



E-MAIL: usarmy.rucker.medcom-lahc.list.efmp@health.mil

Failure to e-mail may result in a delay responding to you or in the processing of your E-EFMP package.

To schedule an appointment:

Send an e-mail to the e-mail addresses listed above. Your appointment will be confirmed via e-mail. If you do not receive an e-mail, your appointment is not scheduled.

You will receive an **auto reply that provides information about Family Member Travel Screenings (FMTS) and EFMP enrollment updates and dis-enrollments.*

HOURS OF OPERATION

Monday	Closed to public (phone and walk-in) – processing packages
Tuesday	Appointments only: 0800 – 1500
Wednesday	Walk-ins: 0800 – 1500
Thursday	Walk-ins: 0800 – 1430
Friday	Closed to public (phone and walk-in) – processing packages
Closed	1200 – 1245: Mondays, Tuesdays, & Fridays
	1130 – 1615: 3 rd Wednesday or LAHC Training Days
	1130 – 1615: Training Holidays

We appreciate your patience as we process Family Member Travel Screenings (FMTS) and EFMP enrollment update packages for Southern Alabama, Southern Mississippi, and the Florida panhandle.

*******IF WE ARE UNAVAILABLE*******

Additional information is located in Public Health's waiting area, next to the water fountain.

Family Member Travel Screening (FMTS)

- Checklist
- What can we do without orders?
- PCM off post? Do not take one if your PCM is located at LAHC or another Military Treatment Facility (MTF).
 - Physicals for Family Members six years and older
 - Physicals for Family Members birth to five years

EFMP enrollment updates and disenrollments information

- DD 2792, Family Member Medical Summary
 - Only take a hard copy if your specialty or off post provider will complete this form.
 - Ensure you login to Enterprise-EFMP (E-EFMP) to print a list of the diagnoses your provider must address. Diagnoses you were enrolled for previously **MUST** be addressed.
- DD 2792-1, Early Intervention/Special Education Summary



334-255-7124

The floor plan of the second floor of the Behavioral Health Center includes the following rooms and areas:

- Medical Records
- Patient Admin Division (Release of Information)
- Elev
- Elev
- Public Health
- Occupational Health
- EFMP** (highlighted with a yellow star)
- EDIS
- Radiology CT Scan
- Behavioral Health
- Family Advocacy
- Patient Advocate
- Coffee Zone
- AOD DESK
- Nutritional Health
- PT check-in
- Pharmacy Overflow
- Laboratory
- Physical Therapy
- Eye & Ear
- Pharmacy
- Primary Care Clinic
- Patient Service Center / MCD Diagnostic Referrals
- Primary Care Clinic Check - In
- MRI Suite

Key entrances and paths are indicated:

- Front Door Patient Entrance**: Indicated by a green arrow pointing to the AOD DESK area.
- Behavior Health Entrance**: Indicated by a black arrow pointing to the Behavioral Health room.

Andrews Ave.

Failure to e-mail **BOTH** medical EFMP Case Coordinators may result in a delay responding to you or in the processing of your E-EFMP package.

Send an e-mail to the e-mail addresses listed above. Your appointment will be confirmed via e-mail. If you do not receive an e-mail, your appointment is not scheduled.

**You will receive an auto reply that provides information about Family Member Travel Screenings (FMTS) and EFMP enrollment updates and disenrollments.*



Family Member Travel Screening (FMTS) Checklist

We do not have orders yet, what can we do right now?

- Gather civilian medical records, last five years for each Family member. Complete physicals every year with your PCM
 - TRICARE Select/TRICARE Prime Remote/TRICARE Prime with off post provider
 - Schedule physical with your PCM off post.
 - If you need a blank physical form, the EFMP office can provide one for you.
 - TRICARE Prime with on post provider
 - Schedule a "Physical" with your PCM, do **NOT** request an "EFMP physical".
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We have orders!!! What do we do now?

****This does NOT require an appointment with EFMP.****

- Service member receive orders to PCS OCONUS.
 - Service Member registers on the Enterprise – EFMP (E-EFMP) website:
<https://efmp.army.mil>
Each Family Member(18+ years) being enrolled must have their own DS logon. Visit the link below to create one.
 - <https://myaccess.dmdc.osd.mil/identitymanagement/registration.do?execution=e1s1>
 - Ensure your contact number and e-mail are correct in MilConnect.
 - Service/Adult Family members receive email notifications from E-EFMP during each status update.
 - After logging into the E-EFMP website, scroll down the page and select "E-EFMP training"
 - Step-by-step instructions (PDF and video) are available on how to start a Family member travel screening
 - If your Family member's primary care provider is off post, send a copy of the physical to the EFMP e-mail listed above or upload it to E-EFMP. Notify the EFMP office if you upload documents.
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The E-EFMP website can be accessed on civilian computers and smartphones using your DS Logon.

Special circumstances are listed on the next page.

Notify the EFMP office immediately if any of these situations apply to your Family.

Family members lives in another location (outside Fort Rucker's catchment area).

