request letter. The Marine Corps and Navy appeal authorities’ decision letters also addressed the Service member’s particular job duties and their specific objections to the COVID-19 vaccination. Similarly, Air Force decision authorities typically referenced Service members by name and rank in their decision letters and included other individualized information such as a specific description of the Service member’s job duties. The Air Force appeal authority’s decision letters referenced the Service member by name and rank and sometimes included information specific to the Service member’s job duties or job environment. The Army decision authority’s decision letters identified the Service member by name, rank, unit, location, and included detailed information about the Service member’s job duties. The Army appeal authority did not issue any appeal decisions for requests in our sample. We also found all of the decision authorities personally signed each of the decision letters, providing additional evidence of individual review. For requests in our sample, the Army and Marine Corps decision authorities signed decision letters with a wet signature, while the Navy and Air Force decision authorities used both a wet signature and their electronic time-stamped signature.

Decision authorities said that they considered the chaplain, medical, legal, and chain of command recommendations included in the religious accommodation request packages as well as total force health, safety, and readiness factors. The recommendations provided the decision authorities with the facts and circumstances unique to each Service member. Decision authorities said that they consulted with available chaplain, medical, and legal advisors, and contacted the Service member’s chain of command for additional information, if needed, when reviewing religious accommodation requests. One decision authority said that their goal was to “have the scales balanced” with all of the recommendations and that “no one voice was louder than the rest.” Another decision authority said

36 The 31 denied appeal requests included the Marine Corps (6), the Navy (8), and the Air Force (17); the Army did not issue any appeal decisions for requests in our sample.
37 Decision authorities for Air Force religious accommodation requests are the commanders of the Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies.
38 Personnel in the Office of the Chief of Naval Personnel said the decision authority signed each decision letter with a wet signature early in the process but eventually switched to an electronic signature in order to facilitate processing the large number of requests.
that they considered all of the recommendations in the religious accommodation request packages but that ultimately it was their responsibility to decide whether to approve or deny the request. Additionally, decision authorities considered requests that they were not obligated to consider. For example, we found that Army chaplains determined that four Service members did not have sincerely held religious beliefs to support a religious accommodation, as required by DoD policy. In each case, the Army decision authority stated that they considered the Service member’s request regardless of the chaplain’s assessment.39

Of the requests we reviewed, we found that chaplain and medical recommendations focused solely on their subject matter expertise. For example, chaplains generally based their recommendations on the sincerity of the Service member’s belief and did not address other factors such as the Service member’s ability to perform their job duties if they remained unvaccinated. Likewise, we found that medical personnel based their recommendations on health and safety issues and did not address the Service member’s religious concerns. The chain of command and legal recommendations were more comprehensive and addressed religious factors, medical factors, and the Service member’s ability to perform their job while unvaccinated. Chain of command and legal advisors usually provided comprehensive summaries of each request with their recommendations for the Army and Navy decision authorities. The Marine Corps Religious Accommodation Review Board and the Air Force Religious Resolution Teams provided recommendations to their respective decision authorities based on their comprehensive reviews and discussions of Service members’ requests and subject matter expert recommendations.

The number of recommendations a decision authority received with each religious accommodation request varied across the Military Services. The Army decision authority usually received seven to eight recommendations, the Marine Corps and Navy decision authorities usually received four to five recommendations each, and the Air Force decision authorities received between four to eight recommendations.40 Neither DoD policies nor Military Service guidance requires decision authorities to follow any particular subject matter expert recommendation. However, we found decision authorities across the Military Services usually approved or denied requests consistent with the majority of recommendations provided to them. Marine Corps and Air Force decision authorities usually approved or denied

39 The decision authority did not ultimately approve any of the four requests. None of the four Service members appealed their denials; two continue to serve active duty, one retired, and one separated from military service due to a disability.

40 The number of Army and Air Force recommendations varied with the number of chain of command recommendations submitted with each request. The number of Air Force recommendations also varied because the Air Force decision authorities sometimes received Religious Resolution Team and legal recommendations at the Wing-level in addition to Religious Resolution Team and legal recommendations at the Major Command, Field Command, Direct Reporting Unit, or Field Operating Agency level.
requests consistent with the recommendations from the Religious Accommodation Review Board and the Religious Resolution Team, respectively. We also found that the decision authorities occasionally issued decisions contrary to the majority of the subject matter expert recommendations. For example, one Air Force decision authority approved the religious accommodation request, despite receiving several denial recommendations, because of the Service member’s close proximity to retirement. In contrast, another Air Force decision authority denied a religious accommodation request even though the majority of subject matter experts recommended approval. In this particular case, the chain of command indicated that the Service member could use less restrictive means of accommodation, such as mask wearing and social distancing. However, the Religious Resolution Team found that mask wearing and social distancing were not feasible due to the Service member’s job requirements, which included regularly using a headset microphone for communication and working in confined spaces with others.

Decision authorities’ decision letters stated that the decision authorities issued their decisions based on determinations of whether or not the vaccination was the least restrictive means of furthering a compelling governmental interest, in accordance with Federal law and DoD guidance. Section 2000bb-1, title 42, United States Code (Religious Freedom Restoration Act), provides that the Government may not substantially burden a person’s exercise of religion, unless the burden to the person is in furtherance of a compelling government interest and is the least restrictive means of furthering that compelling interest. DoD Instruction 1300.17, which incorporates the Religious Freedom Restoration Act, includes that requirement and states that DoD Components will normally accommodate practices of a Service member based on sincerely held religious beliefs. The Instruction cautions the Secretaries of the Departments to ensure, to the greatest extent practical, the consistent application of the policies and procedures and advises them to “develop and implement a standards-based approach to the review of, and final action on, requests for the accommodation of religious practices to promote predictable outcomes for the same or similar requests.” In each of the 116 decision letters, decision authorities stated they based their decisions on whether or not the COVID-19 vaccination was the least restrictive means of furthering a compelling governmental interest.

Table 12 shows the religious accommodation requests we reviewed that the decision authorities approved and denied, as of June 2022. Table 13 shows the total number of religious accommodation requests that Service members submitted, as of January 2023.

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41 DoD Instruction 1300.17 states that DoD Components have a compelling governmental interest at the individual, unit, and organizational levels, including such necessary elements of mission accomplishment as military readiness, unit cohesion, good order and discipline, and health and safety.
Table 12. Number of Religious Accommodation Requests Approved or Denied by Decision Authorities

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Religious Accommodation Requests Approved by Decision Authority (as of June 2022)</th>
<th>Religious Accommodation Requests Denied by Decision Authority (as of June 2022)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>0</td>
<td>34</td>
</tr>
<tr>
<td>Navy</td>
<td>2</td>
<td>33</td>
</tr>
<tr>
<td>Air Force*</td>
<td>7</td>
<td>28</td>
</tr>
<tr>
<td>Total</td>
<td>11</td>
<td>105</td>
</tr>
</tbody>
</table>

* Air Force numbers include requests from Space Force Service members.

