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BASIC QUESTIONS

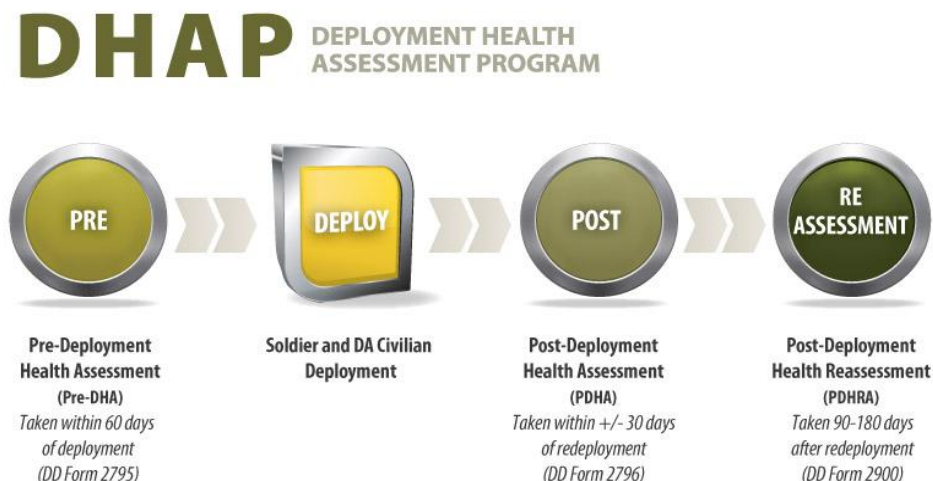
1. What is the DHAP?

The Deployment Health Assessment Program (DHAP) is a commander's program that promotes Soldier and Department of the Army (DA) Civilian optimal health and well-being, and it helps to maximize unit operational readiness. Through a series of deployment health assessments (DHAs) taken within specific deployment cycle timelines, DHAP identifies emerging physical and behavioral conditions and provides the referral care needed to address those potential conditions. If not detected and treated, these conditions could lead to more serious outcomes.

2. What are DHAs?

There are three Deployment Health Assessments (DHAs): the Pre-DHA (DD 2795), PDHA (DD 2796) and PDHRA (DD 2900). The DHAs are tailored to identify and examine for the full range of deployment-related physical and behavioral health concerns such as physical injuries, traumatic brain injury (TBI), substance abuse, suicidal ideation, post traumatic stress disorder (PTSD) and environmental exposures sustained downrange. The DHAs give Soldiers and DA Civilians the opportunity to protect their health, work **confidentially** with a medical provider, and then – if necessary – receive the care needed to address any health concerns.

3. When do I take the DHAs? What steps are necessary?



The DHAs are taken within specific time frames: the Pre-DHA is taken within 60 days of deployment; the PDHA is taken within +/- 30 days of redeployment and the PDHRA is taken within 90-180 days after redeployment.

Each DHA includes three steps: (1) [Resilience Training](#) (Comprehensive Soldier and Family Fitness) taught by Master Resilience Trainers; (2) a specific self-assessment (*DD Form*) completed on [My Medical Readiness](#) (AKO); (3) a confidential, one-on-one conversation with a health care provider. Completion procedures differ slightly for each component. Soldiers and DA Civilians should seek specific guidance from their Chain of Command or unit medical staff.

4. Who is required to complete the DHAs?

The DHAs (Pre-DHA, PDHA, and PDHRA) are required for all outside the continental United States (OCONUS) deployments (e.g., operational deployments, training events, humanitarian missions, etc.) greater than 30 days to locations not supported by a fixed US Military Treatment Facility (MTF). Moreover, commanders are required to determine the environmental risks and the need for DHAs for all deployments of 30 days or less to any location, CONUS or OCONUS. See [DODI 6490.03](#) (Table E4.T1-T4).

5. How do I contact my DHAP Coordinator?

If you're in Active status, visit [DHAP AKO](#) to locate your DHAP Coordinator or contact your unit S1. If you're Army Reserve, [click here](#). If you're Army National Guard, please [click here](#).

