



Non-Covered Reproductive Health Care Policy Fact Sheet

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NAVADMIN 058/23 provides interim supplemental guidance to ALNAV 017/23 (Command Notification of Pregnancy) and ALNAV 018/23 (Administrative Absence or Travel for Non-Covered Reproductive Health Care). Together, these three messages ensure our Sailors and their families have access to reproductive health care – regardless of where they are stationed in service to our nation – and safeguard the privacy of protected health information.

Who needs to know?

- Active Component (active duty Sailors and Training and Administration of the Reserve (TAR) Sailors)
- Reserve Component Sailors (with some restrictions)
- Triads, Chiefs Mess
- Medical Professionals
- Command Administrative Professionals
- Navy Family Members

What you need to know – key points

- **ALNAV 017/23 Command Notification of Pregnancy**
 - Sailors may now delay notifying their command of a pregnancy to up to 20 weeks, unless there are special circumstances that require earlier notification.
- **ALNAV 018/23 Administrative Absence or Travel for Non-Covered Reproductive Health Care**
 - Active duty and reserve component Sailors on active duty orders for 30 consecutive days may now be granted an administrative absence to receive, or accompany a dependent who receives non-covered reproductive health care.
 - The administrative absence may be for the minimum number of days essential to receive the required care, up to 21 days per request.
 - Non-covered reproductive health care includes non-covered pregnancy termination and Assisted Reproductive Technology (ART), which includes, but is not limited to, egg retrieval, IUI, and IVF.
 - Non-covered reproductive health care is at the patient's expense.
- **NAVADMIN 058/23 Administrative Absence or Travel for Non-Covered Reproductive Health Care**
 - NSIPS will be used to request administrative absence for non-covered reproductive health care.
 - Until NSIPS receives a related update, Sailors will submit their leave under the convalescent leave category with “administrative absence for non-covered reproductive health care” as the absence reason.
 - To request a convalescent leave period after receiving reproductive care, a convalescent leave request must be submitted (in addition to the administrative absence).
 - Health care providers may recommend convalescent leave in accordance with medical practice standards. A Sailor's commanding officer must approve the leave (upon advice of a healthcare provider). See MILPERSMAN 1050-180 for more information about convalescent leave.
 - Commands are required to track how many days of administrative absences are being used and the cost of funded travel. To do so, they must email the template located at <https://www.mynavyhr.navy.mil/Support-Services/Culture-Resilience/Parenthood-Pregnancy/> to ALTN_pregnancyandparenthood@navy.mil.



Sample POD/POW Note

- REPRODUCTIVE HEALTH CARE. ALNAV 017/23, ALNAV 018/23 and NAVADMIN 058/23 ensure Sailors and their families have access to reproductive health care. Sailors may request an administrative absence or funded travel in order to receive non-covered reproductive health care. For more information contact the command medical representative or your CoC.

FAQ

Q. Who is eligible to request an administrative absence under the new policy?

A. Active duty Sailors, including reserve component when on active duty orders for 30 or more consecutive days, may request an administrative absence to access non-covered reproductive health care, or to accompany a dependent to access non-covered reproductive health care.

Q. What is non-covered reproductive health care?

A. Non-covered reproductive health care is defined in policy as lawfully available assisted reproductive technology, which includes egg retrieval, IUI, and IVF, and non-covered pregnancy termination. Non-covered reproductive health care is paid for at the patients' expense.

Q. What is included in Assisted Reproductive Technology (ART)?

A. For the purposes of these policies, ART includes:

- Ovarian stimulation and egg retrieval, including any needed medications and procedures required for retrieval, processing and utilization for ART or cryopreservation
- Sperm collection and processing for ART or cryopreservation
- Intrauterine insemination (IUI)
- In vitro fertilization (IVF) inclusive of the following procedures for beneficiaries when clinically indicated:
 - In vitro fertilization with fresh embryo transfer
 - Gamete intrafallopian transfer (GIFT)
 - Zygote intrafallopian transfer (ZIFT)
 - Pronuclear stage tubal transfer (PROST)
 - Tubal embryo transfer (TET)
 - Frozen embryo transfer

Q. What is considered a covered pregnancy termination and what is a non-covered pregnancy termination?

A. The Department of Defense defines a covered pregnancy termination as a medical or surgical pregnancy termination, where the life of the mother would be endangered if the fetus were carried to term or in a case in which the pregnancy is the result of an act of rape or incest.

A non-covered pregnancy termination, either medical or surgical, is one that does not meet the criteria of a covered pregnancy termination.

Q. If a Service member has a dependent that is still covered by TRICARE, living in a state that restricts access to reproductive health services, will the Department pay for their travel to the nearest location that has such care available?

A. Active duty Sailors and their dependents are eligible to request and receive funded travel when non-covered reproductive health care services are not available locally.

Q. What happens if my request for an administrative absence or funded travel is denied?

A. If your request is denied by the Commanding Officer or approval authority, you may appeal the request to the next level of leadership (no lower than the O-6/GS-15 level). Commanding Officers are also required to notify the same level of leadership if they choose to deny a request



Q. What is the minimum amount of information I need to tell my command to be eligible for administrative travel to access non-covered reproductive health care services?

A. For consideration of eligibility for administrative absence or funded travel, a Sailor must disclose the need for non-covered reproductive health care for themselves or their dependent, and also disclose the minimum number of days needed to receive the required care and to execute any associated travel needed to access the care by the most expeditious means. Do not upload PII or HIPAA information into DTS as part of the substantiating documents.

Q. Where can I find more information about administrative absence or funded travel for non-covered health procedures?

A. Additional information on this policy can be found in ALNAV 017/23 and ALNAV 018/23. To review the full documents scan the QR Code to the right or visit <https://www.mynavyhr.navy.mil/References/Messages/ALNAV-2023>.



Q. Can a Sailor be put on No-Cost TAD orders instead of funded travel or administrative absence to receive care?

A. No, a Sailor receiving care for non-covered reproductive health must either be put on administrative absence or funded travel.

Q: Are commands required to send a report if no administrative absence or funded travel was authorized or executed?

A: No - If no administrative absence or funded travel is authorized or executed, commands are not required to submit a report.

Helpful Links

<https://www.mynavyhr.navy.mil/Support-Services/Culture-Resilience/Parenthood-Pregnancy/>

<https://www.med.navy.mil/Navy-Marine-Corps-Public-Health-Center/Womens-Health/>

<https://www.health.mil/News/In-the-Spotlight/Ensuring-Access-to-Reproductive-Health-Care>

<https://www.mynavyhr.navy.mil/References/Messages/ALNAV-2023/>

<https://www.mynavyhr.navy.mil/References/Messages/NAVADMIN-2023/>

<https://www.med.navy.mil/Navy-Marine-Corps-Public-Health-Center/Womens-Health/>

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