DEPARTMENT OF THE NAVY
OFFICE OF THE CHIEF OF NAVAL OPERATIONS
2000 NAVY PENTAGON
WASHINGTON, D.C. 20350-2000

OPNAVINST 1754.2C
N13
22 Jan 07

OPNAV INSTRUCTION 1754.2C

From: Chief of Naval Operations

Subj: EXCEPTIONAL FAMILY MEMBER (EFM) PROGRAM

Ref: (a) P.L. 94-142, Individuals with Disabilities Education Act
(b) DOD Instruction 1342.12, Provision of Early Intervention and Special Education Services to Eligible DOD Dependents, of 11 Apr 05
(c) DOD Instruction 1315.19, Authorizing Special Needs Family Members Travel overseas at Government Expense, of 20 Dec 05
(d) SECNAVINST 1754.5B
(e) OPNAVINST 1300.14C
(f) MILPERSMAN 1300-302 and 304
(g) BUMEDINST 1300.2A

Encl: (1) Definitions
(2) EFM Enrollment Procedures
(3) Central Screening Committees and EFMP Managers

1. Purpose. This instruction implements the provisions of references (a) through (g), and issues Navy policy and guidance for identifying sponsors who have an Exceptional Family Member (EFM) with special medical, mental health or educational needs. EFM Program (EFMP) enrollment enables detailers to consider such needs during the assignment process and to pinpoint assignments to locations where necessary resources are available.

2. Cancellation. OPNAVINST 1754.2B.

3. Background

a. Reference (b) implements the Individuals with Disabilities Education Act (IDEA) within the Department of Defense (DOD) and assigns responsibilities and prescribes policy and procedures for the provision of early intervention and special education to eligible DOD family members. Reference (c) assigns responsibilities and prescribes policy and procedures for authorizing special needs family members travel overseas at Government expense within DOD. References (d), (e), and (f)

provide guidance on implementing references (b) and (c) while reference (g) establishes policy and procedures for health care providers and patient administrators to identify and enroll eligible service and family members in EFMP.

b. The Department of Navy (DON) EFMP was established in September 1987 to comply with public laws, which collectively mandate that eligible preschool and school-age children with disabilities be provided a free and appropriate education overseas within DOD. The public law was subsequently expanded to include infants and toddlers with disabilities, birth through age two years.

c. Concurrently, it is DON policy to ensure Navy families with EFMs are assigned only to those areas where their EFM's specialized medical and educational needs can be met. The EFMP has evolved to include the identification of all EFMs with special needs at overseas and Continental United States (CONUS) locations.

d. Some Navy members have been reluctant to enroll their EFM, resulting in unnecessary family hardship and turbulent personnel practices such as the early reassignment of the sponsor due to inadequate educational/medical support. The provisions of this instruction are intended to support and facilitate the traditional philosophy within the Navy of shipmates caring for shipmates and to comply with directives of higher authority.

4. Policy

a. Goal. The primary goal of EFMP is to identify the special needs of family members in order to assist service members in addressing those special needs during permanent change of station (PCS) assignments. Enrollment in the program is mandatory. All family members identified with medical, mental health, or special educational requirements of a chronic nature (six months or longer) will be promptly enrolled when the condition is identified.

b. Identification. The EFMP, in conjunction with the suitability screening process, confirms the availability of medical, mental health, or special educational needs at overseas locations or remote duty locations, and the availability of medical services, mental health, or special educational services at isolated CONUS locations; identifies sponsors requiring

assignment to CONUS facilities adjacent to major medical

facilities; and identifies those sponsors eligible for homesteading.

c. Enrollment. EFM sponsor enrollment is recommended by Bureau of Medicine and Surgery (BUMED), Central Screening Committees (CSC) (defined in enclosure (1)) and approved by Navy Personnel Command (NAVPERSCOM) (PERS-45). Once the condition is documented, the service member will submit application forms and substantiating documentation per the procedures stated in enclosure (2).

d. Assignments. During the assignment of sponsors with an EFM, detailers will carefully consider all factors before assignment to overseas/remote duty locations, to include the location and timing of assignments. Maximum consideration will be given to co-locating sponsors with their families consistent with EFM enrollment categories.

