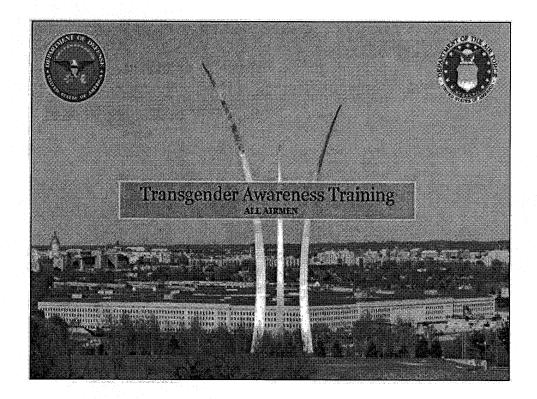
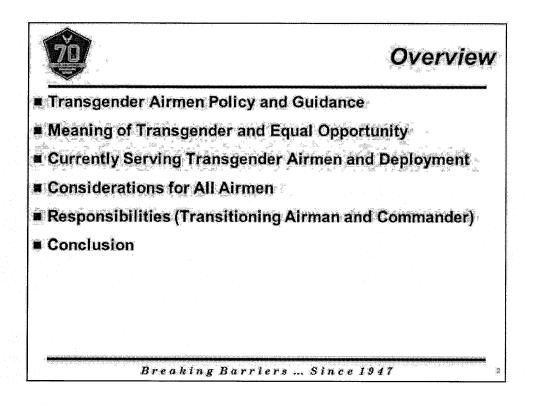
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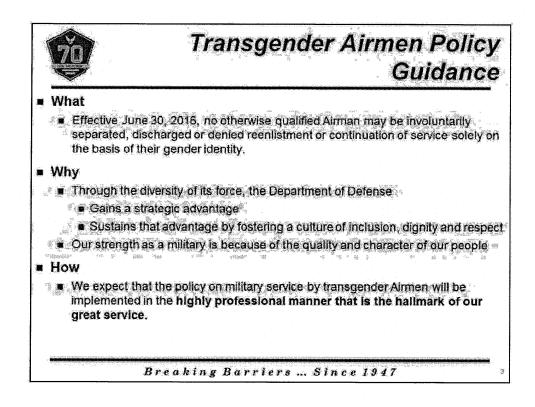
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NARRATION: Welcome to Transgender Awareness Training for all Airmen. The Air Force Transgender Education and Training Plan has been developed in accordance with Directive-type Memorandum 16-005, *Military Service of Transgender Service Members*; Department of Defense Instruction 1300.28, *In-Service Transition for Transgender Service Members*; and Air Force Policy Memorandum 2016-36-01, *In-Service Transition for Airmen Identifying as Transgender*.





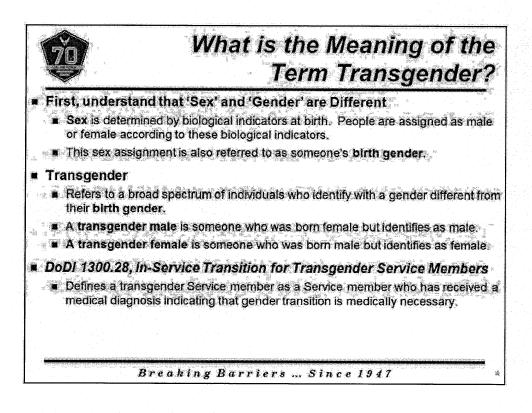


NARRATION: Transgender Airmen Policy Guidance:

Effective June 30, 2016, no otherwise qualified Airman may be involuntarily separated, discharged or denied reenlistment or continuation of service solely on the basis of their gender identity.

Through the diversity of its force the Department of Defense gains a strategic advantage, and it sustains that advantage by fostering a culture of inclusion, dignity, and respect. Simply put, our strength as a military is because of the quality and character of our people.

Accordingly, we expect that the policy on military service by transgender Airmen will be implemented in the highly professional manner that is the hallmark of our great service.

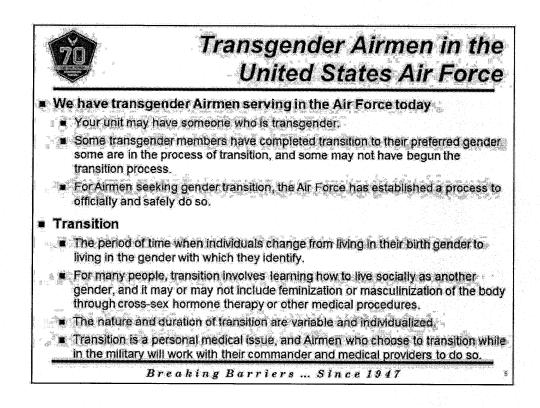


NARRATION: What is the meaning of the term transgender?

Sex and gender are different. Sex is determined by biological indicators at birth. People are assigned as male or female according to these biological indicators. This sex assignment is also referred to as someone's birth gender.

**Transgender** refers to a broad spectrum of individuals who identify with a gender different from their birth gender. A **transgender male** is someone who was born female but identifies as male, and a **transgender female** is someone who was born male but identifies as female.

DoDI 1300.28, *In-Service Transition for Transgender Service Members*, defines a transgender Service member as a Service member who has received a medical diagnosis indicating that gender transition is medically necessary.

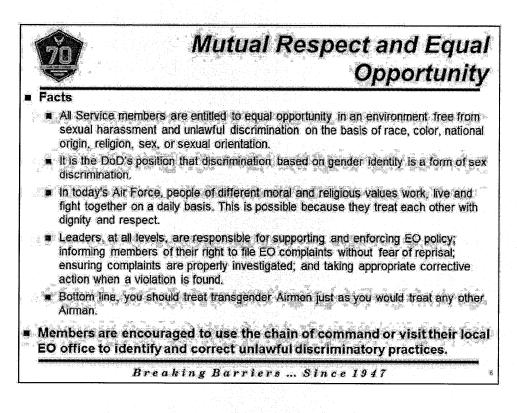


NARRATION: Transgender Airmen in the United States Air Force

We have transgender Airmen serving in the Air Force today. Your unit may have someone who is transgender. Some transgender members have completed transition to their preferred gender, some are in the process of transition, and some may not have begun the transition process. For Airmen seeking gender transition, the Air Force has established a process to

# officially and safely do so.

**Transition** is the period of time when individuals change from living in their birth gender to living in the gender with which they identify. For many people this involves learning how to live socially as another gender, and it may or may not include feminization or masculinization of the body through cross-sex hormone therapy or other medical procedures. The nature and duration of transition are variable and individualized. Transition is a personal medical issue, and Airmen who choose to transition while in the military will work with their commander and medical providers to do so.



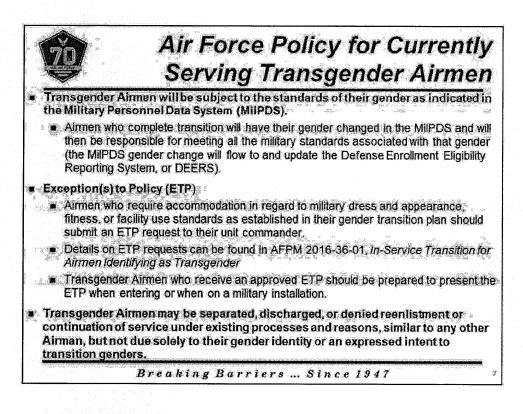
NARRATION: Mutual Respect and Equal Opportunity

All Service members are entitled to equal opportunity in an environment free from sexual harassment and unlawful discrimination on the basis of race, color, national origin, religion, sex or sexual orientation.

It is the Department's position that discrimination based on gender identity is a form of sex discrimination.

In today's Air Force, people of different moral and religious values work, live and fight together on a daily basis. This is possible because they treat each other with dignity and respect. Leaders, at all levels, are responsible for supporting and enforcing EO policy; informing members of their right to file EO complaints without fear of reprisal; ensuring complaints are properly investigated; and taking appropriate corrective action when a violation is found. Bottom line, you should treat transgender Airmen just as you would treat any other Airman.

Members are encouraged to use the chain of command or visit their local EO office to identify and correct unlawful discriminatory practices.

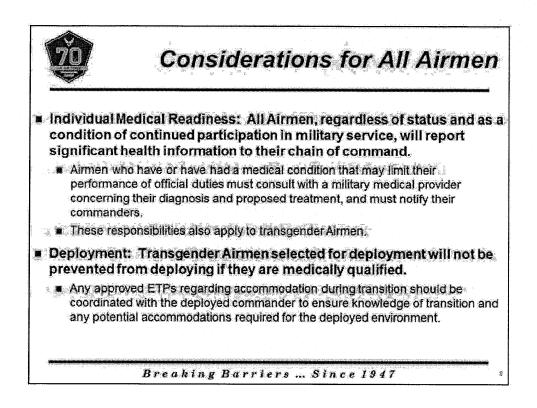


NARRATION: Air Force Policy for Currently Serving Transgender Airmen

Transgender Airmen will be subject to the standards of their gender as indicated in the Military Personnel Data System (MilPDS). Airmen who complete transition will have their gender changed in the MilPDS (the MilPDS gender change will flow to and update the Defense Enrollment Eligibility Reporting System, or DEERS) and will then be responsible for meeting all the military standards associated with that gender.

