

U. S. Army Garrison
The Benelux

Standard Operating Procedures
for

Providing
Reasonable Accommodation
for
Individuals with Disabilities

DRAFT
May 2010

USAG Benelux
Procedures for Providing Reasonable Accommodation
for Individuals with Disabilities

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1. PURPOSE. To establish and prescribe standard operating procedures when providing reasonable accommodation (RA) for individuals with disabilities. Coverage under this guidance extends to civilian employees and applicants for employment. Accommodations in place at the effective date of this policy will not be reconsidered solely because of the publication of this policy.

2. AUTHORITY.

- a. 29 CFR 1614.203, Rehabilitation Act
- b. 29 CFR 1630.2
- c. Rehabilitation Act of 1973, as amended
- d. Americans with Disabilities Act (ADA) of 1990
- e. Americans with Disabilities Amendments Act (ADAA) of 2008
- f. Executive Order 13164, "Establishing Procedures to Facilitate the Provision of Reasonable Accommodation" dated 26 Jul 2000
- g. Equal Employment Opportunity Commission (EEOC), "Policy Guidance on Executive Order 13164" dated 20 Oct 2000
- h. Equal Employment Opportunity Commission (EEOC), "Practical Advice for Drafting and Implementing Reasonable Accommodation Procedures Under Executive Order 13164" dated July 2005
- i. Army Regulation (AR) 690-12, Equal Employment Opportunity and Affirmative Action
- j. Army Regulation (AR) 690-7, Nondiscrimination on the Basis of Handicap in Programs and Activities Assisted or Conducted by the Department of the Army
- k. U. S. Army, Procedures for Providing Reasonable Accommodation for Individuals with Disabilities dated 17 March 2009.

3. APPLICABILITY. This guidance applies to all appropriated and non-appropriated fund employees within the Benelux, tenant organizations serviced by the Benelux Civilian Personnel Advisory Center (CPAC), and all applicants for employment for positions in these organizations; except where covered by procedures established by the tenant organizations or higher headquarters.

4. POLICY. It is the policy of the Department of the Army, as contained in references i, j and k, and the policy of USAG Benelux that a qualified individual with a disability who requests an accommodation to enable them to apply for employment or to perform the

essential functions of his/her job, will have his/her request reviewed, decided, documented and implemented in a timely manner. Managers are encouraged to process requests in less time than the maximum time limit of thirty (30) business days whenever feasible. Temporary measures, as defined below, are encouraged in cases where the accommodation is delayed by extenuating circumstances. When an accommodation is requested to allow an applicant to apply for a specific position, or to allow an employee to participate in an up-coming event, management will make good faith efforts to complete processing in time for the individual to apply for the job or participate in the event. If completion is not realistically possible prior to the event, or prior to selection for the position, normal processing limits will be followed.

5. KEY TERMS AND DEFINITIONS.

a. Employee: The term employee includes applicants for employment who have been offered a position subject to favorably completing a medical examination or other criteria; newly hired personnel who may or may not have actively commenced employment, but who have requested an accommodation in order to enable them to perform the duties of the position; and current personnel who, during the course of their employment, require an accommodation for their disability. A worker may be an employee even if he/she is called a "contractor," and even if he/she works for a private firm. The question of whether an employer-employee relationship exists is fact-specific; includes consideration of all aspects of the worker's relationship with the Army; and requires assistance from the Staff Judge Advocate (SJA).

b. Essential Functions: Job duties that are so fundamental to the position that the individual cannot do the job without being able to perform them. Determination of the essential functions of a position must be done on a case-by-case basis so that it reflects the job as actually performed and not simply the components of a generic position description. Relevant factors to consider in determining if a function is essential include, but are not limited to the following: whether the reason the position exists is to perform that function; the number of people available to perform the function or among whom it can be distributed; the degree of expertise or skill required to perform the function; the manager's judgment as to which functions are essential; the written job description prepared before advertising or interviewing applicants for the job; the time spent performing the function; the consequences of not requiring the employee to perform it; the terms of the collective bargaining agreement; the work experience of past incumbents in the job; and/or the current work experience of incumbents in similar jobs. The fact that a function is listed in a job description as essential is relevant, but not necessarily controlling.