(1) EFM sponsors electing to serve an accompanied tour overseas will be assigned only to areas where the required services for the EFM are available. All orders will be coordinated with the NAVPERSCOM, EFMP Manager (PERS-45) prior to release.

(2) All family members will undergo medical, dental and educational suitability screening as outlined in reference (g).

(3) For an EFM with early intervention or special education requirements, the Navy oversees the assignments of EFM sponsors within the Navy's geographic areas of responsibility for Educational and Developmental Intervention Services (EDIS) programs.

(a) The Navy is responsible for Iceland, Italy (Naples, Gaeta, La Maddalena, and Sigonella), Spain, Portugal (except the Azores), mainland Japan and Okinawa, Guam, Bahrain, Caribbean region (including Cuba), Greenland, Diego Garcia, Australia, New Zealand, West Pacific, and the embassies in these locations. Navy family members with developmental or special education requirements will not be sent to another Military Service's geographical area of responsibility without coordination and approval from that Service.

(b) If serving at an overseas medical treatment facility (MTF), the Navy will provide liaison with Department of Defense Dependents Schools (DODDS) and the cognizant military

service having responsibility for medically-related services to ensure required services are available.

(4) A sponsor may be denied command-sponsored travel of family members to an overseas location when the gaining MTF determines general medical services required by any family member, including EFMs, are not available.

(5) To maintain a Sailor's obligation to remain world-wide assignable, EFM sponsors shall be required to serve unaccompanied tours as necessary to fulfill sea/shore obligations of rate/rating and/or the need of the Navy.

(a) EFM sponsors may be assigned to involuntary unaccompanied tours to meet the "needs" of the Navy, provided those assignments are approved at NAVPERSCOM (PERS-4) flag level.

(b) EFM sponsors may elect to serve unaccompanied tours in which case the transferring commanding officer (CO) must review the decision with the sponsor to ensure that the separation will not create an undue hardship on the family resulting in an early return of the sponsor.

(c) EFM sponsors electing to serve an unaccompanied tour will not be eligible for command sponsorship of their family members at a later date.

(6) Requests for early return of sponsors and their families must be initiated if medical needs exceed the capability of medical services readily available at the overseas/isolated duty assignment. Determination will be made by the local medical officer. The family member will promptly be enrolled in EFMP at that time. In some cases the sponsor may have to complete the tour unaccompanied (see reference (f)).

5. Responsibilities

a. Chief of Naval Operations (CNO) (N13) shall:

(1) Establish program policy.

(2) Implement the program.

(3) Develop and periodically conduct training and information campaigns to inform command personnel (e.g., COs, Executive Officers, command master chiefs (CMCs), MTFs and Fleet and Family Service Center (FFSC) staffs) about the program.

(4) Monitor and assess program effectiveness with regard to Navy families and its mission impact, if any.

b. Assistant Commander, Navy Personnel Command (ACNPC), Career Management (PERS-4) will administer the program and shall:

(1) Prescribe EFMP enrollment procedures consistent with DOD requirements.

(2) Coordinate detailing procedures, including those for severely disabled EFMs.

(3) Prescribe procedures for expeditious screening and forwarding of all EFM forms from the sponsor or MTF via the CSC to NAVPERSCOM (PERS-45).

(4) Establish and maintain a database of all enrolled sponsors having EFMs.

(5) Coordinate with CNO (N13) as necessary to implement EFMP policy.

(6) Prescribe procedures for disenrollment of any EFM family member who has sufficiently recovered from the impairment that required specialized medical care or educational services.

c. BUMED shall:

(1) Assist CNO (N13) with developing policy for healthcare providers and patient administrators to identify and enroll eligible service and family members in EFMP.

(2) BUMED will maintain CSCs composed of multidisciplinary specialties at major Fleet concentration sites. The CSC will assist in the identification and evaluation of EFMs and provide assignment recommendations to NAVPERSCOM (PERS-45) regarding EFM enrollment.

(3) Require MTF commanders to identify an EFM coordinator at each Navy MTF who will:

(4) Develop and implement quality assurance of CSC procedures.