Note: Of the 137 religious accommodation requests we reviewed, decision authorities approved 11 requests and denied 105 requests. Of the remaining 21 requests, 13 were in process as of September 2022, 7 were canceled when the Service member separated from Service, and 1 was canceled when the Service member was vaccinated. The Military Services ceased processing religious accommodation requests when the January 10, 2023 memorandum from the Secretary of Defense rescinded the vaccination mandate.

Source: The DoD OIG.

Table 13. Number of Religious Accommodation Requests Submitted as of January 2023

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Requests Approved by Decision Authority</th>
<th>Requests Denied by Decision Authority</th>
<th>Requests In Process</th>
<th>Total Requests by Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>97</td>
<td>1,819</td>
<td>2,512</td>
<td>4,428</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>23</td>
<td>3,686</td>
<td>0</td>
<td>3,709</td>
</tr>
<tr>
<td>Navy</td>
<td>50</td>
<td>3,256</td>
<td>30</td>
<td>3,336</td>
</tr>
<tr>
<td>Air Force*</td>
<td>169</td>
<td>4,626</td>
<td>17</td>
<td>4,812</td>
</tr>
<tr>
<td>Total</td>
<td>339</td>
<td>13,387</td>
<td>2,559</td>
<td>16,285</td>
</tr>
</tbody>
</table>

*Air Force numbers include requests from Space Force Service members.

Source: The DoD OIG.

Approvals of Religious Accommodation Requests

Of the 11 religious accommodation requests approved as of May 2022, 9 were based on the Service member's pending voluntary discharge or retirement. The Army decision authority approved two requests because, in each case, the Service member’s chain of command identified the least restrictive means, other than the COVID-19 vaccination, for furthering the Government's compelling interest. In one instance, the chain of command explained that the Service member's duties were administrative in nature and that the office was able to support social distancing and telework options. In the second instance, the chain of command explained that the Service member was stationed in a country with low rates of COVID-19
infection and that they could perform their duties with a combination of social distancing and preventative measures, including weekly testing. In both cases, the Army decision authority stated that the approval was based on the Service member’s current work circumstances and advised, “... any material change to your circumstances may result in reconsideration of your approved accommodation.”

The Marine Corps decision authority did not approve any of the religious accommodation requests we reviewed, but the Marine Corps appeal authority subsequently approved two of the requests through the appeal process. During our interview with the Marine Corps decision authority in April 2022, the decision authority acknowledged that the Marine Corps appeal authority subsequently overturned a total of seven of the decision authority’s denial decisions. The Marine Corps decision authority said that at the time they made their denial decisions, Marine Administrative Message (MARADMIN) 462/21 did not allow for consideration of proximity to voluntary discharge or retirement as a basis for exemption from the COVID-19 vaccination. MARADMIN 462/21 specifically stated that proximity to voluntary discharge or retirement is not a valid exemption for COVID-19 vaccination for Marine Corps Service members. The Marine Corps appeal authority approved the seven religious accommodation requests because the Service members had pending voluntary discharges or retirements despite MARADMIN 462/21 being in effect at the time of the decision.

**Denials of Religious Accommodation Requests**

Decision authorities denied 105 of the 116 religious accommodation requests we reviewed. All 105 of the denial letters cited the COVID-19 vaccination as the least restrictive means of furthering a compelling governmental interest for military readiness and health and safety of the force. See Table 14 for excerpts from some of those denial letters.

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42 The Marine Corps appeal authority approved a total of seven requests; two of the seven requests were in our sample.


Table 14. Examples of References to Compelling Governmental Interest and Least Restrictive Means in Denial Letters

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Excerpts from Religious Accommodation Request Denial Letters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>“I find that vaccination is the least restrictive means to further the Department of the Army’s compelling government interests, which also includes protecting your health, the health of the force, and ensuring mission accomplishment.”</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>“I find that there is no less restrictive way of accommodating your request that ensures military readiness and the preservation of the health of the force.”</td>
</tr>
<tr>
<td>Navy</td>
<td>“I find that disapproval of your request for a waiver of immunization requirements is the least restrictive means available to preserve the Department of Defense’s compelling interest in military readiness, mission accomplishment, and the health and safety of [M]ilitary Service members.”</td>
</tr>
<tr>
<td>Air Force</td>
<td>“... the Air Force has a compelling interest in ensuring the health and continued mission accomplishment of your unit and those you serve .....” As a result, I have concluded that less restrictive means short of vaccination (to include social distancing, telework, and strict compliance to mask wear) are not sufficient.”</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

The decision authorities we interviewed said that their biggest challenge to approving religious accommodation requests was determining a least restrictive means other than the COVID-19 vaccination that would ensure mission readiness and health and safety of the total force. They stated that unvaccinated Service members reduced mission readiness and, as a result, had significant impact on the Total Force. For example, one of the expert recommendations to the Chief of Naval Personnel discussed that immunity from vaccination was not immediate because Service members did not achieve immunity from the COVID-19 virus until 5 weeks after they received the first vaccination dose.45

The decision authorities added that many Service members with domestic assignments must be ready to deploy on short notice, and foreign countries may not allow unvaccinated Service members to enter their countries. If an unvaccinated Service member was unable to perform their job or deploy, the Military Service must identify and assign another Service member with the relevant skill set and training to replace them. Because of these reasons, the decision authorities stated that unvaccinated Service members may set off a chain of events affecting overall

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45 At the time of the DoD COVID-19 vaccine mandate, the COVID-19 Pfizer-BioNTech vaccination was the only vaccination with full licensure from the FDA. The vaccine is a two-dose regimen administered 3 weeks apart, with immunity achieved 2 weeks after the second dose.
mission readiness. One decision authority said that when considering compelling governmental interest and least restrictive means, their primary consideration was the impact on mission. The decision authority referenced the Afghanistan evacuation in August 2021 and the need for their organization to be ready to mobilize “at a moment’s notice.”

The decision authorities also cited specific concerns in their areas of responsibility or unique environments when considering requests. Staff in the Office of the Chief of Naval Personnel said that the decision authority requested from the Director of Military Personnel and Policy a “least restrictive means analysis” to consider when reviewing religious accommodation requests. The resulting 10-page memorandum identified the difficulties of ensuring the health and safety of the Navy force against COVID-19 due to unique circumstances inherent in naval service. For example, the memorandum states that typical alternative measures such as social distancing, masking, and frequent handwashing are ineffective in a shipboard environment because Service members live and work in close proximity to one another.

Additionally, decision authorities with responsibility over Service members in foreign countries discussed the difficulties with accommodating Service members’ religious accommodation requests. For example, one decision authority said that approximately half of their force was stationed in two countries, which had some of the strictest COVID-19 regulations. The decision authority said that both countries required COVID-19 vaccinations and a COVID-19 test to enter the country. The decision authority said that during the height of the pandemic, unvaccinated Service members were unable to travel overseas in the decision authority’s area of responsibility and therefore were unable to perform their duties.