c. Extenuating Circumstances: Factors that could not reasonably have been anticipated or avoided in relation to the request for an RA. Factors within Army control (such as delays by our own agents, including doctors) are not extenuating circumstances.

d. Individual with a Disability: A person who has (1) a physical or mental impairment that substantially limits one or more major life activity; (2) has a record of an impairment; or (3) is being regarded as having such an limiting impairment. Individuals who are solely “regarded as having a disability” are not entitled to an RA.

e. Major Life Activities: Activities that most people in the general population can perform with little or no difficulty. Major life activities include, but are not limited to - caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, working, reaching, sitting and interacting with others. A major life activity can also include the operation of a major bodily function such as functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. This is not an exhaustive list, but is a representation of the types of activities that are considered major life activities.

f. Marginal Functions: Duties which are secondary or less significant to the purpose of the position. Relevant factors to consider in determining if a function is marginal are the same as included above in the definition of “essential functions”. Generally, a marginal function occupies a small percentage of an employee’s time; does not require special expertise or skills; could easily be reassigned or modified; or if removed, would not significantly alter the position.

g. Mitigating Measures: Measures to eliminate or reduce symptoms or impact of an impairment. Measures that control or compensate for the effects of an impairment and enable the person to function more effectively or comfortably. Such measures include medications, techniques, and devices. For purposes of assessing whether an individual has a disability, mitigating measures other than “ordinary eyeglasses or contact lenses” shall not be considered.

h. Qualified Person with a Disability: An individual with a disability who has the requisite skills, education and training (i.e. meets the basic “qualifications standards”) and can perform the essential (or fundamental) functions of a position held or desired with or without accommodation.

i. Reasonable Accommodation: A change in the work environment or the way things are customarily done that enables a qualified individual with a disability to enjoy equal employment opportunities. Some examples include, but are not limited to: making existing facilities accessible; providing application forms in alternative formats like large print or Braille; acquiring or modifying equipment; providing assistive devices; modifying work schedules; approving a flexible leave schedule; redesigning work spaces, modifying work sites; job restructuring; changing tests, training materials or policies; providing qualified readers or interpreters; and reassignment to a vacant position.

j. Substantially Limits: Congress has stated that “the question of whether an individual’s impairment qualifies as a disability should not demand extensive analysis.” The ADA modifies the definition of “substantially limits” to mean “materially restricts.” An impairment need not prevent or significantly restrict the individual in performing a major life activity to be considered “substantially limiting.” Determination of whether an individual is experiencing a substantial limitation in performing a major life activity is a common-sense assessment based on a comparison of an individual’s ability to perform a specific life activity with that of most people in the general population. Temporary, non-chronic impairments of short duration with little or no residual effects usually will not be considered disabilities.

k. Temporary Measures: Adjustments or alterations provided on a temporary, provisional basis while determining whether an employee is an individual with a disability who needs the accommodation requested. “Temporary measures” also include interim accommodation provided while awaiting permanent accommodation. Examples: Allowing telework pending structural renovations for accessibility, or providing a reader for a vision-impaired individual while awaiting receipt of assistive technology.

l. Undue Hardship: A specific accommodation that involves significant difficulty or expense. This determination, which must be made on a case-by-case basis, considers factors such as the impact that the nature and cost of the accommodation has on the operations of the agency; in this case, the Army.

m. Applicants: Defined as: “a person who has indicated an interest in being considered for hiring, promotion, or other employment opportunities.”

6. RESPONSIBILITIES.

a. Employees and Applicants: Employees and applicants are responsible for making their needs known and initiating RA requests. Additionally, employees or applicants must provide appropriate medical information related to the functional impairment at issue and work cooperatively with management in identifying and implementing an RA.

b. First Line Supervisors: First line supervisors are charged with the promotion and enforcement of this SOP. First line supervisors are responsible for receiving, reviewing, researching, and executing decisions regarding RA requests.

c. Directors/Staff Office Chiefs: Directors/Staff Office Chiefs or their designated representatives “deciding official” will make the final decision to approve or disapprove RA requests and will appropriately document all decisions. Additionally, Directors will complete and submit RA reports to the EEO Office quarterly.