During transition there may be cases in which transgender Airmen require accommodation in regard to military dress and appearance, fitness, or facility use standards as established in their gender transition plan. In these cases, Airmen should submit an exception to policy (ETP) request to their unit commander. Details on ETP requests can be found in Air Force Policy Memorandum (AFPM) 2016-36-01, In-Service Transition for Airmen Identifying as Transgender. Transgender Airman who receive an approved ETP should be prepared to present the ETP when entering or when on a military installation. 2

Transgender Airmen may be separated, discharged, or denied reenlistment or continuation of service under existing processes and reasons, similar to any other Airman, but not due solely to their gender identity or an expressed intent to transition genders.



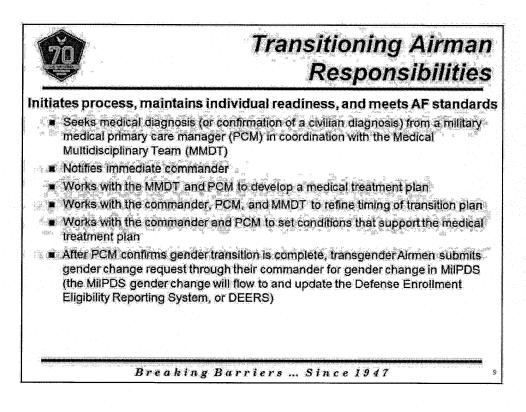
NARRATION: Considerations for All Airmen:

#### Individual Medical Readiness:

All Airmen, regardless of status and as a condition of continued participation in military service, will report significant health information to their chain of command. Airmen who have or have had a medical condition that may limit their performance of official duties must consult with a military medical provider concerning their diagnosis and proposed treatment, and must notify their commanders. These responsibilities also apply to transgender Airmen.

#### Deployment:

Transgender Airmen selected for deployment will not be prevented from deploying if they are medically qualified. Any approved ETPs regarding accommodation during transition should be coordinated with the deployed commander to ensure knowledge of transition and any potential accommodations required for the deployed environment.

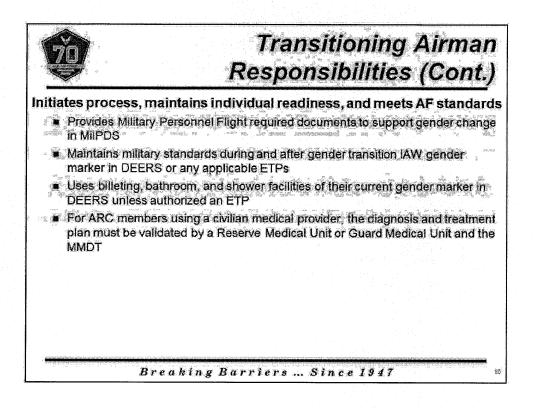


NARRATION: Transitioning Airman Responsibilities:

A transgender Airman seeking transition is responsible for initiating the gender transition process, maintaining individual readiness, and meeting Air Force standards.

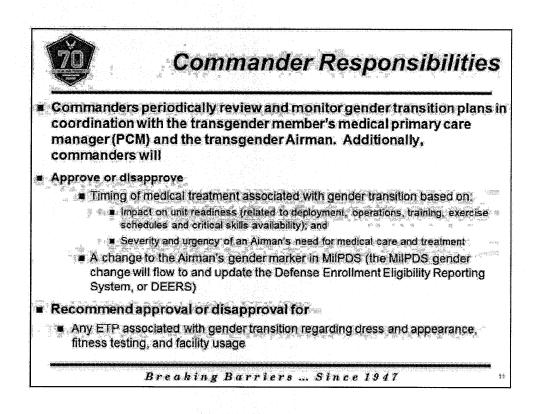
Additional responsibilities of the transgender Airman are as follows:

Seeks medical diagnosis (or confirmation of a civilian diagnosis) from a military medical primary care manager (PCM) in coordination with the Medical Multidisciplinary Team (MMDT); Notifies immediate commander; Works with the MMDT and PCM to develop a medical treatment plan; Works with the commander, PCM, and MMDT to refine timing of the transition plan if needed; Works with the commander and PCM to set conditions that support the medical treatment plan; After PCM confirms gender transition is complete, the transgender Airman submits a gender change request through commander for a gender change in MilPDS (the MilPDS gender change will flow to and update the Defense Enrollment Eligibility Reporting System, or DEERS) ... continued on next slide



NARRATION: Transitioning Airman Responsibilities:

Provides Military Personnel Flight required documents to support gender change in MilPDS; Maintains military standards during and after gender transition in accordance with gender marker in DEERS or any applicable ETPs; Uses billeting, bathroom, and shower facilities of their current gender marker in DEERS unless authorized an ETP; For ARC members using a civilian medical provider, the diagnosis and treatment plan must be validated by a Reserve Medical Unit or Guard Medical Unit and the MMDT



#### **NARRATION:** Commander Responsibilities

Commanders periodically review and monitor gender transition plans in coordination with the transgender member's medical primary care manager (PCM) and the transgender Airman. Additionally, commanders will:

#### Approve or disapprove:

- · Timing of medical treatment associated with gender transition based on
  - Impact on unit readiness (related to deployment, operations, training, exercise schedules and critical skills availability), and
  - Severity and urgency of an Airman's need for medical care and treatment
- Commanders will also approve or disapprove a change to the Airman's gender marker in MilPDS (the MilPDS gender change will flow to and update the Defense Enrollment Eligibility Reporting System, or DEERS)

#### Commanders will recommend approval or disapproval for:

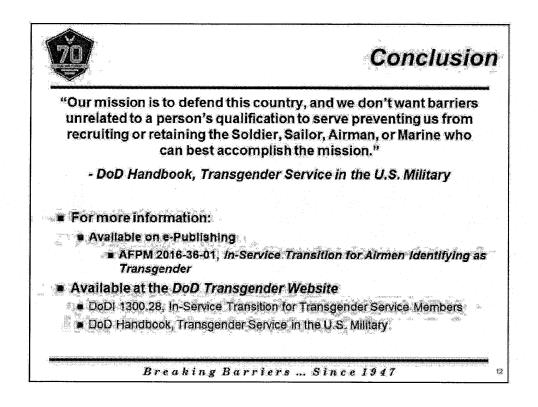
· Any ETP associated with gender transition regarding dress and appearance,

fitness testing, and facility usage.

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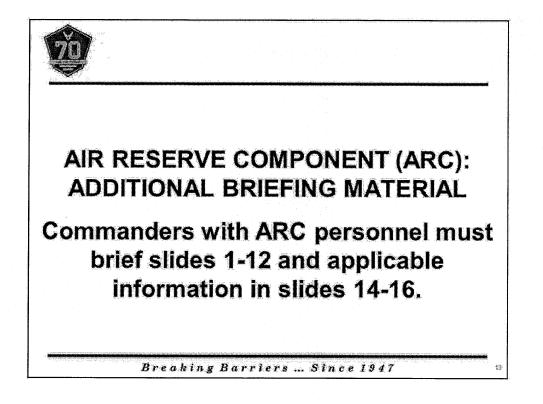
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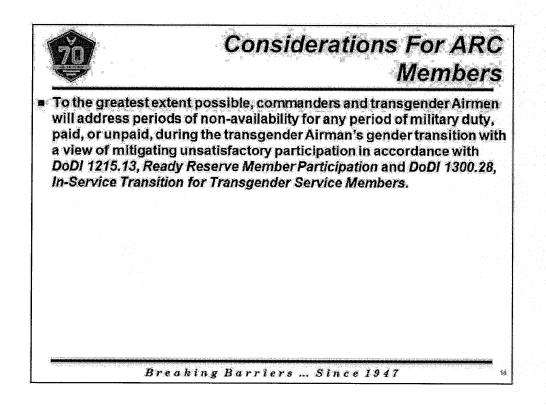
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**NARRATION:** Our mission is to defend this country, and we don't want barriers unrelated to a person's qualification to serve preventing us from recruiting or retaining the Soldier, Sailor, Airman, or Marine who can best accomplish the mission. (Per DoD Handbook, Transgender Service in the U.S. Military)

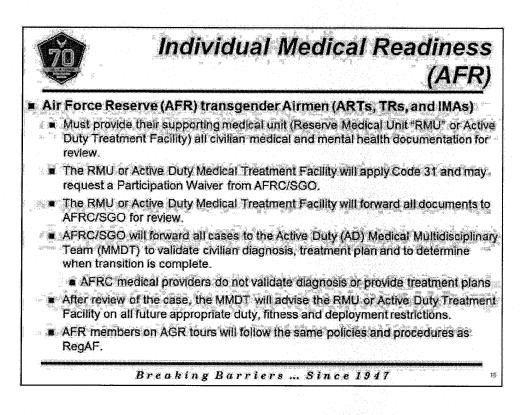
The Air Force developed a training plan that will provide commanders, supervisors, First Sergeants, and all Airmen a general education about transgender service and an explanation of the construct by which transgender Airmen may transition. Listed here are links to additional information resources: AFPM 2016-36-01, *In-Service Transition for Airmen Identifying as Transgender*, and the DoD Transgender Website, which contains DoDI 1300.28, *In-Service Transition for Transgender Service Members*, and the DoD Handbook, *Transgender Service in the U.S. Military*.





