

**BY ORDER OF THE COMMANDER
RAMSTEIN AB (USAFE)**

AIR FORCE INSTRUCTION

40-701



**RAMSTEIN AIR BASE INSTRUCTION
Supplement**

3 NOVEMBER 2018

Medical Command

**EXCEPTIONAL FAMILY MEMBER
PROGRAM**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

ACCESSIBILITY: Publications and forms are available for downloading or ordering on the e-Publishing web site at www.e-Publishing.af.mil.

RELEASABILITY: There are no releasability restrictions on this publication.

OPR: 86 MDG/SGH

Pages: 14

This supplement is required per Air Force Instruction (AFI) 40-701 Paragraph 2.8.2. and implements and extends local guidance related to Medical Support To Family Member Relocation And Exceptional Family Member Program (EFMP). It describes the responsibilities of Air Force (AF) personnel with regard to the Exceptional Family Member Program-Medical (EFMP-M) process, Ramstein Air Base's Military Treatment Facilities (MTF) and other agencies that are instrumental to the implementation and operation of the AF EFMP-M process. EFMP-M encompasses the medical and educational review functions that support accompanied military assignments and the Department of Defense's (DoD) Educational and Developmental Intervention Services (EDIS). This instruction supports portions of AFI 36-2110, Assignments, AFI 36-3020, Family Member Travel, and AFI 36-2102, Base-Level Relocation Procedures. These established procedures are designed to protect personal information from unauthorized use or release and prescribe use and disclosure of Protected Health Information. This instruction applies to all military and civilian personnel and their family members entitled to receive medical care in military treatment facilities as specified in AFI 41-210, Tricare Operations And Patient Administration Functions. It also applies to DoD civilian employees with regard to seeking information about availability of services overseas for family members with special needs. Please refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF IMT 847, Recommendation for Change of Publication; and route AF IMT 847s from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are

maintained in accordance with AFMAN 33-363, Management of Records, and disposed of in accordance with the Air Force Records Disposition Schedule (RDS) located in the Air Force Records Information Management System (AFRIMS).

SUMMARY OF CHANGES

The Medical Group operating instruction has been upgraded to Installation level directive. Special Needs Coordination (SNC) has been re-named the Exceptional Family Members Program-Medical (EFMP-M), and is re-aligned under the Chief of Medical Staff (SGH). Changes are in alignment with the publications AFI 40-701, and Air Force Medical Operations Agency (AFMOA) published EFMP-M Practice Standards.

1. PROGRAM OVERVIEW

1.1. Exceptional Family Member Program-Medical Component (EFMP-M). The mission of the EFMP-M is to identify medical and educational service requirements of family members in support of Regular AF (RegAF) sponsor reassignment and civilian employment overseas. The EFMP-M proactively identifies those family members who have special needs in order to coordinate accompanied travel orders and family relocations in accordance with (IAW) with Department of Defense Instruction (DoDI) 1315.19, Authorizing Special Needs Family Members Travel Overseas at Government Expense. DoDI 1315.19 implements federal laws protecting persons with disabilities. EFMP implements DoD policy by providing assignment considerations for RegAF sponsors where special medical and educational conditions of family members have been identified. Enrollment in EFMP is mandatory for military dependents and requires the identification of all family that meet criteria as outlined in DoDI 1315.19. Assignment coordination activities for those family members with medical needs that do not meet the DoD definition of special needs are also described in this instruction. EFMP families may be entitled to further community support services, beyond medical/educational capability determinations, which are described separately in AF policy. Additionally, the AF EFMP-M provides for coordination of medical care to families enrolled in EFMP.

2.1.2. (86AW) Family members who require general medical, special educational, Early Intervention (EI) and/or Related Services (RS), or modified housing must contact the SNC in the MTF for a complete evaluation, assessment, and possible enrollment. Likewise, the SNC must be advised immediately following the identification of a family member who has a long term condition requiring general medical, special educational, EI or RS, or modified housing.