d. Deputy to the Garrison Commander: The Deputy to the Garrison Commander will make the final decision for reconsideration requests for USAG Benelux, USAG Brussels and USAG Schinnen.

e. EEO Manager: The EEO Manager will review all formal requests prior to the issuance of a final decision to ensure the agency has considered relevant regulatory requirements and compile data on all RAs.

f. The CPAC Director will review all formal requests prior to the issuance of a final decision to ensure the Army has considered relevant regulatory requirements and will safeguard medical information obtained during the request process IAW applicable federal regulations. Additionally, CPAC will assist in assessing qualifications if reassignment is the only effective accommodation.

g. Staff Judge Advocate: The Staff Judge Advocate (SJA) will review all formal requests prior to the issuance of a final decision for legal sufficiency and to ensure the Army has considered relevant regulatory requirements.

h. Directorate of Resource Management: The Directorate of Resource Management will provide information regarding current vacancies within the Benelux, if reassignment is the only effective accommodation.

i. Programs for Individuals with Disabilities Manager: The Program for Individuals with Disabilities (PIWD) Manager is responsible for providing assistance to both managers and employees throughout the accommodation process.

7. PROCEDURES FOR REQUESTING REASONABLE ACCOMMODATION.

a. Applicants. An applicant for employment who requires a RA to successfully complete the application process may request such an accommodation orally or by submitting a written request to the CPAC Director. As appropriate, the CPAC Director will arrange an accommodation. If the requested accommodation does not appear reasonable, the CPAC Director will consult with the EEO Manager, the PIWD and SJA prior to issuing a decision. If after consultation, a request is denied, applicants will be informed in writing of the denial within thirty (30) business days from the receipt of the request, and the complaint procedures will be made available to the applicant.

b. Employees. An employee may initiate a request for RA orally or in writing. The requester does not have to use any particular words or cite the Rehabilitation Act of 1973 or use the term "reasonable accommodation." The RA process is initiated when a person indicates the need for an adjustment, a change at work for a reason related to a medical condition. Requests for RA should be made to the employee's first line supervisor. Requests may also be initiated with a higher level official within the employee's chain or with the EEO Manager. An RA request may be made by either the individual with a disability, a family member of the individual, a health professional or any other representative acting on the individual's behalf. Employees are encouraged to informally discuss their desire for an RA with their first line supervisor and to submit a written confirmation of the request for an RA using the Confirmation of Request for Reasonable Accommodation at Appendix A.

8. PROCEDURES FOR OFFICIALS RECEIVING REQUESTS FOR REASONABLE ACCOMMODATION.

a. Because an RA request does not have to contain any magic words or be in writing, first line supervisors must become familiar with RA obligations. Any time an employee or an applicant for employment asks for some change in the workplace or in the way things are usually done because of a medical condition, the first line supervisors must immediately consider whether the obligations under RA law applies before denying any request. The first line supervisor or designated representative or other official receiving the request for RA will provide the requester with the Confirmation of Request for Reasonable Accommodation at Appendix A and ask that the form be completed. In cases where the request for RA is expressed/given to a management official other than the first line supervisor (or designated representative), the RA request will be forwarded to the first line supervisor for processing.

b. Each RA request will be different and will be considered on a case-by-case basis. It is of the utmost importance that RA requests are reviewed, determined and documented in a timely manner. Failure to initiate the processing of any request (oral or in writing) may result in undue delay in providing an RA, which is a violation of the Rehabilitation Act. The deciding official must issue a **written decision** to the employee or applicant **as soon as possible or within thirty (30) business days** of the receipt of the request. If there are extenuating circumstances that will preclude providing the RA within thirty (30) business days, the requester will be **notified of the reason for the delay** on or before the expiration of the thirty (30) day window and will be provided the anticipated completion date **in writing**.

c. The first line supervisor or deciding official will notify the EEO Manager that a request has been received; the date of the request, the name of the employee making the request, and the accommodation requested and the deciding official will use the following procedures to make their determination regarding the RA request.