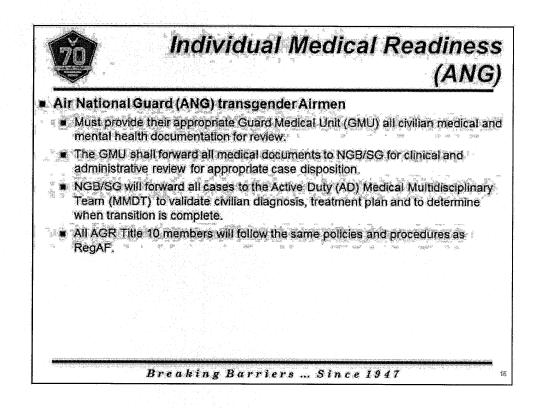
NARRATION: For ARC Members

To the greatest extent possible, commanders and transgender Airmen will address periods of non-availability for any period of military duty, paid or unpaid, during the transgender Airman's gender transition with a view of mitigating unsatisfactory participation in accordance with DoDI 1215.13, *Ready Reserve Member Participation Policy* and DoDI 1300.28, *In-Service Transition for Transgender Service Members*.



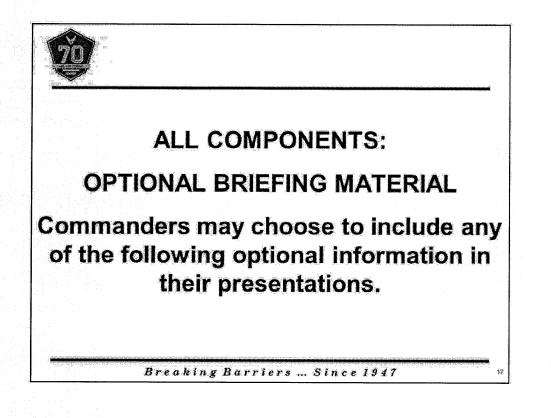
#### Individual Medical Readiness (AFR)

NARRATION: Air Force Reserve (AFR) transgender Airmen (ARTs, TRs, and IMAs) must provide their supporting medical unit (Reserve Medical Unit "RMU" or Active Duty Medical Treatment Facility) all civilian medical and mental health documentation for review. The RMU or Active Duty Medical Treatment Facility will apply Code 31 and may request a Participation Waiver from AFRC/SGO. The RMU or Active Duty Medical Treatment Facility will forward all documents to AFRC/SGO for review. AFRC/SGO will forward all cases to the Active Duty (AD) MMDT to validate civilian diagnosis, treatment plan and to determine when transition is complete. AFRC medical providers do not validate diagnosis or provide treatment plans. After review of the case, the MMDT will advise the RMU or Active Duty Medical Treatment Facility on all future appropriate duty, fitness and deployment restrictions. AFR members on AGR tours will follow the same policies and procedures as RegAF.



Individual Medical Readiness (ANG)

**NARRATION:** Air National Guard (ANG) transgender Airmen must provide their appropriate Guard Medical Unit (GMU) all civilian medical and mental health documents for review. The GMU shall forward all medical documents to NGB/SG for clinical and administrative review for appropriate case disposition. NGB/SG will forward all cases to the AD MMDT to validate civilian diagnosis, treatment plan and to determine when transition is complete. All AGR Title 10 members will follow the same policies and procedures as RegAF members.

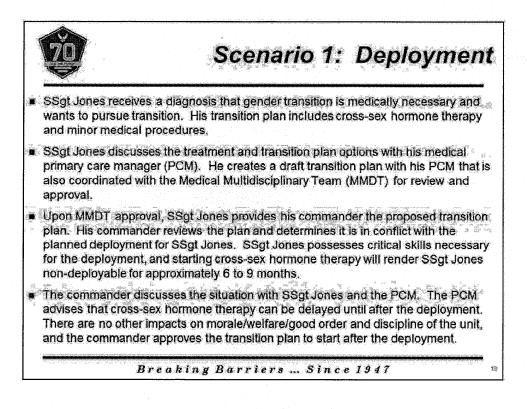


Scenarios The execution of new policies regarding the military service of openly transgender Airmen may present unfamiliar situations. In these cases, it is paramount to maintain mutual dignity and respect among all Airmen so mission may be accomplished in an effective and professional manner. The scenarios that follow demonstrate how particular situations could be addressed. Scenario 1: Deployment Scenario 2: Use of Pronouns NOTE: Additional scenarios covering other subjects can be found in the DoD Handbook, Transgender Service in the U.S. Military: An Implementation Handbook. Breaking Barriers ... Since 1947 12

**NARRATION:** Scenarios

The execution of new policies regarding the military service of openly transgender Airmen may present unfamiliar situations. In these cases, it is paramount to maintain mutual dignity and respect among all Airmen so mission may be accomplished in an effective and professional manner. The two scenarios that follow demonstrate how particular situations could be addressed.

Additional scenarios covering other subjects can be found in the DoD Handbook, *Transgender Service in the U.S. Military: An Implementation Handbook.* 



NARRATION: Scenario 1: Deployment

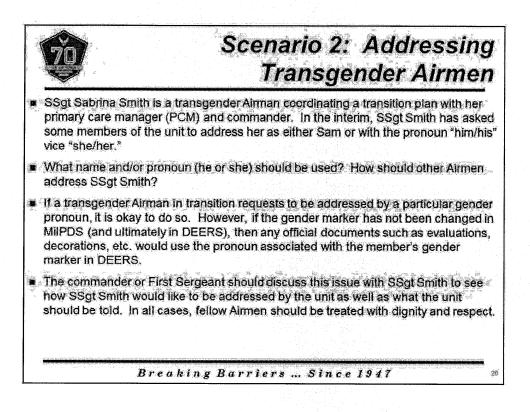
SSgt Jones receives a diagnosis that gender transition is medically necessary and wants to pursue transition. His transition plan includes cross-sex hormone therapy and minor medical procedures.

SSgt Jones discusses treatment and transition plan options with his medical primary care manager (PCM). He creates a draft transition plan with his PCM that is also coordinated with the Medical Multidisciplinary Team (MMDT) for review and approval.

Upon MMDT approval, SSgt Jones provides his commander the proposed transition plan. His commander reviews the plan and determines it is in conflict with a planned deployment for SSgt Jones. SSgt Jones possesses critical skills necessary for the deployment, and starting cross-sex hormone therapy will render SSgt Jones non-deployable for approximately 6 to 9 months.

The commander discusses the situation with SSgt Jones and the PCM. The PCM

advises that cross-sex hormone therapy can be delayed until after the deployment. There are no other impacts on morale/welfare/good order and discipline of unit, and the commander approves the transition plan to start after the deployment.



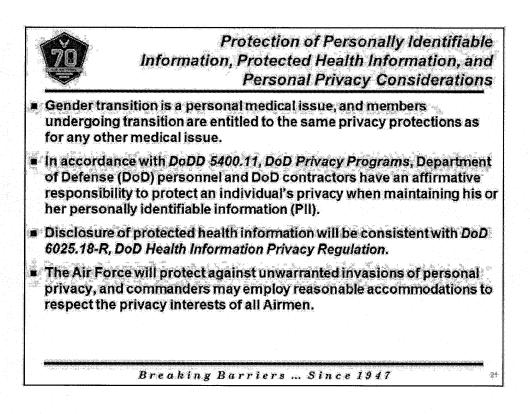
NARRATION: Scenario 2: Addressing Transgender Airmen

SSgt Sabrina Smith is a transgender Airman coordinating a transition plan with her primary care manager and commander. In the interim, SSgt Smith has asked some members of the unit to address her as either Sam or with the pronoun "he/him" vice "she/her."

What name and/or pronoun (he or she) should be used? How should other Airmen address SSgt Smith?

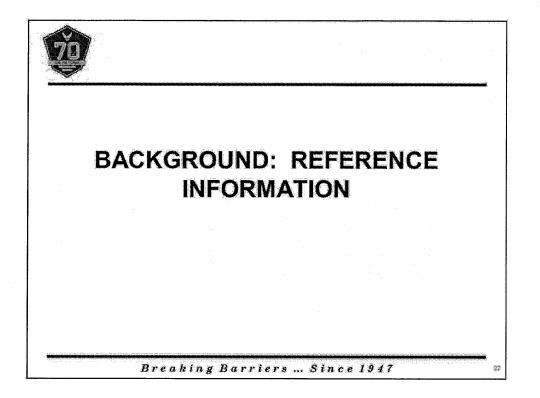
If a transgender Airman in transition requests to be addressed by a particular gender pronoun, it is okay to do so. However, if the gender marker has not been changed in MilPDS (and ultimately in DEERS), then any official documents such as evaluations, decorations, etc. would use the pronoun associated with the member's gender marker in DEERS.

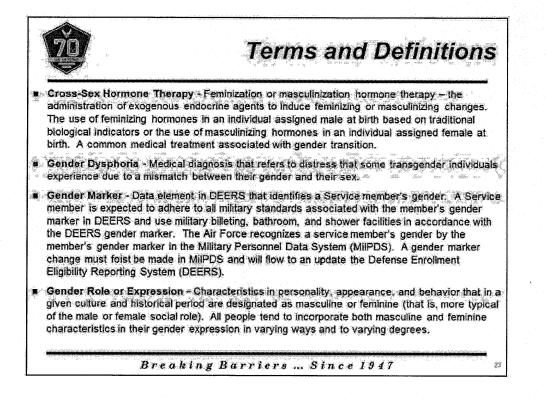
The commander or First Sergeant should discuss this issue with SSgt Smith to see how SSgt Smith would like to be addressed by the unit as well as what the unit should be told. In all cases, fellow Airmen should be treated with dignity and respect.