The Army and the Air Force Generally Did Not Process Requests Within DoD Timeliness Requirements

The Marine Corps and Navy generally processed the religious accommodation requests we reviewed within DoD timelines, but the Army and Air Force did not. DoD Instruction 1300.17 provides specific timelines for processing religious accommodation requests based on the need for a waiver of regulation or policy. For requests that do not require a waiver of policy, the Instruction requires final action within 30 days from Service member submission for requests submitted from the United States and 60 days for requests submitted outside of the United States. For requests requiring a waiver of policy, the Instruction requires final action within 90 days from Service member submission for requests submitted
from the United States and 120 days for requests submitted outside of the United States. The Air Force was the only Military Service that did not require a waiver of policy.

The Marine Corps and Navy routinely processed the requests we reviewed within 90 days, but the Army did not. Additionally, the Air Force did not meet the 30-day requirement for any of the Air Force requests we reviewed. Processing times for religious accommodation requests in our sample ranged from 17 to 156 days for the Marine Corps; 29 to 257 days for the Navy; 78 to 346 days for the Air Force; and 124 to 271 days for the Army. See the following Figure for the religious accommodation request processing time requirements and the average processing days for each Military Service.

Figure. Timeline for Processing Religious Accommodation Requests

![Timeline for Processing Religious Accommodation Requests](image)

Source: The DoD OIG.

**Delays in Processing Religious Accommodation Requests**

The delays in processing religious accommodation requests occurred because of the unprecedented number of requests and the number of administrative actions and reviews required by Military Service policies. The Army attributed the adjudication delays to the unprecedented number of religious accommodation requests for the COVID-19 vaccination, the time necessary to increase and train
staffing for processing requests, and the time necessary for the decision authority to review and adjudicate each request in addition to the decision authority's other duties. Army Office of the Surgeon General (OTSG) personnel said that before the COVID-19 vaccination mandate, their office received only three to four religious accommodation requests a year.

Between September 2021 and October 2022, the OTSG received more than 8,600 religious accommodation requests for the COVID-19 vaccination, including 4,300 from active duty Service members. To assist in processing the requests, the OTSG added 4 contract employees to supplement administrative staff, temporarily assigned 3 public health personnel to support medical reviews, and activated 18 Army Reservists to support legal reviews. OTSG personnel said that they did not begin processing requests until October 2021 because they wanted to formalize the process and “get enough staff in place” to process the requests. The Surgeon General of the Army said that their staff was prepared but “still overwhelmed” by the number of requests. According to the Surgeon General of the Army, although the OTSG was not meeting the time requirements for processing the religious accommodation requests, leadership supported the need to take the extra time to give each request its “due diligence and a fair review.”

The Air Force attributed delays to the unprecedented number of requests for religious accommodation for the COVID-19 vaccination, extended time required to process the requests through the Service member’s chain of command, and time required for the decision authorities to adjudicate requests. Personnel in decision authority offices said that they typically received only a few religious accommodation requests a year for accommodations for grooming or clothing, not vaccinations.

Decision authority offices said that they typically received only a few religious accommodation requests a year for accommodations for grooming or clothing, not vaccinations.

As of June 2022, the Air Force received almost 4,000 religious accommodation requests for the COVID-19 vaccination from active duty Service members. Because the Air Force had a policy of decentralized decision authority, Service members submitted religious accommodation requests for the COVID-19 vaccination to 26 different decision authorities across 9 Major Commands, 3 Field Commands, 3 Direct Reporting Units, and 11 Field Operating Agencies. As a result, it was

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46 The Army Surgeon General is the sole decision authority for the Army. Likewise, the Deputy Commandant (Manpower and Reserve Affairs) is the sole decision authority for the Marine Corps, and the Chief of Naval Personnel is the sole decision authority for the Navy. The Army Surgeon General received more than 8,000 total religious accommodation requests from active duty, National Guard, and Reserve Service members. However, the Marine Corps and Navy received fewer total religious accommodation requests than the Army Surgeon General; the Marine Corps received approximately 3,700 total requests, and the Navy received approximately 4,300 total requests.
necessary for 26 separate Air Force organizations to organize and train their staffs for processing requests. Additional delays occurred because the Air Force organizations needed to educate their chains of command on the guidance for religious accommodation requests and the information required in the chaplain, medical, legal, and chain of command recommendation letters. Personnel in decision authorities’ offices said that they routinely returned requests to the chain of command for additional information, which contributed to the delayed final action. Many of the decision authorities said that they wanted to take the time and give each religious accommodation request package appropriate consideration and said that they “sacrificed timeline for quality of package” because they wanted the decisions “to stand up to scrutiny.”

The Army and Air Force did not process religious accommodation requests in a timely manner because of the overwhelming number of requests, the extended time required to process the requests through the chains of command, and the time required for decision authorities to adjudicate requests. Therefore, we recommend that the Under Secretary of Defense for Personnel and Readiness review the religious accommodation request process for vaccinations to identify efficiencies that could be achieved during periods of high-volume requests and issue guidance accordingly to decrease processing times.

**Delayed Religious Accommodation Decisions May Affect Service Member Job Assignments and Deployments**

Delayed decisions for religious accommodation requests could potentially affect a Service member’s deployability and job assignments. Additionally, delayed decisions may hinder the command’s ability to make informed deployment and assignment decisions.
Recommendation, Management Comments, and Our Response

Recommendation A.1
We recommend that the Under Secretary of Defense for Personnel and Readiness review the religious accommodation request process for vaccinations to identify efficiencies that could be achieved during periods of high-volume requests and issue guidance accordingly to decrease processing times.

Acting Under Secretary of Defense for Personnel and Readiness Comments
The Acting Under Secretary of Defense for Personnel and Readiness agreed with the recommendation and stated they will, in the next year, initiate a change to DoD Instruction 1300.17, “Religious Liberty in the Military Services,” to identify a central decision authority during high-volume request periods and issue guidance during those periods to decrease processing times.

Our Response
Comments from the Acting Under Secretary of Defense for Personnel and Readiness addressed the specifics of the recommendation; therefore, the recommendation is resolved but will remain open. We will close the recommendation once we receive documentation to support the change to DoD Instruction 1300.17, “Religious Liberty in the Military Services.”
Finding B

The Military Services Generally Approved Medical Exemptions in Accordance with Guidance but Did Not Always Document or Correctly Record Administrative Exemptions

The Military Services generally approved medical exemptions in accordance with DoD and Military Service guidance, but did not always document or correctly record administrative exemptions. Of the 79 medical exemptions we reviewed, Military Service personnel approved 73 of the exemptions in accordance with DoD and Military Service guidance. We could not determine whether Military Service personnel correctly approved and recorded the remaining six medical exemptions due to a lack of documentation. Military Service personnel properly recorded 15 of the 32 administrative exemptions we reviewed. However, Military Service personnel did not properly record 13 of the 32 exemptions in the immunization tracking system. We could not determine whether Military Service personnel correctly recorded the remaining four administrative exemptions due to a lack of documentation.

While Military Service personnel said that the incorrect exemption entries were clerical errors, command leaders did not sufficiently monitor Service members’ vaccination status in the immunization tracking systems, which allowed incorrect entries to remain undetected. However, we did not identify any impacts to readiness or to the Service member’s deployability status from the incorrect entries. Additionally, we determined that the administrative exemptions were temporary and most were active for 90 days or less, which further reduced any potential impacts.