3.7.1.1. For typical Outside the Continental United States (OCONUS) assignments: The Family Member Relocation Clearance (FMRC) process is initiated for all RegAF sponsors requesting government funded travel of family members to OCONUS locations, regardless of prior EFMP status. All family members requesting government sponsored travel in conjunction with an accompanied Permanent Change of Station (PCS) action to an OCONUS location must be present for the FMRC interview. Family members who travel overseas without command sponsorship are at risk of reduced or non-available medical care, loss of benefits such as base privileges or housing, and may incur significant personal expense if further relocation is needed. All sponsors who intentionally bypass the clearance process or who falsify information risk disciplinary action.

2.8. The Installation Commander

2.8.1. Ensures command sponsorship is not offered to family members in locations where appropriate services do not exist, or where undue hardship or expense would be incurred to deliver such services, if sponsors were previously informed of service limitations.

2.8.3. Specifies in coordination with Staff Judge Advocate (SJA)/Medical Group (MDG)/Force Support Squadron (FSS) limitations to government-provided benefits that may be offered to families who have bypassed the EFMP-M or traveled against recommendations made in the FMRC process. These limitations may include restriction from base privileges and housing entitlements or other benefits IAW the applicable Status of Forces Agreement.

2.10. Military Personnel Flight (MPF)

2.10.1. **(86AW)** Provides EFMP-M staff with a monthly roster of Q-coded sponsors and their Date Estimated Return from Over Seas (DEROS) dates.

2.10.4. Ensures all outbound RegAF sponsors not previously enrolled in EFMP are queried regarding the presence of family members with special needs prior to the issuance of orders for PCS relocation, using DoDI 1315.19, Enclosure 4 as a guiding reference. Provides AF Form 4380, Air Force Special Needs Screener, to outbound RegAF sponsors prior to Continental United States (CONUS) and OCONUS assignments. Ensures completed responses that indicate the presence of special needs are forwarded to the SNC prior to issuing orders for accompanied travel or government-funded travel. Provides sponsors with MTF contact information to initiate the FMRC process.

2.10.5. **(86AW)** Will ensure that sponsors with a CONUS assignment complete the AF Form 4380. All screeners with full negative responses will be out-processed without an AF Form 1466, Request for Family Member's Medical and Education Clearance for Travel.

2.10.6. **(86AW)** Will ensure no sponsor is given orders to OCONUS without an AF Form 1466 medically clearing for travel. MPF staff will ensure dependents that were not recommended for travel are not listed as approved for travel at government expense.

2.10.7. **(86AW)** Will not approve command sponsorship for dependents in which command sponsorship has not been recommended through the EFMP-M process. Questions about granting command sponsorship to dependents when a non-recommendation has been made will be directed to the SNC and/or SGH.

2.10.8. **(86AW)** Will not process any DEROS extension requests for members with the Assignment Limitation Code Q (Q-Coded – EFMP-M) without an AF Form 1466 or a letter from the SNC stating that they are authorized the care they require can be medically supported thereby clearing them to extend their tour at Ramstein.

2.13. The Exceptional Family Member Family Support Coordinator (EFMP-FS)

2.13.1. **(86AW)** Works with the SNC to provide information to Child/Youth and Airman and Family Readiness Center staff members about special needs and about referral procedures to assist families with special needs.

2.13.2. **(86AW)** Ensures families who are offered specialized support, i.e. respite care, are appropriately enrolled in the appropriate perspective Service's EFMP-M, through consultation with the MTF EFMP-M staff.

2.13.3. **(86AW)** Works with base recreational and club programs to provide nondiscriminatory inclusion with consideration given to family members with special medical and/or educational needs.

2.13.4. **(86AW)** Provides joint briefings in conjunction with EFMP-M for newcomer's orientation, relocation, and out-processing briefings in order to appropriately assist special needs families with transition through PCS.

2.13.5. **(86AW)** Appoints in writing the EFMP-FS to provide support at Exceptional Family Member quarterly case reviews.

2.13.6. **(86AW)** Receives annual Health Insurance Portability and Accountability (HIPAA) training from local MTF to ensure protection of patient medical information and provides a copy of the certificate of completion to the EFMP-M office.

