



EFMP Identification & Enrollment

Army National Guard Enrollment Information and Instructions

WHO:

- **Required Enrollments:** ARNG Soldiers serving more than 30 consecutive days on Title 10 or most Title 32 U.S. Code authorized orders, to include Active Duty Operational Support (ADOS), with family members who meet the eligibility criteria for special medical or educational needs, as defined by DODI 1315.19, AR 608-75 and NGR 608-1, must enroll in EFMP.
- **Voluntary Enrollments:** ARNG Soldiers, who do not meet the 30 consecutive days on authorized orders threshold, with family members who meet the eligibility criteria for special medical or educational needs, may voluntarily enroll in EFMP. Voluntary enrollment is encouraged because it allows Soldier access to EFMP resources immediately upon entering an eligible active duty status (i.e. Soldier is slated for deployment).

WHAT:

- A family member (child or adult) may be eligible if they have a medical, emotional, developmental, or intellectual need requiring ongoing specialized care beyond what a regular doctor can provide.

WHEN:

- All ARNG Soldiers should be assessed/screened for EFMP eligibility prior to entering an eligible status, and proceed with enrollment, if applicable.
- Once enrolled, Soldier must keep medical and/or educational needs documentation current in the Enterprise-EFMP (E-EFMP) system as exceptional family member conditions change or every 3 years, whichever comes first.

WHERE:

- The Military Treatment Facility (MTF) EFMP Office responsible for the area where family members are geographically located will coordinate the enrollment and determine documentation requirements.
- To find the servicing MTF, go to: <https://efmp.army.afpims.mil/Contact-Us/CONUS-Map/>

WHY:

- **Assignment Coordination:** Helps to ensure Soldiers are assigned to locations where their family's needs can be met.
- **TRICARE Extended Care Health Option (ECHO):** Provides financial assistance to beneficiaries with special needs for an integrated set of services and supplies.
- **Respite Care Program:** A component of EFMP that provides a temporary rest period for family members responsible for regular care of people with disabilities.
- **Legal Support:** All Army Legal Assistance Offices are available to provide EFMP families legal counseling.
- **DirectSTEP eCourse Program:** Online courses offered at no charge to EFMP families. Follow instructions under "Is This Your First Time Here?" to self-register and create an account: <https://armyefmp2023-ds.lrp.com/>

HOW:

- Complete the EFMP Self-Assessment online <https://forms.osi.apps.mil/r/mLa1WeD2QX> or by scanning the QR Code below. If the answer is "yes" to any of the EFMP assessment questions, the Soldier should initiate a Medical and/or Educational Enrollment Packet for the family member with special needs on the E-EFMP website at <https://efmp.army.mil/EnterpriseEfmp/>. The E-EFMP website will guide you through the process and create the necessary forms.
- Schedule a family member enrollment screening appointment by contacting the servicing MTF EFMP Office.



ARNG EFMP Office-National Guard Bureau
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(571) 714-7100 / (571) 714-7101





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EFMP Self-Assessment Questions

As you approach your Title 10, Title 32, or Active Duty Operational Support (ADOS) assignment, you should ask yourself the questions below. If the answer is “yes” to any of the questions, you should initiate an enrollment package in Enterprise EFMP (<https://efmp.army.mil/EnterpriseEfmp/Login>) and make an appointment at your local Medical Treatment Facility (MTF) Exceptional Family Member Program (EFMP) office for an enrollment screening.

1. Do any of your dependents have?

- a. A potentially life-threatening condition(s) and/or chronic medical/physical condition(s) (such as high-risk newborns, patients with a diagnosis of cancer within the last 5 years, sickle cell disease, insulin-dependent diabetes) requiring follow-up support more than once a year or specialty care.
- b. Current and chronic (duration of 6 months or longer) mental health condition (such as bipolar, conduct, major affective, or thought and/or personality disorders), inpatient or intensive outpatient mental health service within the last 5 years; intensive (greater than one visit monthly for more than 6 months) mental health services required at the present time. This includes medical care from any provider, including a primary health care provider.
- c. A diagnosis of asthma or other respiratory-related diagnosis with chronic recurring wheezing which meets one of the following criteria:
 - Scheduled use of inhaled and anti-inflammatory agents and/or bronchodilators.
 - History of emergency room use or clinic visits for acute asthma exacerbations within the last year.
 - History of one or more hospitalizations for asthma within the past 5 years.
 - History of intensive care admissions for asthma within the past 5 years.
- d. A diagnosis of attention deficit disorder and/or attention deficit hyperactivity disorder that meets one of the following criteria:
 - A co-morbid psychological diagnosis.
 - Requires multiple medications, psycho-pharmaceuticals (other than stimulants) or does not respond to normal doses of medication.
 - Requires management and treatment by mental health provider (for example, psychiatrist, psychologist, and/or social worker).
 - Requires specialty consultant, other than a family practice physician or general medical officer, more than twice a year on a chronic basis.
 - Requires modification of the educational curriculum or the use of behavioral management staff.

2. Do any of your dependents require?

- a. Adaptive equipment (such as apnea home monitor, home nebulizer, wheelchair, splints, braces, orthotics, hearing aids, home oxygen therapy, home ventilator, and so forth).
- b. Assistive technology devices (such as communication devices) or services.
- c. Environmental and/or architectural considerations (such as limited number of steps, wheelchair accessibility and/or housing modifications, and air conditioning).

3. Do any of your dependents have special education needs?

- Have or require an Individualized Family Service Plan (IFSP)
- Have or require an Individualized Education Plan (IEP)

Please complete this EFMP Self-Assessment online or from your mobile device:

<https://forms.osi.apps.mil/r/mLa1WeD2QX>



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