(5) Coordinate with CNO (N13) as necessary.

d. Commanders, Commanding Officers, and Officers in Charge (OICs) shall:

(1) Disseminate the requirement for mandatory enrollment of EFMs. (This should include command EFM surveys, marketing through the plan of the day (POD), and annual command General Military Training (GMT) sessions).

(2) Ensure confidentiality and privacy are maintained by command regarding an EFM's medical, mental health, or special educational information.

(3) Establish a command point of contact through either the CMC/command senior enlisted advisor (SEA) or command career counselor (CCC). Command representatives shall maintain liaison with the local MTF EFMP Coordinator to assist in the enrollment process.

(4) Ensure command support personnel, such as chaplains, CCCs, FFSCs, Child Development Centers (CDCs), and Ombudsmen are aware of program goals, eligibility requirements, and provide accurate counseling and dissemination of program guidance to eligible applicants. Special emphasis should be placed on the member's obligation to maintain world-wide assignable and to meet the "needs" of the Navy, which may require servicemembers to serve unaccompanied tours.

(a) FFSCs/CDCs/Ombudsmen can assist EFM families by providing information and referral and coordinating with the local MTF EFM Coordinator.

(b) Command support personnel shall provide resource information to the MTF EFM Coordinator.

(5) Ensure NAVPERSCOM (PERS-45) and servicemembers are aware of the identity of the local MTF EFMP coordinator to facilitate enrollment procedures.

(6) Conduct an annual command survey to identify family members who should be enrolled in EFMP.

(7) Identify an EFMP Coordinator at each Navy MTF who shall:

(a) Oversee the identification and enrollment of eligible service and family members.

(b) Provide EFMP information to service and family members, installation commands and activities, and MTF personnel.

(c) Assist staff and sponsors in the enrollment process as specified in reference (g).

(d) Ensure completed EFMP enrollment forms are provided to the appropriate CSC listed in enclosure (3).

(e) Provide EFMP enrollment letter to service and family members, installation commands, and activities, and MTF personnel.

(f) Coordinate with overseas and remote duty MTF EFMP and suitability screening coordinators.

(g) Provide EFMP training to MTF personnel and all area commands on EFMP enrollment procedures.

(h) If serving at an overseas MTF, provide liaison with Department of Defense Dependents Schools (DODDS) and the cognizant military service having responsibility for early intervention and medically-related services to ensure required services are available.

e. Every Navy sponsor shall:

(1) Ensure EFMP enrollment forms, DD 2792 Exceptional Family Member Medical Summary and DD 2792-1 Exceptional Family Member Special Education/Early Intervention Summary, are submitted to the CSC via the EFMP Coordinator for any family member who has been evaluated or treated by a healthcare provider and found to have an enrollable condition as specified in reference (b), enclosure 4.

(2) Ensure medical information in the EFM's health record(s) is current, regardless of whether obtained from military/civilian healthcare providers, medical facilities/ hospitals, or early intervention/educational personnel. Current information enables accurate completion of the EFM enrollment form.

(3) Provide NAVPERSCOM (PERS-45) with legal documents if the status of the EFM changes through legal separation, divorce, or court-ordered change in custody.

(4) Ensure a renewed or updated application for EFMP is submitted when the family member's condition changes or upon

completion of diagnostic evaluations. The normal update process is every three years, or 12 months prior to receiving orders, or with a change of status of a special needs family member. For those conditions that may warrant temporary categorization in EFMP (as determined by the CSC), updated applications will be submitted as required to NAVPERSCOM (PERS-45) to the CSC via the EFMP Coordinator; usually at six months to one year.

6. Procedures. Application procedures governing the EFMP are delineated in enclosure (2).

7. Forms. DD 2792 (Oct 2006), Exceptional Family Member Medical Summary and DD 2792-1 (Oct 2006,) Exceptional Family Member Special Education/Early Intervention Summary are available at http://www.npc.navy.mil/commandsupport/exceptionalfamilymember or http://www.dtic.mil/whs/directives/infomgt/forms/formsprogram.htm

J. C. HARVEY, JR.
Vice Admiral, U.S. Navy
Deputy Chief of Naval Operations
(Manpower, Personnel, Training
and Education)

Distribution:
Electronic only, via Department of the Navy Issuances Web site:
http://doni.daps.dla.mil

DEFINITIONS

1. **Assistive Technology Device**. Any item, piece of equipment, or product system used to increase, maintain, or improve functional capabilities of individuals with disabilities.