2.14. MDG Commander (MDG/CC)

2.14.1. The MDG/CC ensures the organizational location of EFMP-M functions within the MTF are under direct oversight of the SGH. With regard to staffing, resources and training, the MDG/CC:

2.14.1.1. Appoints in writing the SNC, Medical Review Officer (MRO), and Family Member Relocation Clearance Coordinator (FMRCC), and designates alternates for each role to ensure EFMP-M continuity. Directs the SNC to submit the letter of appointment to AFMOA/SGHW to enable access to protected data systems.

2.14.1.2. Ensures sufficient administrative and clinical expertise are applied to support the EFMP-M functions of identification of special needs, registration of family members who meet EFMP enrollment criteria, and the FMRC process.

2.14.2.5. Advises sponsor's unit commanders of situations in which sponsors have circumvented the FMRC process after advisement that medical and educational services were not available at the gaining base and/or have paid for family relocation at their own expense.

2.14.2.6. Recommends denial of command sponsorship to the Installation Commander for family members in OCONUS locations where appropriate services do not exist, or where undue hardship or expense would be incurred to deliver such services, if sponsors were previously informed of service limitations. **(86AW)** Coordinates with sponsors' unit commanders as needed to obtain signatures on a memorandum that acknowledges they were advised of unavailable medical or educational services, but chose to relocate their special needs family member(s) without government sponsorship.

2.15. Chief of Medical Services (SGH)

2.15.1. Maintains overall responsibility for the clinical quality and program integrity of the EFMP-M. Provides direct oversight to appointed EFMP-M staff in the completion of EFMP enrollment, FMRC procedures, and care of family members with special needs. Provides final signature authority on the AF Form 1466.

2.15.1.1. In the event of the SGH's absence, the MDG/CC may delegate an interim SGH to provide these duties.

2.15.2. Ensures all staff employed by the MTF are trained upon assuming duties and annually on the EFMP-M process and the provisions of DoDI 1315.19, including the criteria for enrollment

in EFMP described in Enclosure 4 of the DoDI. Ensures MTF staff are trained annually regarding mandatory referrals to the SNC for any family member identified special need.

2.16. Special Needs Coordinator (SNC)

2.16.1. **(86AW)** The SNC participates with the MRO in jointly-scheduled interviews with all family members requesting government-authorized travel to accompany a sponsor in PCS and newly acquired dependents seeking command sponsorship.

2.16.2. **(86AW)** Ensures that initiation or deletion of authorization letters for the assignment limitation code-Q for active duty AF members are written and submitted to the installation MPF. Copies are maintained in the EFMP-M record and provided to the sponsor to document enrollment.

2.16.5. Ensures Q-coded sponsors assigned to the installation are contacted annually to update their EFMP status, and provide any updates needed in contact information, family composition, or family member conditions; verification of need for continued enrollment as well as pending PCS should also be discussed.

2.16.8. Ensures the appropriate documentation of EFMP-M workload as a military-specific mission in consultation with the MTF Medical Expense and Performance Reporting System (MEPRS) monitor using MEPRS code FAZN for all EFMP-M associated workload.

2.16.9. **(86AW)** Also ensures that Q-coded members are contacted six months prior to DEROS to begin out-processing paperwork.

2.17. Family Member Relocation Clearance Coordinator (FMRCC)

2.17.3. Carry out the administrative aspects of the EFMP-M, including but not limited to scheduling appointments, assisting in records review, establishing and maintaining logs and Standard Number (SN) files, and explaining forms or processes to families.

2.17.4. Use Q-base to document special needs family members and their sponsors assigned to the installation, to administratively manage cases, to process Facility Determination Inquiries (FDIs) IAW the processes outlined in Chapter 3 of this publication, and to transfer cases to gaining facilities upon PCS.

2.17.5. **(86AW)** Initiates local FDIs for command sponsorship applicants with identified special needs to ensure the needs for special services or medical care could be adequately available in the local area before offering command sponsorship.