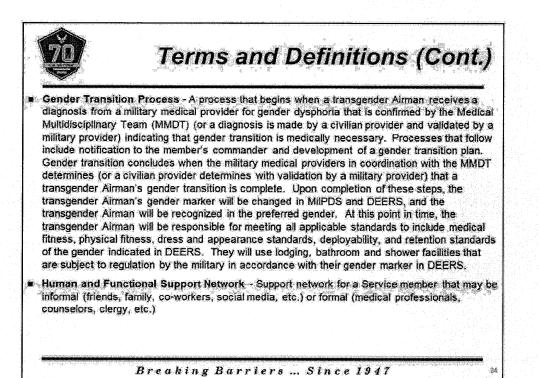
**NARRATION:** Protection of Personally Identifiable Information, Protected Health Information and Personal Privacy Considerations

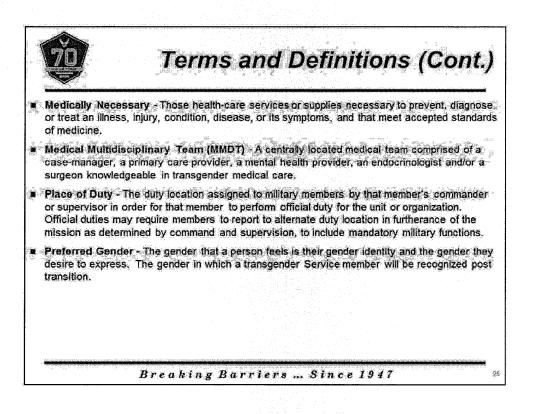
Gender transition is a personal medical issue and members undergoing transition are entitled to the same privacy protections as for any other medical issue. In accordance with DoDD 5400.11, *DoD Privacy Program*, Department of Defense (DoD) personnel and DoD contractors have an affirmative responsibility to protect an individual's privacy when maintaining his or her personally identifiable information (PII). Additionally, disclosure of protected health information will be consistent with DoD 6025.18-R, *DoD Health Information Privacy Regulation*. The Air Force will protect against unwarranted invasions of personal privacy, and commanders may employ reasonable accommodations to respect the privacy interests of all Airmen.

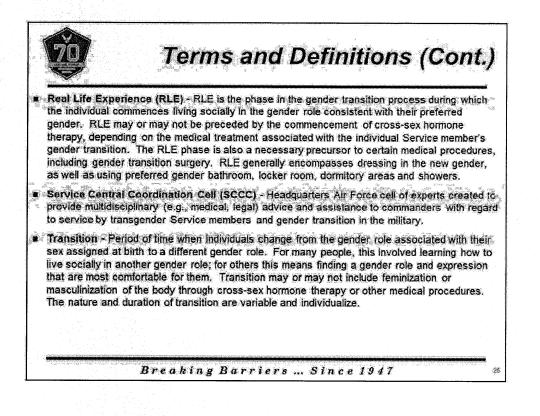




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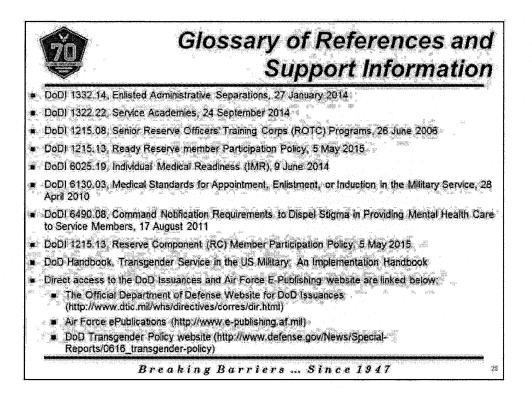






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THE SECRETARY OF THE AIR FORCE CHIEF OF STAFF, UNITED STATES AIR FORCE WASHINGTON DC



AFPM2016-36-01 06 October 2016

### MFMORANDUM FOR DISTRIBUTION C ALMAJCOM-FOA-DRU

### SUBJECT: Air Force Policy Memorandum for In-Service Transition for Airmen Identifying as Transgender

This Air Force Policy Memorandum immediately establishes specific Air Force policy and provides guidance associated with in-service transition of Airmen identifying as transgender. Compliance with this memorandum is mandatory. To the extent the memorandum's directions are inconsistent with other Air Force publications, the information herein prevails, in accordance with AFI 33-360, Publications and Forms Management.

It implements DoD Instruction 1300.28, *In-Service Transition for Transgender Service Members*, 30 June 2016 (effective 1 October 2016), and DoD Directive-Type Memorandum (DTM) 16-005, *Milnary Service of Transgender Service Members*, 30 June 2016.

The policy guidance outlined in this memorandum is effective immediately and will be incorporated into AFI 36-2905, Finess Program; AFI 36-2903, Dress and Personal Appearance of Air Force Personnel: AFI 36-3206, Administrative Discharge Procedures for Commissioned Officers; AFI 36-3208, Administrative Separation of Airmen; AFI 36-3209, Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members: AFI 48-123, Medical Examinations and Standards, and AFI 32-6005, Unaccompanied Housing Management.

There are no releasability restrictions on this publication. It applies to the Regular Air Force, Air Force Reserve, and Air National Guard. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Disposition Schedule (RDS) in the Air Force Records Information Management System (AFRIMS).

This Memorandum becomes void after one year has elapsed from the date of this Memorandum, or upon publishing of a new Policy Directive permanently establishing this policy, whichever is earlier.

Deborah Lee James

Secretary of the Air Force

General, USAF Chief of Staff

Attachments: 1. Transgender Airmen Policy Guidance

2. Glossary of References and Supporting Information

Attachment 1

# TRANSGENDER AIRMEN POLICY GUIDANCE

# 1. Applicability

a. This memorandum provides policy and guidance for all military personnel serving in the United States Air Force, including those serving in the Reserve and Guard components of the Air Force. This guidance provides unit personnel, supervisors, commanders, transgender Airmen and the medical community a construct by which transgender Airmen may transition gender while serving. It further outlines policies for accessing, separating, and retaining transgender Airmen.

b. Policies and procedures are premised on the conclusion that open service by transgender Airmen who are subject to the same standards and procedures as other members of the same gender with regard to their medical fitness for duty, physical fitness, dress and appearance standards, deployability, and retention, is consistent with military service and readiness.

c. Exception to policy (ETP) requests will be made on a case-by-case basis and will be directed to the Service Central Coordination Cell (SCCC) via email at usaf.pentagon.saf-mr.mbx.af-central-coordination-cell@mail.mil for action.

## 2. Policy

a. It is Air Force policy that service in the United States Air Force should be open to all who can meet the rigorous standards for military service and readiness. Consistent with the policies set forth in this memorandum, transgender individuals shall be allowed to serve in the Air Force.

b. The Air Force recognizes a service member's gender by the member's gender marker in the Military Personnel Data System (MilPDS). A gender marker change must first be made in MilPDS and will flow to and update the Defense Enrollment Eligibility Reporting System (DEERS). Coincident with that gender marker, the Air Force applies, and the member is responsible to meet, all standards for uniforms and grooming; fitness; Military Drug Demand Reduction Program (DDRP) participation; and other military standards applied with consideration of the member's gender. Airmen will use lodging, bathroom and shower facilities that are subject to regulation by the military in accordance with their gender marker in DEERS unless provided an approved ETP.

c. All Service members are entitled to equal opportunity in an environment free from sexual harassment and unlawful discrimination on the basis of race, color, national origin, religion, sex, or sexual orientation. It is the Department's position, consistent with the U.S. Attorney General's opinion, that discrimination based on gender identity is a form of sex discrimination. In today's Air Force, people of different moral and religious values work, live and fight together on a daily basis. This is possible because they treat each other with dignity and respect. Airmen will continue to respect and serve with others who may hold different views and beliefs.

d. Any medical care and treatment provided to a transgender Airman in the process of gender transition will be provided in the same manner as other medical care and treatment. Nothing in

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this memorandum will be construed to authorize a commander to deny medically necessary treatment to a transgender Airman or authorize elective care not consistent with other medical protocols.

e. Any determination that a transgender Airman is non-deployable at any time will be consistent with established Air Force standards, as applied to other Airmen whose deployability is similarly affected in comparable circumstances unrelated to gender transition.

f. Commanders will assess expected impacts on mission and readiness after consideration of the advice of military medical providers and will address such impacts in accordance with this memorandum. In applying the tools described in this memorandum, a commander will not accommodate biases against transgender Airmen.

g. If a transgender Airman is unable to meet standards or requires an ETP during a period of gender transition, all applicable tools, including the tools described in this memorandum and those presented in Directive-Type Memorandum (DTM) 16-005, *Military Service of Transgender Service Members*; Department of Defense Instruction (DoDI) 1300.28, *In-Service Transition for Transgender Service Members*; and Department of Defense (DoD) Handbook, *Transgender Service in the US Military: An Implementation Handbook*, will be available to commanders to minimize impacts to the mission and unit readiness.

h. When a military medical provider in coordination with the Medical Multidisciplinary Team (MMDT) determines that a transgender Airman's gender transition is complete (or when a civilian provider does so with validation by a military provider and coordination with the MMDT), and on a date approved by the commander, the service member's gender marker will be changed in MilPDS and the service member will be recognized in the preferred gender.

### 3. Separation and Retention

a. Effective June 30, 2016, no otherwise qualified Airman may be involuntarily separated, discharged or denied reenlistment or continuation of service solely on the basis of their gender identity.

b. Transgender Airmen will be subject to the same standards as any other service member of the same gender; they may be separated, discharged, or denied reenlistment or continuation of service under existing processes and bases, but not due solely to their gender identity or an expressed intent to transition genders.

c. An Airman whose ability to serve is adversely affected by a medical condition or medical treatment related to their gender identity should be administratively processed, for purposes of separation and retention, in a manner consistent with other Airmen whose ability to serve is similarly affected.