For the six medical and four administrative exemptions that lacked documentation, we determined that Military Service personnel did not maintain adequate supporting documentation in the Service members’ medical records to support

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47 We found that Military Service personnel did not always document the command leader’s approval, but could readily provide documentation to support valid reasons for administrative exemptions. Because of this, we were unable to determine whether command leaders approved administrative exemptions in accordance with guidance and we limited our review to (1) determining whether Military Service personnel documented valid reasons for administrative exemptions and (2) if they recorded administrative exemptions in the immunization tracking systems in accordance with DoD and Military Service guidance.

48 We originally selected 97 medical exemptions for review. However, we later determined that 18 of those exemptions were not medical exemptions because Military Service personnel incorrectly recorded the 18 exemptions. Likewise, we originally selected 47 administrative exemptions for review but we later determined that 15 of those exemptions were not administrative exemptions because Military Service personnel incorrectly recorded the 15 exemptions. Therefore, we removed the 18 medical exemptions and 15 administrative exemptions from our samples.
the exemptions. Therefore, we could not determine whether the Military Services approved and recorded the medical exemptions correctly and recorded the administrative exemptions correctly. If the Military Services do not maintain supporting documentation for their medical and administrative exemptions, or if they are unable to readily produce supporting documentation, the Military Services will be unable to determine whether the exemptions were processed in accordance with DoD and Military Service guidance. They will also be unable to determine whether the Service member’s vaccination status is accurately recorded in their medical record and in the Military Service immunization tracking system.

The Military Services Generally Approved Permanent and Temporary Medical Exemptions in Accordance with Guidance

Authorized health care providers from the Army, Marine Corps, Navy, and Air Force approved and recorded in the Military Services’ immunization tracking systems 73 of 79 permanent and temporary medical exemptions in accordance with DoD and Military Service guidance. However, we were unable to determine whether the remaining 6 (4 Army and 2 Air Force) of the 79 medical exemptions were approved and recorded in accordance with DoD and Military Service guidance because supporting documentation did not exist in the Service members’ medical records.

Army and Air Force personnel did not document medical exemption information because Army and Air Force policies did not require it. Army guidance states that Army and Air Force personnel did not document medical exemption information because Army and Air Force policies did not require it. Army guidance states that

Army and Air Force personnel did not document medical exemption information because Army and Air Force policies did not require it.

Army personnel will “document appropriately” temporary medical exemptions in the medical records, but the guidance does not specify the type of information required. Air Force guidance requires health care providers to document temporary medical exemption codes in the Aeromedical Services Information Management System, but the guidance does not specifically require providers to include other supporting documents in the medical record.


Because of the lack of information in the medical files, Army and Air Force personnel were unable to explain why health care personnel recorded medical exemptions for the six Service members. As a result, the Army and Air Force could not verify whether the six medical exemptions were processed in accordance with DoD and Military Service guidance.

The Military Services Did Not Always Record Administrative Exemptions in Accordance with Guidance

Army, Marine Corps, Navy, and Air Force personnel recorded 15 of 32 administrative exemptions in accordance with DoD and Military Service guidance. However, the Army, Marine Corps, and Navy did not properly record 13 of 32 administrative exemptions in the Military Services’ immunization tracking systems.

Joint Regulation, “Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases” (Joint Regulation) allows for administrative exemptions from vaccinations for various reasons including proximity to discharge or retirement from military service. Each of the Military Services assigns approval authority for administrative exemptions to command leaders, but none of the Military Services requires personnel to document the command leader approval in the medical records. Accordingly, we found that Military Service personnel did not always document the command leader’s approval, but could readily provide documentation to support valid reasons for administrative exemptions. Therefore, we were unable to determine whether command leaders approved administrative exemptions in accordance with guidance. As a result, we limited our review to determining whether Military Service personnel documented valid reasons for administrative exemptions and whether they recorded administrative exemptions in the Military Services’ immunization tracking systems in accordance with DoD and Military Service guidance.

The Joint Regulation provides a list of administrative exemption codes for the various types of administrative exemptions. Military Service personnel are required to enter these codes into the Military Services’ immunization tracking systems.

51 We considered reasons detailed in the Joint Regulations list of standard administrative exemption codes to be valid reasons. See Table 5 for a list of administrative exemption codes and explanations.
systems to record administrative exemptions. Separately, the Army and Navy each issued guidance to record administrative exemptions related to the COVID-19 vaccination.

Military Service personnel incorrectly recorded in the Military Services’ immunization tracking systems 13 exemptions with the incorrect administrative code. Army, Marine Corps, and Navy personnel did not always follow Military Service guidance for recording the administrative exemptions. For example, Marine Corps and Navy personnel recorded nine religious accommodation requests as “Administrative Temporary” rather than “Religious Accommodation Requested” as required by Navy guidance. Similarly, Army personnel recorded one administrative exemption as “Administrative Separation” when they should have recorded the exemption as “Administrative Refusal.”

Marine Corps and Navy personnel said that the incorrect exemption entries were clerical errors. Additionally, command leaders did not sufficiently monitor Service members’ vaccination status in the Military Services’ immunization tracking systems, which allowed incorrect entries to remain undetected. The Joint Regulation requires command leaders to monitor the vaccination status of personnel and to ensure that Military Service personnel document vaccination and exemption information in the Military Services’ immunization tracking systems. Because the inaccurate entries were for Service members with other types of administrative exemptions, we did not identify any impacts to readiness or to the Service members’ deployability status from the entries. Additionally, we determined that the administrative exemptions were temporary, and most were active for 90 days or less, which further reduced any potential impacts.

Finally, we were unable to determine whether the Army processed four administrative exemptions in accordance with DoD and Military Service guidance because Army personnel did not provide sufficient documentation. None of the Military Services required personnel to maintain supporting documentation for administrative exemptions. If the Military Services do not require personnel to maintain supporting documentation for administrative exemptions, or if Military

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52 The Service members had valid administrative exemptions; however, Military Service personnel recorded the incorrect administrative exemption codes in the immunization tracking system.
Service personnel are unable to readily produce supporting documentation, the Military Services will be unable to determine whether the exemptions were processed in accordance with DoD and Military Service guidance.

Documenting health care provider or command leader approval for exemptions reduces the risk for incorrect entries and ensures that Service members’ vaccination status is accurate so that command leaders can make informed decisions to protect the health and safety of the force. The Director, Defense Health Agency, serves as the manager for the DoD Immunization Program and is responsible for developing and implementing immunization guidance. The Secretaries of the Military Departments are responsible for developing and implementing immunization procedures and processes for personnel under their jurisdiction.\textsuperscript{53} Therefore, we recommend that the Director, Defense Health Agency, in coordination with the Secretaries of the Military Departments, develop and implement a requirement for personnel to maintain supporting documentation for medical exemptions in Service members’ medical records and administrative exemptions in Service members’ personnel records.

**Recommendation, Management Comments, and Our Response**

**Revised Recommendation**

As a result of management comments, we revised Recommendation B.1 to identify the most appropriate location to maintain administrative exemption documentation.