2.17.6. **(86AW)** Reviews incoming FDIs. IAW DoDI 1315.19 (E5.1.4.1.) coordinates with medical activities to ensure required medical services are available before authorizing family member travel at government expense, and (E5.1.2.) coordinates with the Military Service responsible for Early Intervention Services (EIS) when assigning an active duty Service member to an area outside of his or her own Military Department's geographic area of responsibility overseas. Approval or denial will be based on local economy or local MTF capabilities. FMRCC routes to the appropriate authority based on service availability at Ramstein Clinic, DOD schools, Base Housing office, Tri-Care, Landstuhl Regional Medical Center (LRMC) Europe/Africa office or the European Regional Medical Command (ERMC) to make recommendations regarding service availability for inbound EFMP-M members.

2.18.1. Medical Review Officers (MRO)

2.18.1.5. Review and complete the required AF and DD Forms with sufficient documentation to support SGH decision-making regarding family member travel recommendations.

2.19.1. The Mental Health Flight Commander/Element Chief:

2.19.1.1. Ensures the delivery of needed documentation to the SNC upon request for FMRCs and FDIIs regarding mental health/substance abuse services obtained by family members in the MTF, or regarding those family members known to the providers of the MTF as requiring special services.

2.19.1.2. Reviews incoming FDIIs in locations where MTF mental health/substance abuse services are provided to family members and makes recommendations regarding service availability.

2.19.2. Family Advocacy Officer (FAO) ensures the delivery of needed documentation to the SNC upon request regarding family member involvement with Family Advocacy Program (FAP) maltreatment services, in support of the outbound FMRC process. Upon request, the FAO reviews incoming FDIIs to make recommendations regarding service availability.

2.19.3. Dental Flight Commander/Element Chief

2.19.3.1. When space allows, ensures the delivery of needed documentation to the SNC upon request regarding dental services received and required by family members in support of the outbound FMRC process.

2.19.3.2. At OCONUS MTFs, reviews incoming FDIIs upon request to make recommendations regarding services availability at the MTF.

2.19.4. TRICARE Operations and Patient Administration (TOPA) Flight:

2.19.4.3. Advise the SNC and/or SGH of local network resources and limitations in support of the FMRC process. Review inbound FDIIs upon request and makes recommendations to the SNC/SGH regarding availability of needed services not normally delivered by the MTF. Assists as needed in identifying sources of information regarding availability of dental services.

2.19.4.4. Advise and educate TRICARE network providers on the EFMP-M, on the need to refer RegAF sponsors' family members with special medical and/or educational conditions to the SNC, and support the provision of medical documentation upon request and with proper consent to support the FMRC.

2.19.5. MTF healthcare staff will:

2.19.5.1. Refer RegAF sponsors to the SNC for enrollment when, in the course of evaluation or treatment, a special need is identified in a family member that meets enrollment criteria as specified in DoDI 1315.19, Enclosure 4. Complete DD Form 2972 to support enrollment upon request of the SNC.

2.20. (86AW) Pediatric Behavioral Medicine (PBM) Liaison

2.20.1. **(86AW)** Ensures the delivery of needed documentation to the SNC upon request for outbound FDIIs regarding Mental Health services obtained by family members in the PBM clinic.

2.20.2. **(86AW)** Reviews incoming FDIIs or command sponsorship requests of children ages 3-18 when mental health/substance abuse services have been identified and makes recommendations regarding service availability.

2.21. (86AW) 86 AW Staff Judge Advocate (86 AW/JA)

2.21.1. **(86AW)** Assists commanders when an active duty member sponsor has arrived without going through the command sponsorship process or has relocated special needs family members after being advised against travel.

2.22. (86AW) Geographically separated units (GSU)

2.22.1. **(86AW)** In cases where the sponsor is assigned to another base, the AF Form 1466 and other supporting documents will be sent to the base EFMP-M office where the member is assigned. It will be the sponsors' base EFMP-M office's responsibility to send the FDI through the secure information sharing system, Q-base, to the gaining base for final determination. If the sponsor is assigned to a GSU that is not associated with a MTF, the EFMP package will be facilitated based upon the sponsors Personnel Accounting Symbol (PAS) code or United States Air Force/Surgeon General (USAFE/SG) delegation of areas of responsibility, generally the nearest AF MTF.