(1) Determine Disability and Functional Limitations. Determine if the individual has is a qualified person with disability as defined by law (see key terms), and identify the associated functional limitations. The deciding official may request medical documentation sufficient to substantiate that the individual has a disability but must not request medical documentation where the disability or need for accommodation are obvious or otherwise known, or when the individual has already provided sufficient information. When requesting medical documentation at the deciding official's direction, the first line supervisor should specify what types of information they are seeking regarding the disability, its functional limitations, and the need for an RA. First line supervisors may ask the requester for a limited medical release (see sample at Appendix B DoD Form 2870) allowing them to submit a list of specific questions to the health care or vocational professional regarding the nature, severity, and duration of the impairment. If an individual's disability or need for an RA is not obvious, and the

individual refuses to provide the reasonable documentation requested by the first line supervisor, then the requester would not be entitled to an RA.

(2) Determine Essential and Marginal Functions. The first line supervisor will conduct a job analysis to determine the essential and marginal functions of the position, as well as the physical requirements.

(3) Engage in an Interactive Process. Accommodations vary depending on the needs of the person with a disability, the functional limitation and the nature of the job. Therefore, the first line supervisor must engage in an interactive process of exploring accommodation options with the requester and keep him/her informed of the status of the RA request. The goal is to provide an accommodation that is **effective**. Meet, talk, dialogue, discuss, communicate, brainstorm, and explore ideas, options and alternatives. As part of the interactive process, the first line supervisor may offer suggestions and discuss the effectiveness of removing workplace barriers that impede the individual with a disability. The EEO manager can provide assistance during this process.

(4) On the other hand, failure by the first line supervisor or deciding official to initiate or participate in an informal dialogue with the individual after receiving a request for reasonable accommodation could result in liability for failure to provide an RA. When assessing whether an individual has a disability, mitigating measures other than “ordinary eyeglasses or contact lenses” shall not be considered. If the employee does not appear to have a disability (e.g., the employee has an apparently temporary injury), temporary measures should be implemented while the employee’s disability status is determined, unless an undue hardship would result. Temporary measures may be offered or continued without a determination of disability but should not be referred to as a “reasonable accommodation,” as that is the term referring to a legal right of an individual with a disability.

(5) Determine Effective Accommodation. Determine the accommodation that will effectively meet the needs of the employee. Equipment may be ordered and services can be provided through the Computer/Electronic Accommodation Program (CAP) at no cost to the activity (<http://www.tricare.osd.mil/cap/>) If there are two possible accommodations and one costs more or is more burdensome than the other, the Director/Staff Office Chief may choose the less expensive or burdensome accommodation as long as it is effective. Additionally, the first line supervisor may choose the accommodation that is easier to provide. If more than one accommodation is effective, “the preference of the individual with a disability should be given primary consideration. However, the first line supervisor providing the accommodation has the ultimate discretion to choose between effective accommodations.” If the employee’s request is denied, the **written determination** will include detailed reasons as to why the request is not granted.

(6) Document the Decision. All decisions must be documented in writing and presented to the requester within **thirty (30) business days** (see key terms for the

definition of extenuating circumstances). Prepare a Proposed Letter of Decision (Appendix C). Summarize the request; detail the proposed accommodation; and include a specific description of the actions being taken. If an alternative accommodation is proposed, include rationale for the decision to implement an alternate RA. Ensure the letter informs the requester of their rights to reconsideration (within 10 calendar days) and to initiate an EEO complaint (within 45 calendar days). Staff the Proposed Letter of Decision to ensure legal sufficiency and compliance with regulatory requirement (example Staff Summary (Appendix D)). The letter will be signed by the Director/Staff Office Chief and presented to the requester.

(7) Implement the Accommodation. If an RA is approved, implement the accommodation within a timely manner and monitor to ensure the accommodation is effective. This will take no more than **thirty (30) business days** from the date of the decision.

(8) Report the Accommodation. All Directors/Staff Office Chiefs must keep records of accommodations and submit the Reasonable Accommodation Information Report (Appendix G) at the end of every quarter. The annual report is due to **EEO NLT 15 October**. The information will include: the type of accommodation provided; the cost of the accommodation; the name, occupational series and grade level of the employee; the amount of time taken to process the request; any sources of technical assistance that were consulted; if request was denied; the reason for denial; and any recommendations for improving the RA policy or procedures.