**Recommendation B.1**

We recommend that the Director, Defense Health Agency, in coordination with the Secretaries of the Military Departments, develop and implement a requirement for personnel to maintain supporting documentation for medical exemptions in Service members’ medical records and administrative exemptions in Service members’ personnel records.

**Acting Under Secretary of Defense for Personnel and Readiness Comments**

The Acting Under Secretary of Defense for Personnel and Readiness, responding for the Director, Defense Health Agency, agreed with the recommendation, but commented that administrative exemption documentation would be most

\textsuperscript{53} DoD Instruction 6205.02, “DoD Immunization Program,” July 23, 2019.
appropriately maintained in Service members’ personnel records contained within the individual medical readiness systems or other personnel systems rather than in the medical records as originally recommended.

**Our Response**

Comments from the Acting Under Secretary of Defense for Personnel and Readiness partially addressed the recommendation; therefore, the recommendation is unresolved. We agree with comments from the Acting Under Secretary that administrative exemption documentation is most appropriately maintained in Service members’ personnel records, and we amended the recommendation accordingly. The Acting Under Secretary did not provide planned actions as a result of the recommendation. We request that the Acting Under Secretary of Defense for Personnel and Readiness comment on the revised recommendation within 30 days of the final report and describe the specific actions they plan to take to develop and implement requirements for Military Service personnel to maintain supporting documentation for medical and administrative exemptions.
Finding C

The Military Services Discharged Service Members for Refusing the COVID-19 Vaccination in Accordance with Guidance but Did Not Use the Same Discharge Type or Reentry Code

The Military Services discharged Service members for misconduct who refused the COVID-19 vaccination in accordance with Federal and DoD guidance. However, the discharged Service members did not receive the same discharge type or reentry code. The Army, Marine Corps, and Air Force issued either honorable or general discharges, and the Navy issued honorable discharges for Service members who refused the COVID-19 vaccination.

In addition, the Military Services assigned different reentry codes on the DD Form 214 (Certificate of Release or Discharge from Active Duty) when discharging the Service members. This occurred because the DoD did not have department-level guidance requiring uniformity on the discharge type and reentry code for the Service members discharged for misconduct due to vaccination refusal. As a result, discharged Service members experienced different impacts to their educational benefits and the eligibility to reenlist in military service after discharge.

The Military Services Issued Honorable or General Discharges to Service Members for COVID-19 Vaccination Refusal

The Military Services discharged Service members for misconduct who refused the COVID-19 vaccination in accordance with Federal and DoD guidance. DoD Instructions state that officers and enlisted Service members receive one of three types of administrative discharge characterizations: (1) honorable, (2) general (under honorable conditions), or (3) under other than honorable conditions. However, the FY 2022 National Defense Authorization Act limited discharges solely for COVID-19 vaccination refusal to honorable or general.

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54 A reentry code defines a Service member’s future eligibility to enlist or reenlist after discharge from the military.

55 We did not review discharge packages for Service members who served less than 180 days and, accordingly, received uncharacterized discharges. For purposes of this report, a general (under honorable conditions) discharge is referred to as a general discharge.

Each of the Military Services directed Service members to receive the COVID-19 vaccination, and the Military Services issued guidance for discharging Service members for misconduct who refused the COVID-19 vaccination. The Military Services issued discharges in accordance with its relevant Service guidance, but all considered misconduct, failure to obey a lawful order, as the reason for discharge.

As of February 2023, the Military Services issued 3,397 honorable discharges and 4,308 general discharges for Service members who refused the COVID-19 vaccination. Table 15 shows the number of honorable and general discharges by Military Service.

**Table 15. Service Member Discharge Types as of February 2023**

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Honorable Discharges</th>
<th>General Discharges</th>
<th>Total Service Discharges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>281 (15%)</td>
<td>1,622 (85%)</td>
<td>1,903</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>1,516 (41%)</td>
<td>2,214 (59%)</td>
<td>3,730</td>
</tr>
<tr>
<td>Navy</td>
<td>1,566 (100%)</td>
<td>0 (0%)</td>
<td>1,566</td>
</tr>
<tr>
<td>Air Force</td>
<td>34 (7%)</td>
<td>472 (93%)</td>
<td>506</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,397 (44%)</strong></td>
<td><strong>4,308 (56%)</strong></td>
<td><strong>7,705</strong></td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

DoD Guidance Did Not Specify the Discharge Type for COVID-19 Vaccination Refusal

The DoD did not have uniform department-level guidance to require that the Military Services use the same discharge type for Service members discharged for misconduct for COVID-19 vaccination refusal. Guidance from each Military Service allowed command leaders the discretion to characterize the discharge as honorable or general. However, in December 2021 the Navy issued Navy Administrative Message (NAVADMIN) 283/21 to incentivize unvaccinated Service members who refused the COVID-19 vaccination to leave military service.

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The DoD provides overarching guidance for discharges, but the Military Services initiate and manage the discharge process.\(^{58}\) DoD policy states that when discharging a Service member on the basis of misconduct, the discharge type will normally be “under other than honorable conditions” but allows for general (under honorable conditions) or honorable discharges if warranted. However, the FY 2022 National Defense Authorization Act limited discharges solely for COVID-19 vaccination refusal to honorable or general. The DoD policy provides that various factors may be considered when determining the type of discharge, including quality of service, length of service, age of Service member, reason for separation, and physical and mental condition.

Each of the Military Services has policies and procedures for discharging Service members. Generally, the command initiates the discharge process with the commander recommending the discharge type. The commander forwards their recommendation to the separation authority who has the final determination on the discharge type. The separation authority is typically the command leader or General Court Martial Convening Authority; they are not obligated to follow the commander’s recommendation.

Each of the Military Services processed COVID-19 vaccination refusal discharges in accordance with its Service guidance. The Army, Marine Corps, and Air Force guidance allowed command leaders the discretion to characterize the discharge as honorable or general. However, the Navy issued new guidance during the COVID-19 pandemic, NAVADMIN 283/21, which incentivized unvaccinated Service members to leave military service. NAVADMIN 283/21 allows for expedited discharges for Service members who were eligible to separate or retire on or before June 1, 2022. For the remaining Service members, NAVADMIN 283/21 defines two classes of Service members: Service members with less than 6 years of service and Service members with more than 6 years of service.\(^{59}\) Service members with more than 6 years of service are entitled to an Administrative Separation Board or a Board of Inquiry, while Service members with less than 6 years are not.\(^{60}\) NAVADMIN 283/21 instructs that Service members with less than 6 years of service who refuse the COVID-19 vaccination will be issued honorable discharges. NAVADMIN 283/21 instructs that Service members with more than 6 years of service will be issued general discharges, but if the Service members waive the Administrative Separation Board or Board of Inquiry, they will generally be issued honorable discharges.\(^{61}\)


\(^{60}\) An Administrative Separation Board reviews discharges of enlisted personnel, and a Board of Inquiry reviews discharges of commissioned officers.