2. **Assistive Technology Service**. Any service that directly assists individuals with disabilities in the selection, acquisition, and use of an assistive technology device.

3. **Central Screening Committee (CSC)**. A committee established by BUMED consisting of healthcare providers that review all completed EFM applications and recommend disposition to NAVPERSCOM (PERS-45).

4. **Early Intervention Services (EIS)**. Services designed to meet the developmental needs of an infant or toddler with a disability (birth through two years, inclusive), and their families, in one or more of the following areas of development: physical, cognitive, communication, social or emotional, and adaptive. EIS includes, but is not limited to, family training, counseling, home visits, special instruction, speech pathology and audiology, occupational therapy, physical therapy, psychology, service coordination, medical services for diagnostic or evaluation purposes, early identification, screening and assessment, ophthalmology, and social work. Also included are assistive technology devices and assistive technology services, health services necessary to enable the infant or toddler to benefit from the above EIS, and transportation and related costs necessary to enable an infant or toddler and the family to receive EIS. EIS are provided as specified in an Individualized Family Service Plan (IFSP).

5. **Exceptional Family Member (EFM)**. An authorized Defense Enrollment Eligibility Reporting System (DEERS) eligible family member (spouse, child, stepchild, adopted child, or dependent parent) residing with the sponsor, who possesses a physical, emotional, developmental, or educational disability, or condition requiring special medical, mental health, or educational services.

6. **EFMP Command Point of Contact.** A designated individual at each command who has general knowledge of EFMP and can provide guidance for obtaining further assistance (usually the CMC, CCC, or SEA).

7. **Geographic Area.** A specific geographic location chosen for a sponsor's assignment where the required medical and educational staff for the sponsor's EFM is available.

8. **Geographic Areas of Responsibility.** The areas of responsibility assigned by DOD to the Military Services for the provision of early intervention and related services assigned to the military medical departments overseas in support of DODDS special education programs.

9. **Homestead Assignment.** A detailing policy that permits a sponsor whose family member is identified by the CSC as severely disabled the opportunity to remain in a particular geographic location. Homestead sites will be selected based on their ability to provide requisite services and appropriate sea/shore rotation. Homestead sites include Norfolk, VA; Mayport/ Jacksonville, FL; San Diego, CA; Bangor/Bremerton/Puget Sound/Seattle, WA; and the Washington D.C. Capitol beltway area. Gulfport, MS and Port Hueneme, CA are included for Seabees, and Full Time Support (FTS) personnel.

10. **Individualized Educational Program (IEP).** Written plan for a preschool or school-age child with a disability (ages three through 21 years, inclusive) which outlines the special education programs and related services (including those of a medical nature) that are required to meet the unique needs of a special education student.

11. **Individualized Family Service Plan (IFSP).** Written plan for an infant or toddler (birth through two years, inclusive) with a disability, and the family of such an infant or toddler, that is based on a multidisciplinary assessment of the unique needs of the child and the concerns and priorities of the family. The IFSP identifies the early intervention and other services appropriate to meet such needs, concerns, and priorities.

12. **Major Medical Area.** Any area served by medical departments of the armed services or civilian MTFs which have physicians

capable of treating/monitoring family members who have impairments or chronic/severe medical conditions.

13. **MTF EFMP Coordinator**. A designated individual at an MTF who provides information, assistance, and forms to MTF staff, local commands, sponsors, and other family members with regard to enrollment procedures, program benefits, and available local services and facilities.

14. **Related Services.** Assigned to the Military Medical Departments Overseas. Allied healthcare services provided in support of the special education needs of preschool or school-age children to include evaluation services required to determine a student's eligibility for special education and, if eligible, the direct or indirect services designed to help the student benefit from their special education program.

