

DEPARTMENT OF AIR FORCE
FREQUENTLY ASKED QUESTIONS – THE BRANDON ACT
FOR BRANDON ACT-COMMANDER/SUPERVISOR FACILITATED REFERRAL
PROGRAM

Background: On 5 May 2023, Honorable Gilbert R. Cisneros, Jr. signed Directive-type Memorandum (DTM)23-005 – “Self-Initiated Referral Process for Mental Health Evaluations of Service Members,” implementing Section 704 of Public Law 117-81, known as “the Brandon Act.” The Brandon Act states that Service members (SMs) can initiate a referral process for a mental health evaluation (MHE) through a commanding officer or supervisor who is in a grade of E-6 and above on any basis, at any time, and in any environment. The program will be implemented in two phases. Currently, Phase one implements policy for SMs on active duty. Phase two will be implemented at a later date to include all SMs not serving on active duty (on orders for 30 days or less).

Frequently Asked Questions:

Q: Does my commander or supervisor have to give me a referral for a MHE even if it impacts the mission or is not a good time?

A: Yes.

Q: Do I have to talk about why I want a mental health (MH) referral to my commander/supervisor?

A: No.

Q: Can my commander/supervisor talk to me when I ask for a referral or will they just give me the referral?

A: Yes. Your commander/supervisor can speak with you about the referral, and what you need. You do not have to answer any of the questions. Alternatively, you may voluntarily discuss with your commander/supervisor whatever you wish to disclose.

Q: Can I ask for multiple referrals – i.e. - if I needed a MHE in May and then again in June? Is there a limit to how many times I can ask for a referral?

A: You can ask for multiple referrals, and there is no limit to the number of referrals you may request.

Q: If I go to see MH, and need continuous care - will I have a voice in the care that I desire to enroll in?

A: Yes. Your autonomy is respected. You should always voice your desires and work to understand your treatment plan by raising questions.

Q: If there is an embedded provider in my unit, can I see them for a Brandon Act-Commander/Supervisor Facilitated Referral?

A: Yes. However, the care rendered will occur in the Military Treatment Facility (MTF). Your care is recorded in the Electronic Health Record (EHR) and only providers with those privileges can complete the assessment. The utilization of the Brandon Act request precludes undocumented care and would mean that Military and Family Life Counseling (MFLC) or Chaplains are not able to support.

Q. The DTM includes reservists and those not on orders, so a reservist who is not on orders can request a MHE?

A. The Brandon Act will be completed in a phased approach. Currently we are in Phase one which only pertains to members on Active Duty. Phase two will be implemented later to include all other members not on active duty (30 days or less).

Q: If my supervisor is an E-5, do I have to go to my commander instead? Can I go to any E-6?

A: The referral must be made by your commander or a supervisor in the grade of E-6 or higher.

Q: When I get my referral, what happens when I don't go to my appointment? Will my commander/supervisor be notified?

A: No. Your appointment is still a voluntary action, but command supported. If your command has concerns, they may shift the referral to a command directed action.

Q: Where can I find more information on the Brandon Act?

A: DAF resilience website. www.resilience.af.mil

Q: When requesting the Brandon Act Facilitated Referral, do I have to go to the MTF for care?

A: Yes. Your care must be documented in the EHR and only providers with those privileges can complete the assessment. This will occur in the MTF. The utilization of the Brandon Act request precludes undocumented care and would mean that unit embedded personnel can't honor the intent (i.e., MFLCs, Chaplains, Military & Family Readiness Center (M&FRC), etc.). If there is no MTF in close proximity, it could be via telehealth, or a primary care provider can initiate care and get you follow on care.

Q: Will my commander/supervisor be notified of the results of the MHE?

A: No. Command notification is not required unless there is a safety, readiness, or duty concern. Pursuant to DTM 23-005, providers may confirm a completed MHE to commanders/supervisors for accountability purposes only.

Q: Does this mean I have to go through my commander or supervisor any time I want or need to be seen in mental health?

A: No. DTM 23-005 and the Brandon Act are not intended to be barriers to care, but rather provide another method for obtaining a supervisor/commander assisted referral for an MHE. You can still request an appointment through the MTF, your primary care team, or other healthcare provider.

Q. What if I ask for the Brandon Act Facilitated Referral, and just want to see a Chaplain, or a Military and Family Life Counseling (MFLC), do I have to go to the MH clinic?

A. Yes, an official Brandon Act request will be met only through the MTF and documented in your medical record. The Brandon Act requires you to be evaluated by a privileged MH professional. They will determine the appropriate level of support and you may be presented other options outside of the MTF across the spectrum of resilience (e.g., Chaplain, MFLC, etc.). Early help-seeking is always encouraged.