\(^{61}\) NAVADMIN 283/21 directs that honorable discharges will generally be favorably endorsed barring additional misconduct or unique circumstances.
According to the Office of the Chief of Navy Personnel, the Navy prioritized ensuring a fully vaccinated force for the health and safety of Navy personnel. The Navy determined that the most equitable way to accomplish this was to offer honorable discharges to Service members who refused the COVID-19 vaccination to incentivize them to leave military service. Most of Navy Service members discharged for COVID-19 vaccination refusal received honorable discharges either because they had fewer than 6 years of service or because they chose to waive their Administrative Separation Board or Board of Inquiry. A few Navy Service members did not waive their Administrative Separation Board or Board of Inquiry but subsequently received honorable discharges.

Because the DoD did not have department-level guidance for uniformly characterizing discharges for Service members discharged for COVID-19 vaccination refusal, each Military Service discharged Service members in accordance with its own Service guidance, which allowed for discretion when determining discharge type. As a result, Service members discharged for COVID-19 vaccination refusal received either honorable or general discharges. Therefore, we recommend that the Under Secretary of Defense for Personnel and Readiness develop and issue guidance to require uniform discharge types for Service members discharged for misconduct solely for vaccination refusal.

The Military Services Used Different Reentry Codes for Enlisted Service Members Discharged for COVID-19 Vaccination Refusal

The Military Services assigned reentry codes to Service members discharged for COVID-19 vaccination refusal, in accordance with Military Service guidance but the codes were not uniform across the Military Services. A reentry code indicates an enlisted Service member's future eligibility to reenlist in military service and is included on the Service member's military discharge document, the DD Form 214.62 Reentry codes apply only to enlisted Service members; commissioned officers do not receive reentry codes on their DD Form 214.

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62 DD Form 214, “Certificate of Release or Discharge from Active Duty.”
The Army and Marine Corps issued specific guidance on reentry codes for Service members discharged solely for COVID-19 vaccination refusal, while the Navy and Air Force followed their existing policies. The Navy policy assigns reentry codes according to the discharge reason, and the Air Force policy assigns reentry codes according to the type of discharge given.\(^{63}\)

We reviewed reentry codes for 104 enlisted Service members across the Military Services who were discharged for COVID-19 vaccination refusal and determined that all 104 reentry codes were consistent with their respective Military Service guidance. Table 16 shows the different types of reentry codes that the Military Services assigned to enlisted Service members discharged for COVID-19 vaccination refusal.

**Table 16. Types of Reentry Codes Issued for Service Members Discharged for COVID-19 Vaccination Refusal**

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Reentry Codes</th>
<th>Reentry Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>RE-3</td>
<td>Requires a waiver for reenlistment.(^1)</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>RE-3P and RE-4</td>
<td>RE-3P: Failure to meet physical/medical standards. RE-4: Not recommended for reenlistment.(^2)</td>
</tr>
<tr>
<td>Navy</td>
<td>RE-4</td>
<td>Ineligible for reenlistment.(^3)</td>
</tr>
<tr>
<td>Air Force</td>
<td>2B and 2C</td>
<td>2B/2C: Conditions barring immediate reenlistment. (2B used for general and 2C used for honorable discharges).(^4)</td>
</tr>
</tbody>
</table>


Source: The DoD OIG.

The reentry codes for Service members discharged for COVID-19 vaccination refusal varied by Military Service. The Army, Marine Corps, and Air Force issued reentry codes that required a waiver from a recruiter for reenlistment. In contrast, the Navy issued reentry codes that identified the Service member as ineligible for reenlistment. However, Service members from any Military Service may petition their Military Service review board for a change to their reentry code.

Each Military Service assigned different reentry codes for Service members who refused the COVID-19 vaccination because the DoD did not have uniform department-level guidance for reentry codes and Military Services followed their own guidance. Therefore, we recommend that the Under Secretary of Defense for Personnel and Readiness develop and issue guidance to assign uniform reentry codes for enlisted Service members discharged for misconduct solely for vaccination refusal.

Service members who received honorable discharges are eligible for full Veteran Affairs benefits. However, Service members who received general discharges are not eligible for educational benefits like the Montgomery GI Bill program or the Post-9/11 GI Bill program. Additionally, enlisted Service members discharged for refusing the COVID-19 vaccination may or may not be eligible to reenlist in military service depending on the type of reentry code they received. If the DoD does not issue uniform guidance for Service member discharges and reentry codes for vaccination refusal, then Service members discharged for vaccination refusal will experience different impacts to their educational benefits and eligibility to reenlist in military service.

Impact from Rescission of COVID-19 Vaccination Mandate and Subsequent Changes to Military Service Guidance

On January 10, 2023, the Secretary of Defense issued a memorandum rescinding the COVID-19 vaccination mandate, and each of the Military Services subsequently rescinded Service guidance related to the mandate. The memorandum directs...
that former Service members may petition their Military Department's Discharge Review Boards and Boards for Correction of Military or Naval Records and request a correction to their personnel records, including the type of their discharge and reentry code. Additionally, the FY 2024 National Defense Authorization Act requires that Military Service boards of review grant requests to reconsider the characterization of discharge for Service members discharged solely for COVID-19 vaccination refusal. The Act also requires that the Secretaries of the Military Departments consider reinstating Service members discharged solely for COVID-19 vaccination refusal but limits the requirement to those Service members who submitted a request for a religious, medical, or administrative exemption before discharge.

Recommendations, Management Comments, and Our Response

Recommendation C.1
We recommend that the Under Secretary of Defense for Personnel and Readiness:

a. Develop and issue guidance to require uniform discharge types for all Service members discharged for misconduct solely for vaccination refusal.

b. Develop and issue guidance to assign uniform reentry codes for all Service members discharged for misconduct solely for vaccination refusal.

Acting Under Secretary of Defense for Personnel and Readiness Comments

The Acting Under Secretary of Defense for Personnel and Readiness disagreed with the recommendation without significant refinement to it. The Acting Under Secretary stated they would refer the recommendation to the standing Separation Standardization Working Group, as codified in DoD Instruction 1332.14, “Enlisted Administrative Separations,” for review and recommendations on how to meet the root issues the recommendation attempts to address. The Acting Under Secretary stated that, while their office agrees that the Secretary of Defense should provide overarching guidance for emergent, enterprise-wide impacts such as the COVID-19 pandemic, the [Office of the Secretary of Defense] is not best positioned to direct Military Service level, granular personnel actions such as specific reentry

criteria that underpin the use of reentry codes. The Acting Under Secretary also stated that guidance issued regarding the COVID-19 pandemic and associated policy requirement for COVID-19 vaccination was in accordance with standing departmental immunization policy, including Military Service-level discretion for separation characterization and reentry considerations. Additionally, the Acting Under Secretary said that the [Office of the Secretary of Defense] disagrees that “all” Service members were similarly situated because they were in fact in different Military Services with different occupations and different expectations regarding readiness for those occupations, deployability, and the availability of remote work.

**Our Response**

Comments from the Under Secretary of Defense for Personnel and Readiness addressed the specifics of the recommendation; therefore, the recommendation is resolved. We will close the recommendation once we receive documentation verifying that the Separation Standardization Working Group completed its review, issued its recommendations, and implemented its recommendations. We agree with comments from the Acting Under Secretary of Defense for Personnel and Readiness that the Separation Standardization Working Group is an appropriate entity to consider the discharge issues described in this report and to determine whether DoD policy changes are warranted.