6. What is the difference between the Pre-DHA, PDHA and PDHRA?

Each DHA consists of a self-assessment that contains critical questions to help identify existing and/or emerging conditions within the deployment cycle that have a potential impact on Soldier and DA Civilian health, future well-being, and unit readiness. Following each self-assessment, individuals are required to have a face-to-face review by a health care provider. The differing timeframe for each DHA provides a holistic approach protecting individual health and maximizing readiness. When coupled with the Periodic Health Assessment (PHA), the Army's health assessment process becomes a valuable commander tool in support of the Army's Ready and Resilience Campaign (R2C).

7. When and where do I complete the DHAs?

It's a unit commander's responsibility to schedule the time and place, and advise you on the requirements for completing the DHAs based on eligibility, the deployment timeline, and unit training schedules. If your Commander has not contacted you, and you are getting ready to deploy, or have recently redeployed, please contact your chain of command or Unit S1. Timely DHA completion is essential to promptly address deployment-related health concerns that often evolve over time. Protect your Health!

8. Are the DHAs something I just do on AKO?

No. After completing unit-level resilience training designed to support each DHA and with guidance from your unit leadership, you complete the self-assessment on-line through AKO. After completing resilience training and the self-assessment, the final step is to complete your confidential, one-on-one conversation with a health care provider. He or she will review, initiate referrals as needed, and electronically sign the self-assessment completing the process.

9. Haven't I done this already? I just completed this when I returned from my deployment. Why do I now need another health screening?

It is likely that you completed the PDHA (Post-Deployment Health Assessment) when you returned from theater, right before you redeployed or during a reverse-SRP. The PDHRA is taken 90-180 days after your redeployment. Research shows that most signs and symptoms appear several months after your redeployment. Many complete the PDHRA self-assessment, but fail to complete the process by scheduling a face-to-face review by a health care provider.

10. I'm currently deployed and received a PDHRA non-compliance notification; do I need to complete this right now? How do I go about completing the PDHA or PDHRA?

SOLDIERS: If you are currently deployed and receiving hazardous fire pay, the system is designed to generate an automatic waiver that suspends the requirement until you redeploy and complete a new PDHA. If you continue to receive PDHRA notices, please contact your unit S1.

DA CIVILIANS: When you redeploy, you will take a new PDHA, restarting the countdown for your PDHRA. No further action is necessary from you at this time.

11. How do the DHAs impact my ability to deploy?

Health concerns identified during DHAs could affect your ability to deploy. You should follow up with the referral care a provider recommends.

12. Is the Periodic Health Assessment (PHA) a DHA? What's the difference?

No. The Periodic Health Assessment (PHA), regardless of deployment, is taken annually for all Soldiers. The PHA is a preventive screening tool designed to improve reporting and visibility of Individual Medical Readiness (IMR) for all Soldiers. The series of DHAs along with the PHA each include a specific self-assessment (DD Form) and confidential conversation with a health care provider. Note: Reserve and National Guard Soldiers must have active duty orders in order to receive a PHA.

13. I frequently deploy, is there a way to combine some of these health assessments?

Frequent Deployers may be eligible to combine assessments to prevent overlapping and redundant health screenings, IAW the Post-Deployment Health Reassessment (PDHRA) and Frequent Deployments Memorandum, Operations Order 08-50, ALARACT 253/2008 and Army Regulation 40-501. Frequent Deployers are defined as individuals who have deployed to a combat zone more than once for 30 days or longer within a period of one year.

Frequent Deployers are entitled to two opportunities to combine health assessment requirements during the same screening:

1) Combining the PDHRA with the PDHA (Soldiers and DA Civilians) - The PDHA (DD 2796) may serve as a substitute for the PDHRA (DD 2900) for Frequent Deployer Soldiers and Department of the Army (DA) Civilians. Once a Frequent Deployer completes a PDHRA, he/she need not to complete another PDHRA for the next 275 days, provided a PDHA is completed for each subsequent redeployment within those 275 days.