3. OPERATING PROCEDURES AND STANDARDS**3.1. (86AW) Exceptional Family Member Program - Medical (EFMP-M)**

3.1.1. **(86AW) Purpose:** Ensure that every AF active duty member who has a family member with special educational, mental health, or chronic medical needs is identified, and receives the services required to meet those needs. If these needs cannot be met, it is the Air Force's responsibility to assist with appropriate action to provide an assignment where these necessary services are available.

3.4. The Family Member Relocation Clearance (FMRC). Where special needs are known via Q-code, or prior to any relocation, an FMRC review must be initiated within 6-months of government sponsored family member travel with the exception of training courses over 90 days that are performed en route and required by gaining assignment, as well as Embassy/Attaché assignments.

3.4.1. Family members of RegAF sponsors requesting family member travel at government expense to an OCONUS location, and CONUS location when there are family members with special needs, must participate in the FMRC. Required documentation and attendance at the FMRC will vary depending on location of the gaining assignment and family composition.

3.4.2. (86AW) EFMP-M Outbound Process

3.4.2.1. **(86AW) Outbound sponsors who have no dependents will submit their completed AF Form 4380 to MPF with no further action required for EFMP-M out-processing.**

3.4.2.2. **(86AW) Outbound sponsors traveling CONUS with EFMP-M identified dependents will complete the AF Form 4380 and submit it to MPF.** Outbound sponsors will complete EFMP-M out-processing paperwork (AF Form 1466, DD Form 2792, *Family Member Medical Summary*, DD Form 2792-1, *Special Education/Early Intervention Summary*, and AF Form 1466D, *Dental Health Summary*, for EFMP-M dependent only. MPF staff will not clear the sponsor for travel without an approved AF Form 1466 from the gaining base.

3.4.2.3. **(86AW) Overseas accompanied PCS, Remote unaccompanied assignment with an accompanied OCONUS follow-on, Consecutive Overseas Tours and Family members remaining in Germany.**

3.4.2.3.1. **(86AW) When a sponsor is scheduled for an unaccompanied assignment with accompanied follow-on, a preliminary FDI is generated to the follow-on-base for family members enrolled in the EFMP-M to identify any contra-indications to relocating family members to the proposed location prior to the issuance of orders to the unaccompanied assignment.** A second FDI is initiated six months prior to the relocation of family members to the follow-on location. The EFMP-M office at the current base of sponsor assignment retains responsibility for the coordination of the FDI at each stage of the process, and requests support from the MTF closest to the family in conducting interviews, records reviews, etc. If there is no MTF within a reasonable travel distance, documentation from civilian providers is requested by the sponsor's EFMP-M office and is submitted to the gaining location for review.

3.4.3. **(86AW) EFMP-M Inbound Process**

3.4.3.1. **(86AW) All FDIs are received via Q-base.** The FMRCC uses the EFMP-M checklist to check for completion of the packet. Packets will not be routed until all documentation is present. United States Air Forces in Europe (USAFE) considers the following a complete packet:

3.4.3.1.1. **(86AW) Most current version of AF Form 1466, with sponsor's signature on pages one and two.** A spouse's signature can only be accepted on pages one and two if a power of attorney is provided that states the spouse has permission to perform duties related to out processing. Adult family members must sign page five giving permission for their paperwork to be released. The MRO, SNC and SGH from the losing base must complete all sections on page three of the AF Form 1466.

3.4.3.1.2. **(86AW) AF Form 1466D for each family member aged two and older.**

3.4.3.4.4. DD Form 2792-1, (OCONUS assignments only), is completed by qualified early intervention or school personnel for all children age birth to high school graduate (or General Equivalency Diploma). The current Individual Family Service Plan (IFSP) or Individual Education Program (IEP) will be attached to the DD Form 2792-1.