We also revised wording in the Finding to refer to “discharged” Service members instead of “similarly situated” Service members. We confirmed that the Separation Standardization Working Group is codified in DoD Instruction 1336.01, “Certificate of Uniformed Service (DD Form 214/5 Series),” and not in DoD Instruction 1332.14, “Enlisted Administrative Separations,” as referenced in the Acting Under Secretary's comments. According to personnel from the Office of the Under Secretary of Defense for Personnel and Readiness, the Separation Standardization Working Group includes functional and technical representatives from across the DoD, meets quarterly, and regularly reviews DoD policies and procedures for standardization across the Military Services.
Appendix

Scope and Methodology

We conducted this performance audit from February 2022 through December 2023 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Audit Universe and Sample Selection

To determine whether the Military Services processed COVID-19 vaccination exemption requests, appeals, and discharges in accordance with Federal and DoD guidance, we randomly selected a nonstatistical sample from universes of exemptions and discharges between March and June 2022 across each Military Service. The following are the categories we sampled:

- permanent medical exemptions,
- temporary medical exemptions,
- administrative exemptions – other than for religious accommodation,
- administrative exemptions for religious accommodation, and
- Service members discharged solely for refusing the COVID-19 vaccination.

We obtained lists of active duty Service members with approved permanent medical exemptions, temporary medical exemptions, and administrative exemptions (other than religious accommodation). The Army provided a list of temporary medical exemptions, and administrative exemptions (other than for religious accommodation) from the Medical Protection System as of April 22, 2022. We obtained a list of permanent medical exemptions by directly accessing CarePoint on April 18, 2022. We obtained lists of Marine Corps and Navy medical (permanent/temporary), and administrative exemptions by directly accessing the Medical Readiness Reporting System on March 2, 2022. The Air Force provided a list of medical (permanent/temporary) and administrative exemptions from the Aeromedical Services Information Management System as of March 11, 2022.

67 We selected a nonstatistical sampling method primarily due to audit resource constraints; results from a nonstatistical sample cannot be projected to the universe.
68 The Army provided discharge data for Service members refusing the COVID-19 vaccination as of April 26, 2022, the Marine Corps as of May 10, 2022, the Navy as of May 5, 2022, and the Air Force as of June 17, 2022.
We obtained lists of active duty Service members who requested religious accommodation for the COVID-19 vaccination directly from each Military Service. The Army maintained a list of religious accommodation requests on its CarePoint website; we obtained this list directly from CarePoint as of April 18, 2022. The Marine Corps and Navy maintained their own lists of religious accommodation requests; we obtained the Marine Corps list as of May 4, 2022, and the Navy list as of May 13, 2022. For the Air Force, the Major Commands, Field Commands, Direct Reporting Units, and Field Operating Agencies maintained their own lists of religious accommodation requests; we obtained lists from those organizations on various dates from May 4 through June 2, 2022.

Each Military Service maintained its own list of Service members discharged solely for refusing the COVID-19 vaccination. We obtained the discharge lists from each of the Military Services—Army (as of April 26, 2022); Marine Corps (as of May 10, 2022); Navy (as of April 25, 2022 and May 5, 2022); and Air Force (as of April 20, 2022 and June 17, 2022). Table 17 shows the active duty Service members by COVID-19 exemption requests and discharges related to COVID-19 vaccination refusal by Military Service.

### Table 17. Active Duty Service Members’ Exemption Requests and Discharges by Military Service

<table>
<thead>
<tr>
<th>Exemption Requests or Discharge</th>
<th>Universe Size</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Army</td>
</tr>
<tr>
<td>Permanent medical²</td>
<td>709</td>
</tr>
<tr>
<td>Temporary medical</td>
<td>568</td>
</tr>
<tr>
<td>Administrative-Other Than Religious Accommodation</td>
<td>1,719</td>
</tr>
<tr>
<td>Approved For Discharge or Discharged Service members</td>
<td>426</td>
</tr>
<tr>
<td>Total</td>
<td>7,747</td>
</tr>
</tbody>
</table>

¹ Air Force amounts include requests from Space Force Service members.
² The Army tracked all requested permanent medical exemptions, while the Marine Corps, Navy, and Air Force tracked only approved exemptions.
³ Air Force officials explained that the permanent medical exemption applies to all vaccines and that it is often applied to a Service member’s record just before separation from military service. Additionally, we determined that all five Service members subsequently separated from military service.

Source: The DoD OIG.
We selected nonstatistical samples from the lists of exemptions provided by the Military Services. We tested all samples to determine whether the Military Services processed exemption requests or discharges in accordance with Federal and DoD guidance by reviewing Military Service documentation and interviewing Military Service personnel. Table 18 shows the number of sampled items by COVID-19 exemption requests and discharges related to COVID-19 vaccination refusal by Military Service.

Table 18. Sample Sizes of Active Duty Service Members’ Exemption Requests and Discharges by Military Service

<table>
<thead>
<tr>
<th>Exemption Requests or Discharge</th>
<th>Sample Size¹</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force²</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent medical</td>
<td></td>
<td>18</td>
<td>6</td>
<td>6</td>
<td>5¹</td>
<td>35</td>
</tr>
<tr>
<td>Temporary medical</td>
<td></td>
<td>16</td>
<td>15</td>
<td>15</td>
<td>16</td>
<td>62</td>
</tr>
<tr>
<td>Administrative – Other than Religious Accommodation</td>
<td>15</td>
<td>11</td>
<td>13</td>
<td>8</td>
<td>47</td>
<td></td>
</tr>
<tr>
<td>Administrative – Religious Accommodation</td>
<td>33</td>
<td>34</td>
<td>35</td>
<td>35</td>
<td>137</td>
<td></td>
</tr>
<tr>
<td>Approved For Discharge or Discharged Service members</td>
<td>25</td>
<td>29</td>
<td>26</td>
<td>24</td>
<td>104</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>107</td>
<td>95</td>
<td>95</td>
<td>88</td>
<td>385</td>
</tr>
</tbody>
</table>

¹ We originally selected 97 medical exemptions for review. However, we later determined that 18 of those exemptions were not medical exemptions because Military Service personnel incorrectly recorded the 18 exemptions. Likewise, we originally selected 47 administrative exemptions for review, but we later determined that 15 of those exemptions were not administrative exemptions because Military Service personnel incorrectly recorded the 15 exemptions. Therefore, we removed the 18 medical exemptions and 15 administrative exemptions from our samples.

² Air Force amounts include requests from Space Force Service members.

³ Air Force officials explained that the permanent medical exemption applies to all vaccines and that it is often applied to a Service member’s record just before separation from military service. Additionally, we determined that all five Service members subsequently separated from military service.

Source: The DoD OIG.
Internal Control Assessment and Compliance

We assessed internal controls and compliance with laws and regulations necessary to satisfy the audit objective. In particular, we assessed controls over vaccination exemptions and discharges for active duty Service members. However, because our review was limited to these internal control components and underlying principles, it may not have disclosed all internal control deficiencies that may have existed at the time of this audit.