2) Combining the PHA with the PDHA or PDHRA (Soldiers only) - The Periodic Health Assessment (PHA) may be combined with the PDHA or the PDHRA for Soldiers by using the abbreviated PHA form. Soldiers must complete the PHA process within 15 months from the date of the previous PHA. The abbreviated PHA form must be completed within 60-days of the completion of the PDHA or PDHRA by the provider; it is recommended that both are accomplished at the same time if required.

14. What happens to my DHA results? Are the results of the DHAs reported to my Chain of Command?

The findings of your DHAs are private and confidential. However, your Commander will be notified if you received a referral, so the Commander can give you the time you need for the appointment. The nature of the referral is not disclosed (*e.g. orthopedics, behavioral,*

dermatology, PTSD, etc.). The one exception to this is if you are found to be a danger to yourself or others, then more information is provided to your Commander.

15. Will the DHA results affect my security clearance?

No. The National Security Positions ([Standard Form 86](#)) now excludes the disclosure of counseling related to marital, family and grief issues not related to violence by you and counseling strictly related to adjustments from service in a military combat environment. Both PTSD and depression are considered treatable conditions, and most are expected to make a full recovery and return to duty. You are more likely to compromise your security clearance if you have a psychological health condition and do not seek treatment. Untreated psychological health conditions can pose a liability to the mission and to your unit.

16. How can I find out more about DHAP and the DHAs?

To learn more about DHAP, visit our website(s) and AKO resources (below), or email us at dhap.g1.fieldinquiry@us.army.mil for questions or feedback.

- DHAP Homepage <http://dhap.army.mil>
- DHAP (Army Reserve) <http://dhap.reserve.army.mil>
- DHAP (National Guard) <http://dhap.guard.army.mil>
- DHAP AKO: <https://www.us.army.mil/suite/598655>
- DHAP Factsheet: http://www.armyg1.army.mil/hr/dhap/downloads/dhap_factsheet.pdf

RESILIENCE TRAINING

17. What is resilience training? Why should I take resilience training before DHA?

Resilience Training is administered by a Master Resilience Trainer (MRT) and considered a prerequisite for DHA completion. Resilience Training sets the conditions for each DHA by reinforcing the need for the honest disclosure of potential conditions, and maximizing Soldier and DA Civilian participation. The three deployment cycle (operational resilience) trainings are as follows: Pre-Deployment Resilience Training; Post-Deployment Resilience Training and 3-6 Months Post-Deployment Resilience Training. Click [here](#) to be directed to resilience training or visit <https://www.resilience.army.mil> for more information.

Resilience Training is part of the [Comprehensive Soldier & Family Fitness](#) (CSF2) program, a strength-building tool that provides all Army community members with the psychological resources and skills to cope with adversity and thrive in their lives.

18. How do I sign up for resilience training?

Resilience Training is scheduled by your chain of command in coordination with a Master Resilience Trainer (MRT) and unit S3. Research completed by scientists showed that Soldiers who received MRT-led resilience training reported higher levels of resilience and psychological health over time than Soldiers who did not receive the training.

SELF-ASSESSMENT (DD FORM)

19. How do I complete the self-assessment (DD Form) online?

To complete the self-assessment (DD Form) portion of your DHA, visit '[My Medical Readiness](#)' on AKO and click on 'Deployment Health Assessments'. **Do not complete unless instructed by your Chain of Command.**

20. What if I can't access AKO or complete online?

Contact the AKO help desk or your installation IT team. Make sure your Chain of Command is aware of your access situation.

CONFIDENTIAL CONVERSATION

21. I already completed the 1-on-1 conversation with the provider, why am I still showing as an 'INCOMPLETE'?

You are probably showing as 'incomplete' because your DD Form was not properly submitted. You will need to contact the health care provider or else schedule a new appointment.

REFERRAL CARE

22. I was recommended to receive referral care. Does someone call me to schedule the appointment?

You need to schedule the appointment yourself. Call your local Medical Treatment Facility (MTF) to schedule your appointment.

23. Where do I obtain my referral care? Where can I go?

Referral care may be obtained at military Medical Treatment Facilities (MTF) (<http://www.tricare.mil/mtf/>), a TRICARE network provider or a Veteran Affairs (VA hospital, clinic or center) (www.va.gov/directory).