9. MEDICAL DOCUMENTATION AND CONFIDENTIALITY.

a. The deciding official has the right to know if an employee or applicant has a covered condition or impairment that requires an RA. When a condition or impairment and/or need for an accommodation are not obvious, the deciding official may require the employee or applicant to provide documentation about the condition or impairment and functional limitations. The deciding official may also request supplemental documentation when the information submitted is deemed insufficient to document the condition or impairment and/or function limitations the condition or impairment causes. When requesting medical documentation, the deciding official is required to explain to the requesting employee or applicant that failure to provide requested information may result in a denial of the RA. If the employee or applicant refuses to provide reasonable documentation requested by the employer, then the employee or applicant is not entitled to an RA. However, if the employee subsequently provides adequate documentation, the obligation to provide an RA is renewed but not retroactive.

b. The deciding official may not ask for unrelated medical documentation or information that is not reasonably required to determine the need for accommodation.

c. The deciding official may require an employee to go to a health care professional of management's choice, if the documentation provided by the employee from his physician or other health care provider is not sufficient to substantiate that the employee

has a disability and needs an accommodation. The deciding official must first explain the documentation was not sufficient and allow the employee an opportunity to provide the additional information in a timely manner.

d. To determine if the information provided by the employee is adequate to substantiate disability and the need for the requested accommodation, the deciding official has the right to have the medical information provided by the employee reviewed by the agency's own medical expert—at no cost to the employee.

e. Medical information must be requested in writing. To assist the physician or other health care professional, the employee or applicant will be given a copy of the Department of Defense Form 2870, Authorization for Disclosure of Medical or Dental Information (Appendix B) and a copy of the position description to take to the appointment. The applicant or employee should check "OTHER," Block 7 of DD Form 2870 and write "reasonable accommodation request" in the space provided. In most cases, entire medical records may not be requested or furnished because they are likely to contain information unrelated to whether an applicant or employee can perform the essential job functions.

f. When medical information is requested, all time frames freeze beginning the date the **written** request for medical information is given to the employee or applicant. Once the employee provides the requested medical documentation, the first line supervisor or deciding official will determine if the medical information provided adequately addresses the employee's or applicant's condition and limitations to enable the deciding official to make a determination regarding the RA request. The employee's or applicant's documentation will be accepted as adequate, or the employee or applicant will be notified of the specific insufficiency of the documentation within fifteen **(15) business days**. If the documentation received is believed to be insufficient, the first line supervisor will consult with the EEO Officer, the PIWD, the CPAC Director, and the SJA concerning requests for additional information and/or examination by an Army health care provider. Under no circumstances will the employee or applicant be directed to undergo an examination without prior review by the EEO Officer, the PIWD, CPAC Director, and the SJA.

g. Access to the employee's or applicant's medical information will be strictly limited. However, the information may be disclosed to those involved in determining whether to grant the reasonable accommodation. Where medical information is disclosed, the individuals will be informed about the confidentiality requirements. In addition, the following exceptions apply:

(1) First line supervisors who need to know may be told about necessary restrictions on the work or duties of the employee and about the necessary accommodation(s).

(2) First aid and safety personnel may be told if the disability might require emergency treatment.

(3) Government officials may be given information necessary to investigate the Army's compliance with Rehabilitation Act.

(4) The information may in certain circumstances be disclosed to workers' compensation offices or insurance carriers.

(5) EEO officials may be given the information to maintain records and evaluate and report on the Army's performance in processing RA requests.

h. Confidentiality provisions do not permit the agency to tell coworkers that an employee with a disability is receiving an RA. Supervisors already keep many types of information confidential despite inquiries from their workers, such as personnel decisions. This situation should be treated in a similar fashion. A manager could respond that in order to protect the privacy of all employees, he/she does not discuss one employee's situation with another and assure the coworker that the employee is meeting the employer's work requirements.