Use of Computer-Processed Data

We used computer-processed data from the Military Services’ individual medical readiness systems.

- Army
  - CarePoint (Permanent Medical exemptions and Religious accommodation requests)
  - Medical Protection System – (MEDPROS) – Temporary Medical and Administrative exemptions
- Marine Corps and Navy:  Medical Readiness Reporting System – (MRRS) – Permanent Medical, Temporary Medical, and Administrative exemptions
- Air Force:  Aeromedical Services Information Management System (ASIMS) – Permanent Medical, Temporary Medical, and Administrative exemptions

We used the data to establish a universe of medical and administrative exemptions related to COVID-19 vaccinations. We used the data to select nonstatistical samples of active duty Service members with permanent medical exemptions, temporary medical exemptions, administrative-other than religious accommodations exemptions, and religious accommodation exemptions.

We validated and corroborated sample items to source documents using the Joint Longitudinal Viewer and hard copy source documents of exemption packages, or both; therefore, we concluded that the Military Services’ individual medical readiness systems (MEDPROS, MRRS, and ASIMS) were reliable to provide a universe of Service members. We did not identify discrepancies that affected our conclusions in this audit.

Prior Coverage

During the last 5 years, the Government Accountability Office (GAO) issued one report discussing protecting the health of Service members. Unrestricted GAO reports can be accessed at http://www.gao.gov. Unrestricted DoD OIG reports can be accessed at http://www.dodig.mil/reports.html/.
GAO

Report No. GAO 21-321, “DoD Has Focused on Strategy and Oversight to Protect Military Service Member Health,” June 2021

The GAO report concluded that the DoD developed a strategy to protect the health of Service members from COVID-19 with a goal of minimizing risks. The GAO determined that the DoD strategy includes several key considerations, including prioritizing leadership attention and continuous communication across the organization; making decisions about reentry based on local conditions; identifying mission-essential functions and employees; implementing social distancing and other appropriate protection measures; establishing COVID-19 testing protocols; and establishing protocols to prioritize and distribute antivirals and vaccines.
MEMORANDUM FOR INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE


This responds to the DoD Inspector General draft report, “Audit of Military Services’ Processing of Coronavirus Disease-2019 Vaccination Exemptions and Discharges for Active Duty Service Members” (Project No. D2022-D000AW-0081.000).

Thank you for your insightful audit of the processing of coronavirus disease 2019 vaccination exemptions and discharges. I concur with Recommendation A and will implement this recommendation in the upcoming reissuance of DoD Instruction 1300.17, “Religious Liberty in the Military Services.” I concur with comment on Recommendation B. I non-concur with Recommendation C; however, I am directing a refined review to best meet the root issues that this recommendation attempts to address. Further detail to our responses is provided in the attachment.

My point of contact for Recommendations A and C is [redacted] at [redacted]. My point of contact for Recommendation B is [redacted] at [redacted].

Ashish S. Vazirani
Acting

Attachment:
As stated
DOD INSPECTOR GENERAL DRAFT REPORT DATED DECEMBER 13, 2023
D2022-D000AW-0081.000

“Audit of Military Services’ Processing of Coronavirus Disease–2019 Vaccination Exemptions and Discharges for Active Duty Service Members”

ACTING UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS RESPONSE TO THE DOD INSPECTOR GENERAL RECOMMENDATIONS

RECOMMENDATION A1: That the Under Secretary of Defense for Personnel and Readiness review the religious accommodation request process for vaccinations to identify efficiencies that could be achieved during periods of high-volume requests and issue guidance accordingly to decrease processing times.

RECOMMENDATION B1: That the Director, Defense Health Agency, in coordination with the Secretaries of the Military Departments, develop and implement a requirement for personnel to maintain supporting documentation for medical and administrative exemptions in Service members’ medical records.

RECOMMENDATION C1: That the [USD(P&R)]:

a. Develop and issue guidance to require uniform discharge types for [Service members] discharged for misconduct solely for vaccination refusal.

b. Develop and issue guidance to assign uniform reentry codes for all [Service members] discharged for misconduct solely for vaccination refusal.

ACTING USD(P&R) RESPONSE:

Recommendation A1: Concur. The Office of the Under Secretary of Defense for Personnel and Readiness will initiate a change to Department of Defense Instruction (DoDI) 1300.17, “Religious Liberty in the Military Services,” in the next year to facilitate provisions for a central decision authority during high-volume religious accommodation request periods (e.g., pandemic) and issue subsequent guidance accordingly during such periods to increase efficiencies to decrease processing times.

Recommendation B1: Concur with comment. Administrative exemptions are adjudicated by the Military Departments and documentation is most appropriately maintained in personnel records contained within the individual medical readiness systems managed by the Military Departments. As such, we recommend alternative language for this recommendation: “That the Director, Defense Health Agency, in coordination with the Secretaries of the Military Departments, develop and implement a requirement for personnel to maintain supporting documentation for medical exemptions in the medical record and supporting documentation for
administrative exemptions in Service members’ individual medical readiness systems or alternative personnel systems.”

**ACTING USD(P&R) RESPONSE:**

**Recommendation C1:** Non-concur, without significant refinement. I will refer this recommendation to the standing Separation Standardization Working Group as codified in DoDI 1332.14, “Enlisted Administrative Separations,” for review and recommendations on how to meet the root issues this recommendation attempts to address.

While my office agrees that the Secretary of Defense should provide overarching guidance for emergent, enterprise-wide impacts such as the coronavirus disease 2019 (COVID-19) pandemic, OSD is not best positioned to direct Military Service level, granular personnel actions such as specific reentry criteria that underpin the use of reentry codes. Guidance issued regarding the COVID-19 pandemic, and associated policy regarding the requirement to receive vaccination against the disease, was in accordance with standing Departmental immunization policy, to include Military Service-level discretion pertaining to separation characterization and reentry considerations. OSD disagrees that “all” Service members were similarly situated because they were in fact in different Military Services with different occupations and different expectations regarding readiness for those occupations, deployability, and the availability of remote work.
# Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASIMS</td>
<td>Aeromedical Services Information Management System</td>
</tr>
<tr>
<td>COVID-19</td>
<td>Coronavirus Disease–2019</td>
</tr>
<tr>
<td>DC M&amp;RA</td>
<td>Deputy Commandant (Manpower and Reserve Affairs)</td>
</tr>
<tr>
<td>DCNO N1</td>
<td>Deputy Chief of Naval Operations for Manpower, Personnel, Training, and Education</td>
</tr>
<tr>
<td>FDA</td>
<td>U.S. Food and Drug Administration</td>
</tr>
<tr>
<td>MARADMIN</td>
<td>Marine Administrative Message</td>
</tr>
<tr>
<td>MEDPROS</td>
<td>Medical Protection System</td>
</tr>
<tr>
<td>MRRS</td>
<td>Medical Readiness Reporting System</td>
</tr>
<tr>
<td>NAVADMIN</td>
<td>Navy Administrative Message</td>
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<tr>
<td>Naval OIG</td>
<td>Office of the Naval Inspector General</td>
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<tr>
<td>OTSG</td>
<td>Army Office of the Surgeon General</td>
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