Additionally, behavioral health referral care for all DHAs may be obtained from Army OneSource (www.militaryonesource.mil), Army Substance Abuse Program, a Soldier/Family Support Center or an Army Chaplain. Active Duty Soldiers can use the TRICARE network if they are in TRICARE Prime Remote or are sent to the network by their MTF.

Non-active duty personnel can call the Military Medical Services Office of TRICARE (888-647-6676, ext. 3352) for assistance in finding a TRICARE network provider for referral care. Appointments for VA care are often made during the deployment health assessments (DHAs). If VA appointments are not available, you can schedule a visit yourself with the VA or any of the other sources of referral care previously mentioned.

DA Civilians should contact their supporting Occupational Health Clinic (OHC) located within the nearest Medical Treatment Facility (MTF) to schedule their PDHRA as well as obtain referral care information.

24. How long can I receive referral care? Am I entitled to disability?

Referrals will be provided to Soldiers for further evaluation or treatment, if necessary. The duration of treatment depends on decisions made by you and your health care provider.

Disability decisions will be made in accordance with Army Policy, if a disability determination is needed.

DA Civilians can refer to the Army G-1 web site under the Civilian Personnel online (CPOL): <http://cpol.army.mil/library/benefits/> if there are questions about processing a worker's compensation claim.

25. If Reserve, National Guard, IRR Soldier, or DA Civilian will I be paid for attending my referral appointment?

Please speak with your Commander for more information on pay for attending referral appointments. DA Civilians should contact their supervisor or local Occupational Health Clinic (OHC) located within the Medical Treatment Facility (MTF).

ADDITIONAL QUESTIONS

26. What if you're separating or transitioning from the Army? Do DHAs still apply?

Compliance will be verified during In/Out processing at all Army installations. Soldiers separating for any reason will complete the Reassessment (PDHRA) prior to separation regardless of timeframe. Completion is authorized within the 0-89 day window for transitioning Soldiers. Separations include retirement; involuntary separations; ETS, Army Reserve, Individual Ready Reserve (IRR), and Army National Guard transitions.

27. I am assigned to an Air Force unit, how do I complete my DHAs?

Army Units assigned to Air Force Installations and supported by Air Force Medical facilities can now coordinate the completion of Deployment Health Assessments (DHAs) through those facilities. An interface has been established between the Air Force and Army medical readiness systems enabling the exchange of deployment assessments data between the Air Force Aero-Medical Services Information Management System (ASIMS) and Army Medical Protection System (MEDPROS).

Two steps are involved in completing a DHA with the Air Force. First, Soldiers complete their portion of a DHA via the ASIMS web application at <https://imr.afms.mil/imr/appdir.aspx>. The second step is to schedule and complete a one-on-one confidential conversation with an Air Force health care provider at the supporting Air Force Medical Treatment Facility (MTF). Soldiers should ensure they inform the Air Force provider that the applicable DHA Form was completed via the Air Force website. The AF healthcare provider completes the interview with the Soldier and electronically signs the DHA Form. Within 24 hours, the DHA is sent to MEDPROS. The 2013 Instruction Guide can be downloaded on Army DHAP AKO by clicking [here](#).

28. What does a loved one need to know? What resources are available to me?

It's understandable for family and friends to feel out of the loop when it comes to their loved ones being deployed. The most important thing is to talk to your loved one. Encourage them to

talk about their health, whether it is with you, fellow service members or medical professional. Visit the list below for additional resources and information.

- [Veteran's Affairs Caregivers & National Support Line](#)
- [Helping Families Understand Combat Stress](#)
- [Domestic Violence Resources for Military Families](#)
- [Suicide Prevention Resources for Families](#)
- [How Parents of Warriors can Support Reintegration](#)
- [The Role of Family and Loved Ones in Substance Abuse](#)
- [Supporting your Service member with Psychological Health Concerns](#)
- [Boosting Your Family Resilience](#)
- [Military Family Consultant Ease Warrior Transitions](#)
- [New Parents can stay Connected during Deployment](#)
- [U.S. Army Family, Morale, Welfare and Recreation Programs](#)