



DEPARTMENT OF THE NAVY
SECRETARY OF THE NAVY COUNCIL OF REVIEW BOARDS
720 KENNON STREET SE STE 309
WASHINGTON NAVY YARD DC 20374-5023

IN REPLY REFER TO

1850
CORB/PEB
29 Aug 11

SECNAVCORB POLICY LETTER 2011-2

From: Director, Secretary of the Navy Council of Review Boards

Subj: Overseas Integrated Disability Evaluation System (IDES) Case Processing

Ref: (a) ASN (M&RA) memo of 15 Aug 2011
(b) SECNAVINST 1850.4E

Encl: (1) Overseas IDES Referral Election of Options

1. Purpose and Policy. Pursuant to reference (a) this policy letter provides guidance and procedure to the Physical Evaluation Board (PEB) in handling cases of service members from overseas Military Treatment Facilities (MTF) in order to determine whether the service member should be referred into the IDES. Service members recommended for referral into the IDES will be issued permanent change of station orders to a CONUS IDES MTF by the appropriate service headquarters.

2. Legal Standard. Service members shall be recommended for referral into the IDES when a preponderance of the evidence suggests a medical condition(s) impacts the service member's ability to perform the duties of his/her office, grade, rank, or rating. The PEB will evaluate whether each MTF referred medical condition warrants entering the member into the IDES.

3. Procedure.

a. Upon receipt of a case from an overseas MTF, the PEB will direct a panel of Officers as set forth in reference (a) to evaluate if the service member should be referred into the IDES using the legal standard above.

b. The PEB's determination shall be forwarded to the Commanding Officer of the MTF referring the case to the PEB via the assigned PEBLO/MEB collateral duty officer. The service member shall receive a copy of the PEB's referral determination and an election of options.

c. Within 5 days upon notification of the PEB's determination, the service member shall execute his/her election of options and may request the PEB reconsider its determination. Enclosure (1) shall be used when requesting a PEB reconsideration. The service member is highly encouraged to submit new medical or non-medical evidence to support his/her position when requesting reconsideration.

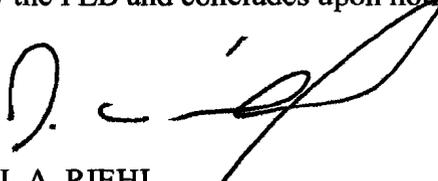
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d. Generally, a service member's request for reconsideration will be reviewed by the same panel of officers who initially reviewed the case. The panel shall review the request and any additional information submitted by the service member under the legal standard defined above.

e. The PEB shall notify by letter the Chief of Naval Personnel (CNP) or Deputy Commandant, Manpower & Reserve Affairs (DC (M&RA)), as applicable, of the recommendation for IDES referral.

f. Following referral of a member into the IDES, and after receipt of the member's complete IDES case from the MTF and the Compensation and Pension exam from the Veteran's Administration, the PEB will adjudicate the service member's fitness for continued Naval service. The service member will receive all rights and privileges provided under reference (b), including an opportunity for a full and fair hearing before the Formal Physical Evaluation Board.

4. Case Processing Timeline. The PEB's referral determination that overseas cases should be referred into the IDES shall be completed within twenty-one calendar days. The twenty-one calendar days begins at acceptance of the case by the PEB and concludes upon notification to the respective service headquarters.



J. A. RIEHL

Copy to:
President, PEB
Senior Legal Counsel, CORB

RECOMMENDED REFERRAL INTO IDES

Date: _____

From: _____

To: President, Physical Evaluation Board

Subj: ELECTION OF OPTIONS

Encl: (1) Request for Reconsideration

1. I am in receipt of the results of the Department of the Navy's Physical Evaluation Board (PEB) determination for referral into the IDES. In response, I request the following (select one of the following):

____ a. I agree with the PEB's determination that I be referred into the IDES. I understand that within 90 days of today's date I will be issued Permanent Change of Station (PCS) orders to a command within CONUS. I understand that the PEB's determination that I be referred into the IDES does not constitute a finding of unfitness for any medical condition for which I am referred, but serves only as an administrative decision of the appropriateness of my medical condition(s) for referral into the IDES; or

____ b. I agree with the PEB's determination that I be referred into the IDES, however I request the PEB reconsider other medical conditions which I believe warrant referral into the IDES. I have submitted my request for reconsideration in enclosure (1).

____ c. I do not agree with the PEB's determination to refer me into the IDES, and I request the PEB reconsider its decision. I have submitted my request for reconsideration in enclosure (1).

____ d. I choose to make the following statement:

Print: _____

Signature: _____

Date: _____

Encl (1)

NOT RECOMMENDED REFERRAL INTO IDES

Date: _____

From: _____
To: President, Physical Evaluation Board

Subj: ELECTION OF OPTIONS

Encl: (1) Request for Reconsideration

1. I am in receipt of the results of the Department of the Navy's Physical Evaluation Board (PEB) determination for referral into the IDES. In response I request the following (select one of the following):

___ a. I agree with the PEB's determination that I not be referred into the IDES.

___ b. I do not agree with the PEB's determination that I not be referred into the IDES, and I have submitted a request for reconsideration in enclosure (1).

___ c. I choose to make the following statement:

Print: _____

Signature: _____

Date: _____