10. USING A REASSIGNMENT AS A REASONABLE ACCOMMODATION.

a. When it is determined that no RA will permit an individual with a disability to perform the essential functions of his or her current position, reassignment must be considered as an RA prior to terminating an individual with a disability. Reassignment may not be considered unless the employee cannot be accommodated in his or her current position, or the employee voluntarily agrees. Reassignment should be considered even if not specifically requested. Reassignments as an RA are only available to employees, not to applicants.

b. The deciding official will first search for vacancies within the employee's organization which will permit the employee with a disability to perform the essential functions of the position in that organization. If no vacancy for reassignment is available within the employee's organization, the first line supervisor and the deciding official will meet with the employee to discuss the parameters of a search for reassignment. The EEO Officer, the PIWD, CPAC Director, and SJA may be consulted during this discussion. During this discussion, the employee will be given an explanation as to why the employee cannot be accommodated in his or her current position and the employee will be asked what parameters he or she has with respect to the reassignment. For example, is the employee willing to be reassigned outside the facility or outside the commuting area, and if so, to what locations; is the employee willing to be reassigned to a different type of position for which he or she may be qualified, and if so, to what type(s); is the employee willing to be reassigned to a different sub-component of the department, if so, to which one(s); and is the employee willing, if no position is available at his or her current grade level, to be reassigned to a lower-grade/banded position, and if so, down to what grade/band. After this meeting, the first line supervisor will create a Memorandum for the Record or similar document to record the discussion. A copy of

this record will be given to the employee and the employee will be given the opportunity to comment on the accuracy of the record.

c. The employee may be asked to provide a resume to assist with qualification determinations.

d. The first line supervisor, in conjunction with representatives of Resource Management and CPAC will conduct a vacancy search. The search will begin within the employee's organization and expand as necessary using the employee's preferences. The search for a reassignment will last no more than sixty (60) calendar days from the date the record of the meeting with the employee to discuss the parameters of the search.

11. DENIAL OF REQUESTED ACCOMMODATION.

a. Deciding officials must consult directly with the PIWD and obtain a legal review by the SJA prior to denying a request for accommodation or the particular accommodation requested.

b. When an individual's request for an accommodation is denied, the individual must be notified in writing of the denial and the specific reasons for the denial (e.g. why the medical documentation is inadequate to establish that the individual has a disability or needs an RA, why the requested accommodation would not be effective, or why the accommodation would pose an undue hardship). The deciding official must document their decision using the Sample Determination Letter at Appendix C. In determining whether a proposed RA poses an undue hardship, the overall resources and options available to the Army must be considered, not just the budget or resources of an individual segment, sub-component, or division within the Army.

12. FREEDOM FROM REPRISAL OR INTERFERENCE. Employees and applicants shall be allowed to exercise their rights under this procedure without reprisal. No adverse personnel actions shall be taken or favorable actions denied, as a result of any individual's exercise of his/her rights provided by references a through k.

13. REQUESTS FOR RECONSIDERATION. If the individual requesting the accommodation disagrees with the determination, he/she may request reconsideration by completing the Reconsideration of an Accommodation Request at Appendix E and submitting it to the EEO Office within ten (10) calendar days of the date the written determination is issued. Full and impartial consideration will be given to the request and a written notice of final decision will be issued by the Deputy to the Garrison Commander. The following should be attached to requests for reconsideration.

a. A copy of the original Confirmation of Request for Reasonable Accommodation.

b. A copy of the Letter of Decision Regarding a Reasonable Accommodation Request.

c. Information supporting the reconsideration request such as affidavits, supporting evidence, and rationale.

14. **EEO COMPLAINTS.** If the individual requesting the accommodation believes he/she has been discriminated against on the basis of their race, color, national origin, religion, sex, age, physical or mental disability, genetic information, and/or reprisal, they have a right to file a complaint of discrimination with the EEO Office. Complaints of discrimination will be processed in accordance with 29 CFR 1614. To be timely, complaints must be filed within forty-five (45) calendar days of the date of the alleged discriminatory event.