15. **Remote Duty Assignment**. Designated locations within the United States that do not have timely access to health care services. Timely access is defined as two hours drive under most conditions to access specialty care.

16. **Suitability Screening**. The process and procedures used to determine the suitability of service and family members for an overseas, remote duty, or operational assignment. Suitability screening includes a command review conducted by the transferring command and medical, dental, and educational screening conducted by a Navy MTF. The MTF conducting suitability screening ensures any special need identified can be met at the member's next duty station via official message. The overseas MTF coordinates with DODDS and Educational Developmental Intervention Services (EDIS) to ensure early intervention, special education and related services are available. Per reference (g), based on the results of screening, the gaining MTF makes a suitability recommendation to the CO of the transferring command via official message.

a. If orders have been issued after confirmation of EFM enrollment, overseas/isolated screening will be accomplished per reference (g).

b. If overseas screening uncovers the need for enrollment of a family member in EFMP, overseas/isolated screening must continue in addition to the EFMP application process. The

suitability screening process should not be held up awaiting determination of the EFMP category.

17. **Severely Disabled**. A family member who has an impairment or medical condition that is expected to exist over a long time-period and requires medical specialists, frequent hospitalization, or intensive nursing care, pharmacy or laboratory support; or who requires frequent healthcare services not available at most naval branch medical clinics. Some examples of these conditions include multiple disabilities, seriously emotionally disturbed, severe birth defects, and conditions requiring placement in residential care facilities.

18. **Special Education**. Instruction and related services for which a preschool or school-age student (age three to 21 inclusive) is entitled under statute when a school determines a child's educational performance is adversely affected by one or more disabling conditions. The instruction and related services are defined in an IEP.

EFM ENROLLMENT PROCEDURES

1. General. This enclosure contains policy, procedures, and responsibilities for the identification and enrollment of family members into the EFMP.

a. The objectives of the EFMP are:

(1) Identify, document, and code special need requirements of family members for consideration by military personnel activities during the assignment process.

(2) Provide a comprehensive and coordinated approach for medical, educational, and personnel support for families with special needs.

b. EFMP enrollment is mandatory and may result from:

(1) Identification of a qualifying condition during routine healthcare by an MTF or TRICARE provider.

(2) Self-identification by a service or family member.

(3) Identification of a qualifying condition during suitability screening. Do not stop the suitability screening process for EFMP enrollment. Suitability screening continues separately from EFMP enrollment.

c. Information regarding the Navy EFMP is available online at www.npc.navy.mil/commandsupport/exceptionalfamilymember or in NAVPERS 15614G, Navy EFMP Handbook or on NAVPERS 806683, DVD available at www.npc.navy.mil/channels.

d. Navy MTFs supporting other uniformed Services (Air Force, Army, or Coast Guard) will complete the EFMP enrollment forms for family members belonging to these Services and forward the forms to the appropriate EFMP manager listed in enclosure (3).

e. Family members who are enrolled in DEERS and normally reside with the sponsor qualify for enrollment.

f. EFMP enrollment is a prerequisite for participation in the TRICARE Extended Care Health Option (ECHO) program. A

qualifying active duty sponsor must show proof of enrollment in EFMP via MTF EFMP Coordinator when applying for the ECHO benefit.

2. Criteria for EFMP Enrollment. Family members who meet one or more of the following special medical or educational needs criteria are enrolled in the EFMP:

a. Potentially life-threatening conditions and/or chronic medical or physical conditions (e.g., high risk newborns, a diagnosis of cancer within the last five years, sickle cell disease, insulin dependent diabetes).

b. Current and chronic (duration of six months or longer) mental health condition (e.g., bi-polar, conduct, major affective, or thought/personality disorders); inpatient or intensive outpatient mental health service within the last five years; intensive (greater than one visit monthly for more than six months) mental health services required at the present time. This includes medical care from any provider, including a primary healthcare provider.

c. A diagnosis of asthma or other respiratory-related diagnosis with chronic recurring wheezing.

d. A diagnosis of attention deficit disorder or attention deficit hyperactivity disorder.

e. Requires adaptive equipment (e.g., apnea home monitor, home nebulizer, wheelchair, splints, braces, orthotics, hearing aids, home oxygen therapy, home ventilator).

f. Requires assistive technology devices (e.g., communication devices) or services.

g. Requires environmental or architectural considerations (e.g., limited numbers of steps, wheelchair accessibility, housing modifications, air conditioning).

h. Special educational needs:

(1) An infant or toddler with a developmental disability or potential disability (birth through two years, inclusive) who

has or requires an Individualized Family Service Plan specifying early intervention services.