### 4. Accessions Standards

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a. Medical standards for accession into the Military Services help to ensure that those entering service are free of medical conditions or physical defects that may require excessive time lost from duty. Per DTM 16-005, not later than 1 July 2017, the Under Secretary of Defense (Personnel & Readiness) (USD (P&R)) will update Department of Defense Instruction (DoDI) 6130.03, *Medical Standards for Appointment, Enlistment, or Induction in the Military Services*, to reflect the following policies and procedures:

(1) A history of gender dysphoria is disqualifying, **unless**, as certified by a licensed medical provider, the applicant has been stable without clinically significant distress or impairment in social, occupational, or other important areas of functioning for 18 months.

(2) A history of medical treatment associated with gender transition is disqualifying, **unless**, as certified by a licensed medical provider:

(a) the applicant has completed all medical treatment associated with the applicant's gender transition;

(b) the applicant has been stable in the preferred gender for 18 months; and

(c) if the applicant is presently receiving cross-sex hormone therapy post-gender transition, the individual has been stable on such hormones for 18 months.

b. A history of sex reassignment or genital reconstruction surgery is disqualifying, **unless**, as certified by a licensed medical provider:

(1) a period of 18 months has elapsed since the date of the most recent surgery; and

(2) no functional limitations or complications persist, nor is any additional surgery required.

c. The Secretary of the Air Force may waive or reduce the 18-month periods, in whole or in part, in individual cases for applicable reasons.

d. The standards for accession described in DTM 16-005 will be reviewed no later than 24 months from the effective date of the memorandum and may be maintained or changed, as appropriate, to reflect applicable medical standards and clinical practice guidelines, ensure consistency with military readiness, and promote effectiveness in the recruiting and retention policies and procedures of the Armed Forces.

# 4.1. Initial Entry Training

An Airman is subject to separation in an entry-level status during the period of initial training (defined as 180 days per DoDI 1332.14, *Enlisted Administrative Separations*) based on a medical condition that impairs the Airman's ability to complete such training.

# 4.2. Pre-Commissioning Sources (AFROTC and USAFA)

An individual participant is subject to separation from the Reserve Officers' Training Corps (ROTC) in accordance with DoDI 1215.08, *Senior Reserve Officers' Training Corps (ROTC) Programs*, or from the United States Air Force Academy (USAFA) IAW DoDI 1322.22, *Service Academies*, based on a medical condition that impairs the individual's ability to complete such training or to access into the Air Force, under the same terms and conditions applicable to participants in comparable circumstances not related to transgender persons or gender transition. As with all cadets who experience a medical condition while in the ROTC Program or USAFA, each situation is unique and will be evaluated based on the individual circumstances. Individuals are required, however, to meet medical accession standards as a prerequisite to appointment in the Armed Forces.

**5. In-Service Transition:** Gender transition while serving in the military presents unique challenges associated with addressing the needs of the Airman in a manner consistent with military mission and readiness. Where possible, gender transition should be conducted such that an Airman would meet all applicable standards and be available for world wide deployment in the birth gender prior to a change in the member's gender marker in MilPDS and would meet all applicable for duty in the preferred gender after the change in gender marker. Recognizing, however, that every transition is unique, with some requiring Real-Life Experience (RLE) in the preferred gender prior to a change of gender marker in MilPDS, the policies and procedures set forth herein provide flexibility to commanders in addressing transitions that may or may not follow this construct.

### 5.1. Medical

a. In accordance with DoDI 6025.19, *Individual Medical Readiness (IMR)*, and DoDI1215.13, *Ready Reserve Member Participation Policy*, all Airmen have a responsibility to maintain their health and fitness, meet individual medical readiness requirements, and report to their chain of command any medical and health issue (including mental health) that may affect their readiness to deploy or fitness to continue serving in an active status.

b. All Airmen, regardless of status and as a condition of continued participation in military service, will report significant health information to their chain of command. Airmen who have or have had a medical condition that may limit their performance of official duties must consult with a military medical provider concerning their diagnosis and proposed treatment, and must notify their commanders.

c. When an Airman receives a diagnosis from a military medical provider (or a diagnosis made by a civilian provider and validated by a military provider) indicating that gender transition is medically necessary, the member's notification to the commander must identify all medically necessary care and treatment that is part of the Airman's medical treatment plan and a projected schedule for such treatment, including an estimated date for a change in the member's gender marker in MilPDS,.

d. When an Airman receives a diagnosis from a military medical provider, (or a diagnosis made by a civilian provider and validated by a military provider) indicating that gender transition is medically necessary for an Airman, it will be confirmed by the Medical Multidisciplinary Team

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(MMDT). Recommendations from the military medical provider in coordination with the MMDT will address the severity of the transgender Airman's medical condition and the urgency of any proposed medical treatment. Medical advice to commanders will be provided in a manner consistent with processes used for other medical conditions that may limit a transgender Airman's performance of official duties.

- (1) Air Force Reserve (AFR) members (ARTs, TRs, and IMAs) must provide their supporting medical unit (Reserve Medical Unit (RMU) or Active Duty Medical Treatment Facility) all civilian medical and mental health documentation for review. The RMU or Active Duty Medical Treatment Facility will apply Code 31 and may request a Participation Waiver from AFRC/SGO. The RMU or Active Duty Medical Treatment Facility will forward all cases to AFRC/SGO for review. AFRC/SGO will forward all cases to the Active Duty (AD) MMDT to validate civilian diagnosis, treatment plan and to determine when transition is complete. AFRC medical providers do not validate diagnoses or provide treatment plans. After review of the case, the MMDT will advise the RMU or Active Duty Medical Treatment Facility on all future appropriate duty, fitness and deployment restrictions. AFR members on AGR tours will follow the same policies and procedures as RegAF members.
- (2) ANG Airmen must provide their appropriate Guard Medical Unit (GMU) all required medical and mental health documents for review. The GMU shall forward the medical cases to NGB/SG for clinical and administrative review for appropriate case disposition. NGB/SG may forward cases to the AD MMDT for final endorsement and determine the prescribed transition treatment plan. All AGR Title 10 members will follow the same policies and procedures as RegAF members.

e. Continued Medical Care. A military medical provider in coordination with the MMDT (or a civilian medical provider validated by a military medical provider) may determine certain medical care and treatment to be medically necessary even after an Airman's gender marker is changed in MilPDS (e.g., cross-sex hormone therapy). A gender marker change does not preclude such care and treatment.

f. The MMDT will serve as the POC and consultant to all Military Treatment Facilities (MTFs) and commanders with any questions relating to medical concerns which may arise as part of a transgender Airmen's gender transition. The MMDT may be contacted at transgender.mmdt@us.af.mil.

### 5.2. Requesting Transition

a. A transgender Airman must receive a diagnosis from a military medical provider that is confirmed by the MMDT (or a diagnosis made by a civilian provider and validated by a military provider) indicating that gender transition is medically necessary. This is followed by notification to the Airman's unit commander and the development of a gender transition plan (transition plan will include timing, as approved by the commander in consultation with the transgender Airman and military medical personnel).

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b. Gender transition concludes when the military medical provider in coordination with the MMDT reports to the Commander (or a civilian provider determines with validation by a military provider) that a transgender Airman's gender transition is complete, and the member is able to present appropriate legal documentation supporting a gender change. Such documentation consists of either a certified true copy of a state birth certificate reflecting the member's preferred gender, a certified true copy of a court order reflecting the member's preferred gender, or a United States passport reflecting the member's preferred gender. Upon submission of the commander's written approval and required legal documentation to the appropriate personnel servicing activity, the change in the Airman's gender marker will be entered in MilPDS and transmitted to and updated in DEERS, under the authority, direction, and control of the Defense Manpower Data Center (DMDC). When the MilPDS update is complete, the Airman will be recognized in the preferred gender. At this point in time, the Airman will be responsible for meeting all applicable standards to include medical fitness, physical fitness, dress and appearance, deployability, and retention standards of the gender indicated in MilPDS. They will also use military lodging, bathroom, and shower facilities associated with the gender indicated in MilPDS.

# 5.3. Developing a Gender Transition Plan and Approval Process

a. When an Airman is diagnosed that gender transition is medically necessary and is confirmed by MMDT (or a diagnosis is made by a civilian provider and validated by a military provider and the MMDT), the Airman may, in consultation with the military medical provider and at the appropriate time, request that the commander approve:

- (1) the timing of medical treatment associated with gender transition;
- (2) an ETP associated with gender transition, consistent with guidance in this memorandum and/or
- (3) a change to the Airman's gender marker in MilPDS

b. The commander, informed by the recommendations of the military medical provider and the MMDT (or the recommendations of a civilian provider validated by a military provider and the MMDT), the SCCC, and others as appropriate, will respond to the request within a framework that ensures readiness by minimizing impacts to the mission (including deployment, operational, training, exercise schedules, and critical skills availability), as well as to the morale and welfare and good order and discipline of the command.

c. Consistent with applicable law, regulation, and policy, the commander will:

- (1) comply with the provisions of this issuance, and with Air Force regulations, policies, and guidance, and consult with the SCCC.
- (2) promptly respond to any request for medical care, as identified by the military medical provider, and ensure that such care is provided consistent with applicable regulations.