APPENDIX B – DD 2870

AUTHORIZATION FOR DISCLOSURE OF MEDICAL OR DENTAL INFORMATION		
PRIVACY ACT STATEMENT		
<p>In accordance with the Privacy Act of 1974 (Public Law 93-579), the notice informs you of the purpose of the form and how it will be used. Please read it carefully.</p> <p>AUTHORITY: Public Law 104-191; E.O. 9397 (SSAN); DoD 6025.18-R.</p> <p>PRINCIPAL PURPOSE(S): This form is to provide the Military Treatment Facility/Dental Treatment Facility/TRICARE Health Plan with a means to request the use and/or disclosure of an individual's protected health information.</p> <p>ROUTINE USE(S): To any third party or the individual upon authorization for the disclosure from the individual for: personal use; insurance; continued medical care; school; legal; retirement/separation; or other reasons.</p> <p>DISCLOSURE: Voluntary. Failure to sign the authorization form will result in the non-release of the protected health information.</p> <p>This form will not be used for the authorization to disclose alcohol or drug abuse patient information from medical records or for authorization to disclose information from records of an alcohol or drug abuse treatment program. In addition, any use as an authorization to use or disclose psychotherapy notes may not be combined with another authorization except one to use or disclose psychotherapy notes.</p>		
SECTION I - PATIENT DATA		
1. NAME (<i>Last, First, Middle Initial</i>)	2. DATE OF BIRTH (YYYYMMDD)	3. SOCIAL SECURITY NUMBER
4. PERIOD OF TREATMENT: FROM - TO (YYYYMMDD)	5. TYPE OF TREATMENT (<i>X one</i>)	
	<input type="checkbox"/> OUTPATIENT	<input type="checkbox"/> INPATIENT <input type="checkbox"/> BOTH
SECTION II - DISCLOSURE		
6. I AUTHORIZE _____ TO RELEASE MY PATIENT INFORMATION TO:		
<i>(Name of Facility/TRICARE Health Plan)</i>		
a. NAME OF PHYSICIAN, FACILITY, OR TRICARE HEALTH PLAN	b. ADDRESS (<i>Street, City, State and ZIP Code</i>)	
c. TELEPHONE (<i>Include Area Code</i>)	d. FAX (<i>Include Area Code</i>)	
7. REASON FOR REQUEST/USE OF MEDICAL INFORMATION (<i>X as applicable</i>)		
<input type="checkbox"/> PERSONAL USE	<input type="checkbox"/> CONTINUED MEDICAL CARE	<input type="checkbox"/> SCHOOL
<input type="checkbox"/> INSURANCE	<input type="checkbox"/> RETIREMENT/SEPARATION	<input type="checkbox"/> LEGAL <input type="checkbox"/> OTHER
8. INFORMATION TO BE RELEASED		
9. AUTHORIZATION START DATE (YYYYMMDD)	10. AUTHORIZATION EXPIRATION	
	<input type="checkbox"/> DATE (YYYYMMDD)	<input type="checkbox"/> ACTION COMPLETED
SECTION III - RELEASE AUTHORIZATION		
<p>I understand that:</p> <p>a. I have the right to revoke this authorization at any time. My revocation must be in writing and provided to the facility where my medical records are kept or to the TMA Privacy Officer if this is an authorization for information possessed by the TRICARE Health Plan rather than an MTF or DTF. I am aware that if I later revoke this authorization, the person(s) I herein name will have used and/or disclosed my protected information on the basis of this authorization.</p> <p>b. If I authorize my protected health information to be disclosed to someone who is not required to comply with federal privacy protection regulations, then such information may be re-disclosed and would no longer be protected.</p> <p>c. I have a right to inspect and receive a copy of my own protected health information to be used or disclosed, in accordance with the requirements of the federal privacy protection regulations found in the Privacy Act and 45 CFR §164.524.</p> <p>d. The Military Health System (which includes the TRICARE Health Plan) may not condition treatment in MTFs/DTFs, payment by the TRICARE Health Plan, enrollment in the TRICARE Health Plan or eligibility for TRICARE Health Plan benefits on failure to obtain this authorization. I request and authorize the named provider/treatment facility/TRICARE Health Plan to release the information described above to the named individual/organization indicated.</p>		
11. SIGNATURE OF PATIENT/PARENT/LEGAL REPRESENTATIVE	12. RELATIONSHIP TO PATIENT <i>(if applicable)</i>	13. DATE (YYYYMMDD)
SECTION IV - FOR STAFF USE ONLY (<i>To be completed only upon receipt of written revocation</i>)		
14. X IF APPLICABLE:	15. REVOCATION COMPLETED BY	16. DATE (YYYYMMDD)
<input type="checkbox"/> AUTHORIZATION REVOKED		
17. IMPRINT OF PATIENT IDENTIFICATION PLATE WHEN AVAILABLE	SPONSOR NAME: SPONSOR RANK: FMP/SPONSOR SSN: BRANCH OF SERVICE: PHONE NUMBER:	