3.4.3.4.4.1. When a child is homeschooled and there are no special educational needs, the parent/legal guardian may complete the DD Form 2792-1.

3.4.3.4.4.2. When a child is homeschooled and has an IEP because special educational services are received from the school district, the parent/legal guardian will have the Local Education Authority, school district, or the school the child would attend complete and sign the DD Form 2792-1.

3.4.4. Once all required paperwork has been completed and submitted to the EFMP-M office the following steps are conducted. The FMRCC:

3.4.4.1. **(86AW) The FMRC prints the packet and places it in a folder with the sponsor's name on the label.** A routing sheet with identifying information is created. The FMRCC adds the sponsor to the local database.

3.4.4.2. Ensures both the SNC and the MRO, or their alternates, have reviewed all required family members' medical records, when indicated the DD Form 2792, DD Form 2792-1, and/or AF Form 1466, pharmacy dispenses, and documentation from TRICARE network providers and/or privately insured medical providers prior to the face-to-face FMRC appointment.

3.4.4.3. **(86AW) Remarks on the routing sheet**

3.4.4.3.1. (86AW) The FMRC will immediately mark “N” on the routing sheet in lieu of forwarding the FDI for the following conditions:

3.4.4.3.1.1. (86AW) Lap band procedure within five years.

3.4.4.3.1.2. (86AW) Autism in a child PCSing under the age of six (forward FDI to developmental pediatrics for review for ages six and older).

3.4.4.3.1.3. (86AW) Diabetic with a HbA1C over 9.0 in the past year.

3.4.4.3.1.4. (86AW) Suicide Attempt or Suicide Ideation within three years.

3.4.4.3.1.5. (86AW) Identification or treatment of eating disorders within three years.

3.4.4.3.2. (86AW) Denials are based on local MTF and network capabilities. Additional temporary restrictions may be added based on service availability, and these additions will be re-visited as often as needed.

3.4.4.3.3. (86AW) The FMRC will immediately mark “Y” on the routing sheet in lieu of forwarding the FDI family practice/primary pediatric managed care with no more than one medication for the following conditions:

3.4.4.3.3.1. (86AW) Anxiety not requiring therapy.

3.4.4.3.3.2. (86AW) Mild depression not requiring therapy.

3.4.4.3.3.3. (86AW) Attention-Deficit Disorder not requiring PMB, therapy, or an IEP.

3.4.4.3.3.4. (86AW) Mild asthma not requiring a steroid, and with no Emergency Room (ER) history.

3.4.4.3.4. (86AW) Additional temporary standardized approvals may be added based on service availability by mutual agreement of the SGH and SNC, and these additions will be re-visited annually or more often as needed.

3.4.4.4. (86AW) Any specialty housing requests are sent to the housing office for determination if needs can be met. Determination that needs may be met does not constitute a reservation for such housing.

3.4.4.5. (86AW) All clinics will make a recommendation based on availability of services. If a clinic requires additional information in order to make a decision, the clinic will notify the FMRCC. The FMRCC can contact the losing base to request the information. Copies of all email traffic will be placed in the chart. If care will be accessed off-base by a local provider, the FMRCC will send a Memorandum for Record (MFR) to the sponsor via the losing base’s FMRCC. Once all travel recommendations are received, the FMRCC forwards the packet to the SGH to make a final travel recommendation.

3.4.4.6. (86AW) If the sponsor is a DoD civilian employee, travel cannot be disapproved. The SGH only makes notification to the losing base the availability of services in the area.

3.4.4.7. (86AW) The SGH documents the decision on the routing sheet with a date. If travel is not recommended the SGH gives a reason with sufficient detail to document in Q-base.

3.4.4.8. (86AW) Page 5 of the AF Form 1466 is sent to the losing base’s Point of Contact (POC).

3.5. (86AW) EFMP-M REASSIGNMENT

3.5.1. (86AW) Sponsors must be enrolled in EFMP-M and Q-Coded to be eligible for reassignment. AFI 36-2110, **Attachment 25** and **26** lists the criteria for reassignment.