(2) A preschool or school-age child with an educational disability (ages three through 21 years, inclusive) who has or requires an IEP specifying special education services.

i. A family member of any age with a temporary condition requiring specialized care expected to last more than six months but less than one year.

3. Procedures and responsibilities for EFMP Enrollment. The MTF EFMP Coordinator will:

a. Oversee the identification and enrollment of eligible service and family members.

b. Provide EFMP enrollment information to service and family members, installation commands and activities, and MTF personnel.

c. Provide EFMP training to MTF personnel and all area commands.

d. At an overseas MTF, coordinate with the DODDS and the local EDIS program.

e. Determine if the family member resides with the service member and perform a DEERS check for all potential EFMs.

f. For each family member qualifying for enrollment, provide to the servicemember:

(1) DD 2792, Exceptional Family Member Medical Summary.

(2) DD 2792-1, Exceptional Family Member Special Education/Early Intervention Summary (if applicable).

g. For DD 2792:

(1) Ensure the patient, parent, or guardian reads and understands the Privacy Act Statement and Authorization for Disclosure of Medical Information sections (page 1) and provides

a signature and date on the bottom of the page. A separate form is completed for each individual enrolled.

(2) Assist the patient, parent, or guardian with completing the Demographic/Certification section (page 2). Ensure all information is accurate and complete.

(3) Ensure the MTF primary care provider completes the Medical Summary (pages 3-5) and, when appropriate, addendum 1 (Asthma/Reactive Airway Disease Summary) or addendum 2 (Mental Health Summary) (pages 6-7) of DD 2792.

h. For DD 2792-1 (if applicable):

(1) Ensure the servicemember reads and understands the Privacy Act Statement and completes the Demographics section (page 2). Ensure all information is accurate and complete.

(2) For infants & toddlers receiving EIS:

(a) Ensure the child's local early intervention program completes DD 2792-1 (page 3) and provides a copy of the current IFSP.

(b) Attach the IFSP to the completed DD 2792-1.

(c) The service member's or spouse's signature on DD 2792-1 (item 1, page 3) authorizes the release of early intervention information.

(d) A completed DD 2792 must also be submitted as part of the enrollment package.

(3) For preschool or school-age family members receiving special education and related services:

(a) Ensure the student's school completes DD 2792-1 (page 3) and provides a copy of the current IEP.

(b) Attach the IEP to the completed DD 2792-1.

(c) The sponsor's, spouse's, or student's (who have reached the age of majority) signature on DD 2792-1 (item 1, page 3) authorizes the release of educational information.

(d) A completed DD 2792 must also be submitted as part of the enrollment package.

i. Review the enrollment forms to ensure they are complete and contain the required signatures and attachments.

j. Coordinate enrollment with the Suitability Screening Coordinator when a family member is in receipt of orders for any overseas or remote duty assignment.

k. Retain a file copy of the completed DD 2792/2792-1 and supplemental documentation. The retention period is two years after completion of enrollment, after which the record is destroyed.

l. Forward the original enrollment forms and attachments to the appropriate CSC listed in enclosure (3).

m. Follow the initial enrollment procedure to update an EFMP enrollment. Navy requires service members to update enrollment every three years. Service members are also required to update enrollment whenever a change in special needs occurs.

n. The completed DD 2792 and DD 2792-1 contain sensitive personal, medical, dental, and educational information to be used only for EFMP enrollment. Do not provide these forms (or information on these forms) to any person or entity other than "need-to-know" personnel associated with the EFMP. Educational (early intervention, special education, and related services) information may be shared with EDIS, DOD Education Activity or local educational agencies for the purpose of making placement determinations.