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- (3) respond to any request for medical treatment or an ETP associated with gender transition as soon as practicable, but not later than 90 calendar days after receiving a request determined to be complete in accordance with the provisions of this issuance and Air Force regulations, policies, and guidance. The response will be in writing; include notice of any actions taken by the commander in accordance with applicable regulations, policies, and guidance and the provisions of this issuance; and will be provided to both the Airman and their military medical provider. A request that the commander determines to be incomplete will be returned to the Airman, with written notice of the deficiencies identified, as soon as practicable, but not later than 30 calendar days after receipt. (NOTE: Commanders of Traditional Reservists or Drill Status Guardsmen must return incomplete requests to the Airman NLT 60 calendar days after receipt.)
- (4) at any time prior to the change of the transgender Airman's gender marker in MilPDS, the commander may modify a previously approved approach to, or an ETP associated with, gender transition. A determination that modification is necessary and appropriate will be made in accordance with the procedures in this memorandum and upon review and consideration of all other factors prescribed in this memorandum. Notice of such modification will be provided to the Airman.
- (5) approve, in writing, the change of a transgender Airman's gender marker in MilPDS, subsequent to receiving a recommendation from the military medical provider and the MMDT (or upon the recommendation of a civilian provider validated by a military provider and the MMDT) that the Airman's gender marker be changed and upon receipt of appropriate legal documentation supporting a gender change. Such documentation consists of either a certified true copy of a state birth certificate reflecting the member's preferred gender, a certified true copy of a court order reflecting the member's preferred gender, or a United States passport reflecting the member's preferred gender. Upon submission of the commander's written approval and required legal documentation to the appropriate personnel servicing activity, the change in the Airman's gender marker will be entered in MilPDS and transmitted to and updated in DEERS, under the authority, direction, and control of the Defense Manpower Data Center (DMDC).

### 5.4. Considerations for Transitioning Airmen

In cases where transgender Airmen may require accommodation in regard to military dress and appearance standards, fitness standards, or to use the designated facilities of their preferred gender, Airmen should submit an ETP to their unit commander (see attachment 2).

a. Fitness. Transgender Airmen undergoing cross-sex hormone treatment may request an exemption from taking the Fitness Assessment (FA) during their period of transition, prior to a gender marker change in MilPDS, by following the processes below. Members must submit their initial request to their unit commander or equivalent.

(1) In order to obtain a FA exemption, the member must provide evidence of a documented FA failure and their commander must certify the Airman made a full and clear effort to meet the FA standards of their current gender. In addition, members must provide documentation from their military medical provider

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validating ongoing cross-sex hormone treatment as part of a gender transition plan.

- (2) An Airman's commander must concur or non-concur on the request and forward the request through their chain of command (squadron CC, wing CC, MAJCOM A1 or equivalents) for further review and concurrence/non-concurrence. The MAJCOM A1 or equivalent will submit the request to the SCCC, for decision by the AF/A1. If the fitness exemption is approved by AF/A1, the owning unit will execute the exemption using the commander's composite exemption as found in AFI 36-2905, *Fitness Program*. Unit Fitness Program Managers (UFPM) will document the exemption in the Air Force Fitness Management System (AFFMS) II. Initial FA exemptions will be for a period of 6 months. To receive a new exemption, the Airman will provide the previously approved FA exemption memo and updated medical documentation showing proof of continued cross-sex hormone treatment to their unit commander, who may approve or deny any additional exemptions.
- (3) Transgender Airmen who receive a fitness exemption will be expected to maintain a healthy lifestyle, participate in unit physical fitness, and work with their unit commander to ensure they are maintaining an active fitness regimen. Members are ultimately responsible for maintaining a healthy lifestyle which incorporates fitness. Unit commanders may use current Air Force Fitness Improvement Program options, such as BE WELL online, a Healthy Weight program, or Military OneSource Health Coaching to assist in formally monitoring members' fitness levels. Transgender Airmen should provide their unit commander a Fitness Maintenance Plan to ensure they have a verifiable plan to remain physically fit during their gender transition.
- (4) The FA exemption will apply at the current duty station and future duty locations.
- b. Dress and Appearance
  - (1) Current AF dress and appearance standards apply to male and female transgender Airmen. AF1 36-2903, Dress and Personal Appearance of Air Force Personnel, allows Exception to Policy (ETP) requests to current dress and appearance standards. AF/A1 is the approval authority for ETP requests.
  - (2) Transgender Airmen must adhere to applicable dress and appearance standards of the gender reflected in MilPDS. However, altered physical characteristics during gender transition may make dress and appearance standard changes appropriate prior to gender marker changes in MilPDS. Therefore, transgender Airmen may submit an ETP request IAW AFI 36-2903 to adhere to their preferred gender's dress and appearance standards prior to their official gender marker change in MilPDS. Until an ETP request has been approved, transgender Airmen must adhere to their current gender's dress and appearance standards as reflected in MilPDS. The request will require supporting justification, an assessment by their immediate commander, and

further recommendations by their chain of command, installation commander, and MAJCOM A1 before an AF/A1 decision.

- (3) ETP requests will include:
  - a) a memorandum from the Airman requesting to adhere to the preferred gender's dress and appearance standards,
  - b) evidence of a medical diagnosis of gender dysphoria from a military medical provider confirmed by the MMDT (or the diagnosis of a civilian provider validated by a military provider and the MMDT), and
  - c) documentation that confirms the ETP request is a component of the Airman's gender transition plan.
- (4) Commanders' assessment of dress and appearance issues for transitioning Airmen should include information about the Airman's professional military image in current and preferred gender's dress and appearance standards, fit and/or function of the uniforms, and potential impact on unit cohesion, good order and discipline (if any). The transgender Airman's immediate commander will recommend approval or disapproval and forward the request through their chain of command to the wing and/or installation commander as applicable for further recommendations. Wing and/or installation commanders will forward the request to the MAJCOM A1 for endorsement and forwarding to the SCCC to gain AF/A1's decision. If approved, the ETP will apply to both the wear of the preferred gender's dress and appearance standards at current and subsequent duty stations. Transgender Airmen approved for an ETP prior to gender marker change must ensure a copy of the approval memorandum is placed in their automated personnel records by visiting their local Military Personnel Section (MPS), Customer Service office. They must also carry a copy of their approval memorandum on their person until gender marker is changed in MilPDS.

Note: This guidance also applies to Air Reserve Technicians who are required to wear the military uniform while performing civilian duties as an Air Reserve Technician (ART) IAW AFI 36-801, Uniforms for Civilian Employees. Air Reserve Technicians must adhere to applicable dress and appearance standards IAW AFI 36-2903, Dress and Personal Appearance of Air Force Personnel, of the gender reflected in their military personnel record until the ETP request has been approved by AF/A1.

(5) All dress and appearance standards ETP requests must be submitted to SCCC NLT 20 calendar days for cases within CONUS and 30 calendar days for cases OCONUS from the date a transgender Airman submits the request to their immediate commander. (NOTE: Commanders of transgender Traditional Reserve or Drill Status Guardsmen must submit their dress and appearance ETP requests to the SCCC NLT 45 calendar days from the date the Airman submits the request to their immediate commander within CONUS and 60 calendar days for cases OCONUS.)

- (6) The dress and appearance exemption will apply at the current duty station and future duty stations.
- c. Facilities
  - (1) An Airman undergoing gender transition may request an ETP waiver to use facilities subject to regulation by the military in accordance with their preferred gender prior to a gender marker change in DEERS. The Airman's chain of command (unit CC, group CC, wing CC, or equivalents and applicable MAJCOM functionals) will provide concurrence/non-concurrence with the ETP request in addition to evidence that a military medical provider in coordination with the MMDT (or a civilian medical provider validated by a military medical provider in coordination with the MMDT) has confirmed a diagnosis of gender dysphoria and that the ETP request is a component of the member's gender transition plan.
  - (2) In executing any accommodation, the unit commander will take into account the physical construction of the facilities as well as the privacy of other members using the facilities in question. The unit commander should consider and balance the needs of the transgender individual and the needs of the command. The installation should explore no-cost facility options. No-cost options may include, but are not limited to, allowing the transgender member to use any family style restroom/shower area, providing additional time for the member to use the privacy of their domicile, or mandating wear of minimal articles of clothing for all.
  - (3) AFI 32-6005, Unaccompanied Housing Management, discusses quarters assignment. Currently, Airmen are assigned to quarters based on the gender reflected in the DEERS, consistent with policy in DoDI 1300.28. Any exceptions should be made consistent with the previous two paragraphs. Until an ETP is approved or gender is updated in DEERS, the transgender Airman will use the facilities associated with their gender marker in DEERS.

### d. Deployment

Transgender Airmen selected for deployment will not be prevented from deploying if they are medically qualified. Any approved exceptions to policy regarding accommodation during transition should be coordinated with the deployed commander to ensure knowledge of transition and any potential accommodations required for the deployed environment.

### e. For ARC Members

To the greatest extent possible, commanders and transgender Airmen will address periods of non-availability for any period of military duty, paid or unpaid, during the transgender Airman's gender transition with a view of mitigating unsatisfactory participation in accordance with DoDI 1215.13, *Reserve Component (RC) Member Participation Policy*, and DoDI 1300.28, *In-Service Transition for Transgender Service Members*.