3.5.2. (86AW) The sponsor or adult family member will contact the SNC to confirm which paperwork is required for reassignment and if sponsor is eligible. The SGH, Department Of Defense Dependents Schools (DoDDS) Special Education department, LRMC, Ramstein MTF, ERMC, and TRICARE may be consulted on the availability of both on-base and off-base network providers. If services are available in the area, to include the off-base network, the family is not eligible for reassignment.

3.5.3. (86AW) The SGH and SNC will compose a letter supporting or not supporting the reassignment. This letter is given to the sponsor or adult family member. A copy is placed in the EFMP-M file.

3.5.4. (86AW) The sponsor is instructed on how to apply for reassignment through the virtual MPF.

3.6. (86AW) COMMAND SPONSORSHIP

3.6.1. (86AW) The EFMP-M office is responsible for ensuring services are available for dependents that wish to be Command Sponsored. Dependents will go through the same clearance process as inbound sponsors with dependents.

3.6.2. (86AW) Newborn born in Germany

3.6.2.1. (86AW) If it is determined that the new dependent cannot be adequately cared for in the location of the sponsor's OCONUS assignment, EFMP-M enrollment and reassignment is initiated immediately. MTF staff involved in infant care at OCONUS installations will monitor through well-baby checks all infants that are newly presented for care and ensure the family is counseled on requirements for command-sponsorship OCONUS. Where necessary, the clinical staff delivering infant care will consult with the SNC.

3.6.2.2. (86AW) Parent will submit discharge clinic notes from the hospital and two-week well baby check notes, translated to English as necessary. Parents who bring their baby to the Ramstein pediatric clinic will receive the necessary command sponsorship paperwork from their provider.

3.6.2.3. (86AW) Newborn infants seen at Landstuhl hospital for the two week well baby examination will receive the command sponsorship letter from the Ramstein EFMP-M office.

3.6.2.4. (86AW) Letter is generated for Command Sponsorship.

3.6.2.5. (86AW) Q-Code is initiated or EFMP-M enrollment is initiated as indicated.

3.6.2.6. (86AW) Command sponsorship paperwork is given to the parents to give to the MPF.

3.6.3. (86AW) Newborn born out of country

3.6.3.1. (86AW) There are occasions in which women return to a location near their extended family to deliver their child (i. e. United States). The command sponsorship process

can also be initiated at the nearest military installation. For local policies and procedures, the family member must contact the local installation.

3.6.3.2. (86AW) Once outside medical records have been received, along with the complete Command Sponsorship packet, an appointment will be scheduled with the SNC and MRO. The newborn must be present during the appointment.

3.6.3.3. (86AW) If during the appointment a medical condition is identified that meets criteria for enrollment in EFMP-M, the family will be notified of mandated enrollment.

3.6.3.4. (86AW) The SNC and MRO will complete page 4 and 5 of the AF Form 1466. In the event the service required is only available off-base, the sponsor will complete an MFR. The SGH will make all final decisions regarding availability of services for dependents.

3.6.3.5. (86AW) Parent is given a copy of the AF Form 1466 for continued Command Sponsorship routing.

3.6.4. (86AW) Recently married

3.6.4.1. (86AW) It is strongly recommended that the command sponsorship process for recently married couples start prior to the spouse travel to Germany. The sponsor is encouraged to contact the nearest military installation to the spouse for local policies and procedures.

3.6.4.1.1. (86AW) Health care records will be requested from previous healthcare provider, (DD Form 2792 may be completed by the civilian healthcare provider in lieu of health care records). Spouses may elect to schedule an appointment with the military Primary Care Manager (PCM) for an exam and provide a copy of the health care records.

3.6.4.1.2. (86AW) The spouse will make all reasonable attempts to provide healthcare records from civilian healthcare provider.

3.6.4.1.3. (86AW) The spouse must have AF Form 1466D completed. This form can be completed by taking it to the on-base dental clinic. The dental clinic may request a dental examination prior to completing the form. Spouses with copies of their dental records are encouraged to take their dental records to the clinic when requesting completion of the AF Form 1466D.