APPENDIX C
Sample Determination Letter

IMEU-SCH-(Office Symbol)

Date

MEMORANDUM FOR (Requester's Name and Organization)

SUBJECT: Letter of Decision Regarding a Reasonable Accommodation Request

1. The Directorate of ____ has received and considered your request for reasonable accommodation dated ____ (Encl 1), in which you asked for the following accommodation/s:

2. The command has taken or proposes to take the following actions in response to your request for accommodation. (List the requested accommodation, indicated your decision (approved/disapproved) and provide details regarding the rationale for your decision(s). When accommodations are denied provide the specific reasons, e.g. the requested accommodation is ineffective because..., accommodation would cause an undue hardship because..., medical documentation inadequate, accommodation would require removal of an essential function, accommodation would require lowering of performance or production standard, etc.).

3. Please be advised that you have the following rights in regard to this determination.

a. If you disagree with the decision, you may request reconsideration by presenting a Reconsideration of an Accommodation Request (Encl 2) and any additional information to the Deputy to the Garrison Commander within ten (10) business days of receipt of this determination.

b. If you believe you have been discriminated against on the basis of your race, color, national origin, religion, sex, age, physical or mental disability, genetic information and/or reprisal, you have a right to file a complaint of discrimination with the Equal Employment Opportunity Office. To be timely, complaints must be filed within 45-calendar days of the date of receipt of this decision.

4. This decision will be reviewed in 90-calendar days. If you believe USAG ____ has failed to comply with the terms of this accommodation letter, you may notify the Equal Employment Opportunity Office of the alleged noncompliance within thirty (30) calendar days of when you knew or should have known of the alleged noncompliance. You may ask that the terms of the decision be specifically implemented or, alternatively, file an application for reconsideration or initiate a complaint.

2 Encls

Signature of Director

1. Confirmation of Request for RA
2. Reconsideration of an Accommodation Request

APPENDIX D
Sample Staff Summary

U. S. ARMY GARRISON SCHINNEN STAFF ACTION COVER SHEET				
FWD TO: Director/Staff Office Chief	SUBJECT: Originating Office			
DATE:	SUSPENSE DATE:			
FOR: GC <input type="checkbox"/> INFORMATION <input checked="" type="checkbox"/> DECISION <input type="checkbox"/> SIGNATURE				
COMMAND GROUP ROUTING	INITIALS	DATE	REMARKS	
1. Admin Office				
2. DGC				
3. GC				
<p>1. Purpose: To coordinate RA request and decision.</p> <p>2. Recommendation: Strongly recommend approval.</p> <p>3. Discussion: Section 501 of the Rehabilitation Act as amended and the Americans with Disabilities Act as amended, prohibits discrimination on the basis of disability in Federal employment and requires the Federal government to provide reasonable accommodations. This directorate has engaged in the interactive RA process as designated in the Benelux SOP for Providing Accommodation for Individuals with Disabilities.</p>				
	NAME/SIGNATURE	DATE	COMMENTS	
EEOO			CONCUR / NONCONCUR	
CPAC			CONCUR / NONCONCUR	
SJA			CONCUR / NONCONCUR	
NAME/ACTION OFFICER	OFFICE	SIGNATURE	PHONE	DATE

APPENDIX F
Reasonable Accommodation Information Report

REASONABLE ACCOMMODATION REPORT
WORK UNIT INFORMATION: Directorate/Section/Unit: First Line Supervisor: Work Phone: Email Address:
RA PROVIDED TO: Name: Series/Grade:
TYPE OF RA PROVIDED:
IF RA WAS DENIED, LIST THE REASON(S) AND RATIONAL:
COST OF RA PROVIDED:
AMOUNT OF TIME TO PROCESS THE REQUEST: Date of Request for RA: Date of Determination Letter: Date of Implementation of RA:
ATTACHMENTS: <ul style="list-style-type: none"><input type="checkbox"/> Copy of the original Confirmation of Request for Reasonable Accommodation<input type="checkbox"/> Copy of the Letter of Decision Regarding a Reasonable Accommodation Request