# 6. Completion of Transition

a. In consultation with the transgender Airman, the military medical provider will formally advise the commander when the Airman's gender transition is complete, and recommend to the commander a time at which the Airman's gender marker may be changed in MilPDS.

b. When a transgender Airman has completed transition, they should take official documentation to their MPS to update their gender in MilPDS. Official documentation includes authorization from the Airman's unit commander and military medical provider to change the Airman's gender marker. In addition, the Airman must provide appropriate legal documentation supporting gender change to the MPS. Legal documentation must be either a certified true copy of a state birth certificate reflecting the transgender Airman's preferred gender, a certified true copy of a court order reflecting the transgender Airman's preferred gender, or a United States passport reflecting the transgender Airman's preferred gender. There will be no direct update in DEERS; the gender marker in MilPDS is what will update the DEERS system. A new Common Access Card (CAC) will be issued to reflect the updated gender data. ARTs are required to update their gender marker in MilPDS and DCPDS, as there is no integration between the two systems (with the exception of data reporting to DEERS from MilPDS and DCPDS).

### 7. Post Transition

Coincident with the gender marker change, except as noted below, the Air Force will apply, and the transgender Airman is responsible to meet, all standards for uniforms and grooming; fitness; DDRP participation; and, other military standards applied with consideration of their gender. Transgender Airmen will use military lodging, bathrooms and shower facilities associated with their gender marker in MilPDS.

Any determination that a transgender Airman is non-deployable at any time will be consistent with established Air Force standards, as applied to other Airmen whose deployability is similarly affected in comparable circumstances unrelated to gender transition.

A military medical provider may determine certain medical care and treatment to be medically necessary, even after a transgender Airman's gender marker is changed in MilPDS (e.g. crosssex hormone therapy)

<u>Protection of Personally Identifiable Information (PII) and Protected Health Information</u> In accordance with DoDD 5400.11, *DoD Privacy Program*, in cases in which there is a need to collect, use, maintain, or disseminate PII in furtherance of this memorandum or Air Force regulations, policies, or guidance, the Air Force will protect against unwarranted invasions of personal privacy and the unauthorized disclosure of such PII. The Air Force will maintain PII so as to protect individual's rights, consistent with federal law, regulation, and policy. Disclosure of protected health information will be consistent with DoD 6025.18-R, DoD Health Information Privacy Regulation.

Personal Privacy Considerations. A commander may employ reasonable accommodations to respect the privacy interests of Airmen.

Attachment 2

### **GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION**

## References

DTM 16-005, Military Service of Transgender Service Members, 30 June 2016

DoD 6025.18-R, DoD Health Information Privacy Regulation, 24 January 2003

DoDD 5400.11, DoD Privacy Program, 29 October 2014

DoDI 1300.28, In-Service transition for Transgender Service Members, 1 July 2016

DoDI 1332.14, Enlisted Administrative Separations, 27 January 2014

DoDI 1322.22, Service Academies, 24 September 2015

DoDI 1215.08, Senior Reserve Officers' Training Corps (ROTC) Programs, 26 June 2006

DoDI 1215.13, Ready Reserve Member Participation Policy, 5 May 2015

DoDI 6025.19, Individual Medical Readiness (IMR), 9 June 2014

DoDI 6130.03, Medical Standards for Appointment, Enlistment, or Induction in the Military Service, 28 April 2010

DoDI 6490.08, Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members, 17 August 2011

DoDI 1215.13, Reserve Component (RC) Member Participation Policy, 5 May 2015

DoD Handbook, Transgender Service in the US Military: An Implementation Handbook

AFI 32-6005, Unaccompanied Housing Management, 29 January 2016

AFI 36-2903, Dress and Personal Appearance of Air Force Personnel, 18 July 2011

AFI 36-2905, Fitness Program, 21 October 2013

AFI 36-801, Uniforms for Civilian Employees, 22 December 2015

AFI 90-507, Military Drug Demand Reduction Program, 22 September 2014

### Abbreviations and Acronyms

AD - Active Duty AFFMS II - Air Force Fitness Management System II AFR-Air Force Reserve AFRC—Air Force Reserve Command AFSC - Air Force Specialty Code AGR-Active Guard Reserve ANG-Air National Guard ART—Air Reserve Technician CAC - Common Access Card CONUS-Continental United States DDRP-Drug Demand Reduction Program DEERS - Defense Enrollment Eligibility Reporting System DoDI - Department of Defense Instruction DMDC - Defense Manpower Data Center DTM-Directive-Type Memorandum ETP - Exception to Policy FA - Fitness Assessment GMU-Guard Medical Unit HIPAA-Health Insurance Portability and Accountability Act MilPDS-Military Personnel Data System MMDT - Medical Multidisciplinary Team MTF -- Military Treatment Facility OCONUS-Outside the Continental United States PII - Personally Identifiable Information RLE - Real Life Experience RMU-Reserve Medical Unit ROTC - Reserve Officer Training Corps SCCC - Service Central Coordination Cell UFPM - Unit Fitness Program Manager USD(P&R)-Under Secretary of Defense (Personnel & Readiness) UTC - Unit Type Code

### Terms

**Cross-Sex Hormone Therapy**—Feminizing or masculinizing hormone therapy—the administration of exogenous endocrine agents to induce feminizing or masculinizing changes. The use of feminizing hormones in an individual assigned male at birth based on traditional biological indicators or the use of masculinizing hormones in an individual assigned female at birth. A common medical treatment associated with gender transition.

**Emergency Medical Care**—The care needed to diagnose and treat a medical condition without which the recipient's death or permanent impairment is likely to result.

Gender Dysphoria—Medical diagnosis that refers to distress that some transgender individuals experience due to a mismatch between their gender and their sex.

Gender Marker—Data element in DEERS that identifies a Service member's gender. A Service member is expected to adhere to all military standards associated with the member's gender marker in DEERS and use military billeting, bathroom, and shower facilities in accordance with the DEERS gender marker. The Air Force recognizes a service member's gender by the member's gender marker in the Military Personnel Data System (MilPDS). A gender marker change must first be made in MilPDS and will flow to and update the Defense Enrollment Eligibility Reporting System (DEERS).

**Gender Role or Expression**—Characteristics in personality, appearance, and behavior that in a given culture and historical period are designated as masculine or feminine (that is, more typical of the male or female social role). All people tend to incorporate both masculine and feminine characteristics in their gender expression in varying ways and to varying degrees.

**Gender Transition Process**—A process that begins when a transgender Airman receives a diagnosis from a military medical provider for gender dysphoria that is confirmed by the MMDT (or a diagnosis is made by a civilian provider and validated by a military provider) indicating that gender transition is medically necessary. Processes that follow include notification to the member's commander and development of a gender transition plan. Gender transition concludes when the military medical provider in coordination with the MMDT determines (or a civilian provider determines with validation by a military provider) that a transgender Airman's gender transition is complete. Upon completion of these steps, the transgender Airman's gender marker will be changed in MilPDS and DEERS, and the transgender Airman will be recognized in the preferred gender. At this point in time, the transgender Airman will be responsible for meeting all applicable standards to include medical fitness, physical fitness, dress and appearance standards, deployability, and retention standards of the gender indicated in DEERS. They will use lodging, bathroom and shower facilities that are subject to regulation by the military in accordance with their gender marker in DEERS.

Human and Functional Support Network—Support network for a Service member that may be informal (friends, family, co-workers, social media, etc.) or formal (medical professionals, counselors, clergy, etc.).

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**Medically Necessary**—Those health-care services or supplies necessary to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms, and that meet accepted standards of medicine.

**Medical Multidisciplinary Team**—A centrally located medical team comprised of a case manager, a mental health provider, an endocrinologist and/or a surgeon knowledgeable in transgender medical care.

**Non-Urgent Medical Care**—The care required to diagnose and treat problems that are not life or limb threatening or that do not require immediate attention.

**Place of Duty**—The duty location assigned to military members by that member's commander or supervisor in order for that member to perform official duty for the unit or organization. Official duties may require members to report to alternate duty location in furtherance of the mission as determined by command and supervision, to include mandatory military functions.

**Preferred gender**—The gender that a person feels is their gender identity and the gender they desire to express. The gender in which a transgender Service member will be recognized post-transition.

**Real Life Experience (RLE)**—RLE is the phase in the gender transition process during which the individual commences living socially in the gender role consistent with their preferred gender. RLE may or may not be preceded by the commencement of cross-sex hormone therapy, depending on the medical treatment associated with the individual Service member's gender transition. The RLE phase is also a necessary precursor to certain medical procedures, including gender transition surgery. RLE generally encompasses dressing in the new gender, as well as using preferred gender bathroom, locker room, dormitory areas and showers.

Service Central Coordination Cell (SCCC)—Headquarters Air Force cell of experts created to provide multi-disciplinary (e.g., medical, legal) advice and assistance to commanders with regard to service by transgender Service members and gender transition in the military.

**Transition**—Period of time when individuals change from the gender role associated with their sex assigned at birth to a different gender role. For many people, this involves learning how to live socially in another gender role; for others this means finding a gender role and expression that are most comfortable for them. Transition may or may not include feminization or masculinization of the body through cross-sex hormone therapy or other medical procedures. The nature and duration of transition are variable and individualized.

**Urgent medical care**—The care needed to diagnose and treat serious or acute medical conditions that pose no immediate threat to life and health, but require medical attention within 24 hours.

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### SAMPLE: Exception to Policy (ETP) Request Memorandum

(Date)

### MEMORANDUM FOR [Grade/Name of Immediate Commander]

FROM: [Grade, Name of Requester]

SUBJECT: Exception to Policy (ETP) to [military dress and appearance standards, use of designated facilities, and/or fitness standards]

1. I am a transgender [female/male] Airman in the process of gender transition. Therefore, I request an ETP to allow me to adhere to the requirements of the [insert preferred gender] gender with regard to [dress and appearance and/or use of lodging, bathroom, and shower facilities that are subject to regulation by the military] pending my gender marker change in the Defense Enrollment Eligibility Reporting System (DEERS) [AND/OR for exemption from my current gender Fitness Assessment standards while undergoing cross-sex hormone therapy pending a gender marker change in DEERS].