3.6.4.1.4. (86AW) The sponsor will bring AF Form 1466 with pages one, two, and three completed, the completed DD Form 2792 and the completed AF Form 1466D to the FMRCC for a preliminary review. The FMRCC will gather information regarding availability of services prior to appointment with SNC and MRO.

3.6.4.1.5. (86AW) Once the preliminary review has been completed an appointment will be schedule with the SNC and MRO. The dependent spouse must be present during the appointment.

3.6.4.1.6. (86AW) If during the appointment a medical condition is identified that meets criteria for enrollment in EFMP-M, the spouse will be notified of mandated enrollment.

3.6.4.1.7. (86AW) The SNC and MRO will complete page four and five of the AF Form 1466. The SGH will make all final decisions regarding availability of services for dependents.

3.6.4.1.8. **(86AW) Sponsor is given the original copies of pages one, two, and three and five of the AF Form 1466.** The spouse is given the original AF Form 1466D and page three of the AF Form 1466. Under no circumstances are medical statements, asthma questionnaire, DD Forms 2972 and 2792-1, or other information with sensitive medical information to be released to MPF.

3.6.5. **(86AW) Sponsoring additional family members (i. e. step-children, mother-in-law, etc.)**

3.6.5.1. **(86AW) It is strongly recommended that the command sponsorship process starts *prior* to travel to Germany.** The sponsor is encouraged to contact the nearest military installation to the family member for local policies and procedures.

3.6.5.2. **(86AW) It is advised that the FMRCC will directly speak with the sponsor (children) or adult family member in order to obtain accurate information.** The FMRCC will inquire if medical records are available. The FMRCC will attempt to gather information regarding past specialty care treatment (to include Mental Health). If records are available, the record must be a complete original (in English) for the SGH to review. Records not in English are required to be translated to English at the member's expense.

MARK R. AUGUST, Brigadier General, USAF
Commander

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFI 36-2102, *Base-Level Relocation Procedures*, 18 September 2006

AFI 36-2110, *Assignments*, 22 September 2009

AFI 36-3020, *Family Member Travel*, 22 October 2009

AFI 40-701, *Medical Support To Family Member Relocation And Exceptional Family Member Program (EFMP)*, 19 November 2014

AFI 41-210, *Tricare Operations And Patient Administration Functions*, 6 June 2012

AFMAN 33-363, *Management of Records*, 1 March 2008

Adopted Forms

AF Form 847, *Recommendation for Change of Publication*

AF Form 4380, *Air Force Special Needs Screener*

AF Form 1466, *Request For Family Member's Medical And Education Clearance For Travel*

AF Form 1466D, *Dental Health Summary*

DD Form 2792, *Family Member Medical Summary*

DD Form 2792-1, *Special Education/Early Intervention Summary*

Acronyms and Abbreviations

AF—Air Force

AFI—Air Force Instruction

CONUS—Continental United States

DEROS—Date Estimated Return from Over Seas

DOD—Department of Defense

DoDI—Department of Defense Instruction

EFMP—Exceptional Family Member Program

EFMP—M—Exceptional Family Member Program-Medical

EFMP—FS—Exceptional Family Member Family Support Coordinator

EI—Early Intervention

ERMC—European Regional Medical Command

FAO—Family Advocacy Officer

FDI—Facility Determination Inquiry

FMRC—Family Member Relocation Clearance

FMRCC—Family Member Relocation Clearance Coordinator

GSU—Geographically Separated Unit

IAW—In Accordance With

IEP—Individual Education Program

LRMC—Landstuhl Regional Medical Center

MDG/CC—MDG Commander

MEPRS—Medical Expense and Performance Reporting System

MFR—Memorandum For Record

MPF—Military Personnel Flight

MRO—Medical Review Officer

MTF—Military Treatment Facilities

OCONUS—Outside the Continental United States

PBM—Pediatric Behavioral Medicine

PCS—Permanent Change of Station

RegAF—Regular Air Force

RS—Related Services

SGH—Chief of Medical Staff

SNC—Special Needs Coordination