4. Procedures and Responsibilities for EFMP Disenrollment. Family members are disenrolled from the EFMP when:

a. An EFM no longer requires ongoing healthcare, specialty services, early intervention, or special education. The service member will provide necessary medical or educational forms and/or documentation to the EFMP Coordinator, who forwards the forms to the CSC for disposition.

b. An EFM is no longer a service member's dependent. A change in status may result from divorce, child custody

arrangements, marriage, death, etc. The service member will provide appropriate verification (e.g., a letter from their CO or OIC, a copy of a court decree or death certificate) directly to the EFMP Manager at NAVPERSCOM (PERS-45), address is provided in enclosure (3).

5. CSC Procedures and Responsibilities. The regional CSC will:

a. Review the enrollment (or update) package.

b. Contact the EFMP Coordinator or service member to obtain or clarify information.

c. Concur or non-concur with enrollment.

d. Make assignment recommendations based on the severity of the condition and medical, dental, or educational requirements.

e. Forward the enrollment forms to NAVPERSCOM (PERS-45). The respective address is contained in enclosure (3). The Navy EFMP Manager will review the recommendation, assign a final category code and maintain the information in an EFMP database for use in determining future assignment locations where the special needs of the EFM can be met.

CENTRAL SCREENING COMMITTEES AND EFMP MANAGERS

Forward EFMP summary forms to the CSC within the region of the Navy service member's command. The CSC reviews the information, recommends a category code, and forwards the form(s) to the appropriate Navy EFMP Program Manager where the final code is assigned.	
For commands located in the United States east of the Mississippi River and in Africa, Europe, the Caribbean, Middle East, and South America	Naval Medical Center (Code 0465C) EFMP Central Screening Committee Building 3 620 John Paul Jones Circle Portsmouth, VA 23708-2197 Commercial: (757) 953-5900/DSN 377 FAX: (757) 953-7134/DSN 377
For commands located in the United States west of the Mississippi River, including Alaska, West Pacific, and Asia	Naval Medical Center (Code CGH) EFMP Central Screening Committee Suite 100 34520 Bob Wilson Drive San Diego, CA 92134-5000 Commercial: (619) 532-6910/DSN 522 FAX: (619) 532-6908/DSN 522
For commands located in overseas countries to include South Pacific, Asia, and Hawaii	Naval Medical Center Yokosuka EFMP Central Screening Committee PSC 475, Box 1, Code 121Y FPO AP 96350-1600 Commercial 011-81-46-816-4979 DSN: 315-243-4979 FAX: 011-81-46-816-7287 DSN: 315-243-7287

Each military component has established its own program that addresses special needs identification, enrollment, and assignment management. For Air Force, Army, and Coast Guard service and family members, return the completed EFMP summary form(s) to the member or forward to the address below.

Navy EFMP Manager	Navy Personnel Command Attn: PERS-45 5720 Integrity Drive Millington, TN 38055-6620 Phone: (901) 874-4390/DSN 882 Toll-free: 1-866-827-5672 FAX: (901) 874-2629/DSN 882
Marine Corps EFMP Manager	HQ, U.S. Marine Corps (MRZ-2) Quantico, VA 22134 Phone: (703) 784-9654/0298/DSN 278 Toll-free: 1-866-464-6110 FAX: (703) 784-9822/DSN 278
Air Force Special Needs Program Manager	Office of the Surgeon General (AFMSA/SGOF) 5201 Leesburg Pike, Suite 1501 Falls Church, VA 22041 Phone: (703) 681-6320/DSN 761 FAX: (703) 681-6913/DSN 761
Army EFMP Manager	HQ, U.S. Army Medical Command (MCHO-CL-H) 2050 Worth Road, Suite 10 Fort Sam Houston, TX 78234-6010 Phone: (210) 221-8466/DSN 471 FAX: (210) 221-7235/DSN 471
Coast Guard Special Needs Program Manager	Coast Guard Headquarters (G-PWL-2) 2100 Second Street, SW Washington, DC 20593-0001 Phone: (202) 267-6731