### 2. I have enclosed:

a. Medical diagnosis from a military medical provider (or a diagnosis made by a civilian provider and validated by a military provider) in consultation with the Medical Multidisciplinary Team (MMDT) that states gender transition is medically necessary.

b. Military medical provider confirmation validating ongoing cross-sex hormone treatment as part of my transition to the [insert preferred gender] gender. [If applicable]

c. DD Form 2870, *Authorization for Disclosure of Medical or Dental Information*, with Section II, number 6 filled out to state that my patient information will be released to my Unit Commander (Name, Rank, Duty Title, Unit Name) and servicing Military Personnel Support (MPS).

d. Fitness Assessment (FA) score card documenting a failure and evidence that I have made a clear effort to meet the FA standards of my current gender. [If applicable]

e. Documentation confirming the ETP request is a component of the Airman's gender transition plan. [Note this applies only if the ETP request is for dress and appearance and/or use of lodging, bathroom, and shower facilities that are subject to regulation by the military].

3. The point of contact for this memorandum is the undersigned at (insert telephone number and email address).

### SERVICE MEMBER SIGNATURE BLOCK

### Attachments

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                  UNITED STATES DISTRICT COURT
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                  FOR THE DISTRICT OF COLUMBIA
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     JANE DOE 1, JANE DOE 2,
                              ) Civil Action
     JANE DOE 3, JANE DOE 4, ) No. 17-cv-1597 (CKK)
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     JANE DOE 5, JOHN DOE 1,
                                   )
     REGAN V. KIBBY, and
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     DYLAN KOHERE,
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                    Plaintiffs,
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               v.
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     DONALD J. TRUMP, in his
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     official capacity as
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     President of the
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     United States; et al.,
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                    Defendants.
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                     Tuesday, April 17, 2018
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          Deposition of COL. MARY KRUEGER, M.D., taken at
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     the offices of Foley Hoag LLP, 1717 K Street NW,
     Washington, D.C., beginning at 9:11 a.m., before
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     Nancy J. Martin, a Registered Merit Reporter,
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     Certified Shorthand Reporter.
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Page 2 UNITED STATES DISTRICT COURT 1 2 FOR THE DISTRICT OF COLUMBIA 3 Civil Case No. 17-cv-1597 (CKK) 4 JANE DOE 1, JANE DOE 2, JANE DOE 3, ) 5 JANE DOE 4, JANE DOE 5, JOHN DOE 1, ) REGAN V. KIBBY, and DYLAN KOHERE, ) 6 ) Plaintiffs, 7 v. 8 DONALD J. TRUMP, in his official ) capacity as President of the 9 ) United States; JAMES N. MATTIS, in his ) 10 official capacity as Secretary of ) Defense; JOSEPH F. DUNFORD, JR., ) 11 in his official capacity as Chairman ) of the Joint Chiefs of Staff; ) 12 the UNITED STATES DEPARTMENT OF ) THE ARMY; MARK T. ESPER, in his ) 13 official capacity as Secretary of the ) Army; the UNITED STATES DEPARTMENT OF ) THE NAVY; RICHARD V. SPENCER, in his 14 ) official capacity as Secretary of the ) 15 Navy; the UNITED STATES DEPARTMENT OF ) THE AIR FORCE; HEATHER A. WILSON, in ) 16 her official capacity as Secretary of ) the Air Force; the UNITED STATES ) 17 COAST GUARD; KIRSTJEN NIELSEN, in her ) official capacity as Secretary of ) 18 Homeland Security; the DEFENSE HEALTH ) AGENCY; RAQUEL C. BONO, in her official ) 19 capacity as Director of the Defense ) Health Agency; and the ) 20 UNITED STATES OF AMERICA, ) ) 21 Defendants. ) 22 23 24 25

Page 3 1 APPEARANCES: 2 FOLEY HOAG LLP 3 BY: CLAIRE LAPORTE, ATTORNEY AT LAW TRACY ROOSEVELT, ATTORNEY AT LAW 4 1717 K Street NW Washington, D.C. 20006 (202) 223-1200 5 claporte@foleyhoag.com 6 troosevelt@foleyhoag.com Representing Plaintiffs 7 -AND-8 GLAD LEGAL ADVOCATES & DEFENDERS 9 JENNIFER LEVI, ATTORNEY AT LAW BY: 30 Winter Street 10 Suite 800 Boston, Massachusetts 02108 11 (617) 426-1350 Representing Plaintiffs 12 13 LATHAM & WATKINS LLP BY: HARRISON WHITE, ESQ. (VIA TELECON) 14 355 South Grand Avenue Los Angeles, California 90071 15 (213) 485-1234 harrison.white@lw.com 16 Representing Plaintiffs 17 18 19 Appearances continued on page 3 20 21 22 23 24 25

Page 4 1 A P P E A R A N C E S : (CONTINUED)2 3 U.S. DEPARTMENT OF JUSTICE CIVIL DIVISION 4 BY: COURTNEY ENLOW, ATTORNEY AT LAW MATTHEW SKURNIK, ESQ. 5 20 Massachusetts Avenue N.W. Washington, D.C. 20001 6 (202) 514-4336 courtney.d.enlow@usdoj.gov 7 matthew.skurnik@usdoj.gov For the Defendants 8 -AND-9 U.S. ARMY LEGAL SERVICES AGENCY 10 BY: MAJOR W. CASEY BIGGERSTAFF, ESQ. 11 9275 Gunston Road Suite 3018 12 Fort Belvoir, Virginia 22060 (703) 693-1040 13 william.c.biggerstaff.mil@mail.mil For U.S. Army 14 15 16 17 18 19 20 21 22 23 24 25

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1	open service policy?
2	A. Yes.
3	Q. How many people in the Army received training
4	on the open service policy?
5	A. The last number I saw was I don't have a
6	number for you, but the last number I saw was
7	99.3 percent.
8	Q. Of all Army personnel?
9	A. Of all Army personnel.
10	Q. So that's more than a million people, I
11	assume?
12	A. That's what the personnel folks would
13	calculate. I remember seeing that percentage last.
14	Q. Okay. Thank you.
15	At some point in 2017, were you involved in a
16	project to collect some information for the Secretary
17	of Defense from transgender service members?
18	A. So I'm familiar with what you're talking
19	about. So you recall that OSD group I mentioned that
20	worked on accessions policy
21	Q. Which one?
22	A earlier.
23	The one that we mentioned was in 2017. There
24	was an OSD group that was working on accessions policy
25	led by Lieutenant Colonel Aaron Wellman.

Page 156 1 numbers. 2 Ο. Did MEDPERS ultimately come up with a 3 recommendation about surgical procedures that should not be resourced from DoD or DHS funding? 4 5 Α. I don't recall a specific recommendation on 6 that. 7 Did you -- do you recall considering Q. 8 different alternative options for that? And that's 9 just a "yes" or "no" question. 10 Can you clarify? Different options for as Α. 11 far as forms of funding types of surgeries. 12 Well, specifically, different possible Ο. 13 answers to the issue of what specific surgical 14 procedures should not be resourced from DoD or DHS 15 funding. 16 Yes, I recall consideration of that. Α. 17 And was that in a MEDPERS meeting? Ο. I can't recall. 18 Α. 19 Who was present when that was under Ο. 20 consideration? 21 I don't recall. I mean I know that there's Α. 22 been discussions of what would be funded and what 23 wouldn't be funded. I don't recall the specific 24 setting. 25 0. Do you recall a decision being made about a

Page 157 1 recommendation? 2 I don't recall a final decision. Α. 3 Ο. Do you recall what the different 4 possibilities were in terms of the answer to this 5 question that's in Mr. Kurta's memo? That's just the facts again. 6 MS. ENLOW: 7 I can say, "yes" or "no"? THE WITNESS: MS. ENLOW: Uh-huh. 8 9 THE WITNESS: Yes, I do recall there being 10 different possibilities. 11 BY MS. LAPORTE: 12 Right. And do you recall one of them Q. 13 ultimately being settled upon as a recommendation? 14 I don't recall a final. Α. 15 Okay. What were the different options that Q. 16 were under consideration? 17 MS. ENLOW: I would object on deliberative 18 process. I'm going to instruct her not to answer. 19 BY MS. LAPORTE: 20 Are you going to follow that instruction? Ο. 21 Α. Yes. 22 MS. LAPORTE: We continue to object as before 23 to all these deliberative process objections. 24 Okay. 25 (Deposition Exhibit 57 was marked for

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1	CERTIFICATE
2	I do hereby certify that the aforesaid testimony
3	was taken before me, pursuant to notice, at the time
4	and place indicated; that said deponent was by me duly
5	sworn to tell the truth, the whole truth, and nothing
6	but the truth; that the testimony of said deponent was
7	correctly recorded in machine shorthand by me and
8	thereafter transcribed under my supervision with
9	computer-aided transcription; that the deposition is a
10	true and correct record of the testimony given by the
11	witness; and that I am neither of counsel nor kin to
12	any party in said action, nor interested in the
13	outcome thereof.
14	
15	ulang & relate
	Nancy J. Martin, RMR, CSR
16	
17	Dated: April 24, 2018
18	
19	
20	
21	(The foregoing certification of this transcript does
22	not apply to any reproduction of the same by any
23	means, unless under the direct control and/or
24	supervision of the certifying shorthand reporter.)
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