- Contact our office as soon as possible. Your Family member's packet must be processed through the closest Army EFMP office to their physical location. (Your Family does NOT have to travel to the installation if they live at least 1 hour drive from the installation.)
 - Fort Rucker completes packets for:
 - Southern Alabama (below Prattville)
 - Southern Mississippi (below Carthage)
 - Florida panhandle (west of Blountstown and Port St. Joe)
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Spouse is pregnant and plans to have the baby PRIOR to PCSing.

- Request a deferment from the Branch/Assignment Manager due to the birth of your baby.
 - Contact DEERS/ID Card section find out how to add your newborn as a dependent.
 - Submit a new request for command sponsorship listing **ALL** Family members, to include your newborn. If you initiated a request that does not include your newborn, inform the EFMP Coordinator. The package will be ended.
 - Screenings for the mother and baby cannot be completed until the baby is born and completes the two week well baby exam. The EFMP case coordinator can complete a "pre-screen" on all other Family members and inform the Family if someone will require enrollment or not based on available medical records.*This may change if your FM receives a diagnosis, starts receiving specialty care, or receives accommodations at school.
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Spouse is pregnant and plans to have the baby AFTER PCSing OR Spouse becomes pregnant AFTER the screening is complete AND prior to PCSing.

- Contact the EFMP office IMMEDIATELY.
 - Cannot travel via airplane after 34 weeks gestation, unless:
 - Traveling to Europe? Must report **before** your FM is 30 weeks gestation.
 - Traveling to Japan? Must report **before** your FM is 28 weeks gestation.
 - DD form 2792, Jan 2021 - Family member medical summary. This packet is sent to the gaining installation to ensure adequate medical care (obstetrician and prenatal) is available upon your Family's arrival.
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New marriage

- Contact DEERS/ID Card section find out how to add your spouse as a dependent.
 - Contact your personnel office and request accompanied travel.
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Enrolled in EFMP?

- Each Family Member (FM) requires EFMP screening before travel, even if the FM is already registered in the EFMP.
 - If the FM is enrolled the EFMP screening confirms the specialty services are still required and provides an opportunity to update the status of your FM's status if it changed.
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EXCEPTIONAL FAMILY MEMBER PROGRAM (EFMP) IDENTIFICATION LIST

This list is NOT all inclusive.

CRITERIA FOR MANDATORY ENROLLMENT

1. Enrollment in the Exceptional Family Member Program (EFMP) is **mandatory** for all Family Members of Active Duty Army Service Members who meet identification criteria IAW AR 608-75 Appendix B.
2. Enroll Active Duty Family Members who **require** medical care **above** the level normally provided by a Family Practitioner or General Medical Officer in an outpatient clinic setting.
3. Enroll Active Duty Family Members with serious or chronic medical problems, physical disabilities, mental health disorders, equipment needs, or require intensive follow up support or special education services.

COMMON DIAGNOSES FOR MANDATORY ENROLLMENT, NOT ALL INCLUSIVE:

- ◆ ADD/ADHD
 - With another psychological diagnosis, **OR**
 - Requires multiple medications, psycho-pharmaceuticals (other than stimulants) or does not respond to normal doses of medication, **OR**
 - Requires management and specialty treatment by mental health provider (psychiatrist, psychologist, social worker, and/or counselor) **OR**
 - Requires specialty consultant, other than a Family practice physician or general medical officer, more than twice a year on a chronic basis, **OR**
 - Requires modification of the educational curriculum or the use of a behavior plan
- ◆ Allergies (*allergy shots or specialist follow up*)
- ◆ Asthma/Reactive Airway Disease
 - Scheduled use of inhaled and anti-inflammatory agents and/or bronchodilators.
 - History of ER/UCC visits in last 12 months
 - ICU or Hospitalization within past 5 years.
- ◆ Autism/Pervasive Developmental Disorders
- ◆ Autoimmune/Neuromuscular Disorders
- ◆ Cancer
 - **Unless** completed treatments AND in remission >5 years and requiring no further follow up
- ◆ Cervical Dysplasia
 - If requiring pap smears 2x/year or more **OR**
 - If requiring colposcopy
- ◆ Cerebral Palsy or Loss of Mobility
 - Require use of wheelchair, walker, or other aide
 - Require PT or OT
- ◆ Cleft Lip/Palate
 - Unless completed surgical repair and no longer receiving any services or follow up.
- ◆ Developmental Delay (*Also see Special Education*)
 - Requiring specialty follow-up
- ◆ Diabetes (*requiring frequent or specialist follow up, Type I or Type II DM*)
- ◆ Genetic Disorders/Congenital Anomalies (e.g., CF, Trisomy 21, Hydrocephalus, Spina Bifida, Fragile X)
- ◆ Hearing Problems/Deafness (*requiring hearing aides or specialty services*)
- ◆ Heart Conditions (*any conditions requiring frequent follow up or cardiology*)
- ◆ Inflammatory Bowel Disease (*requiring frequent or specialist follow up*)
- ◆ Immunodeficiency (*primary or secondary, including HIV/AIDS*)
- ◆ Medical Equipment (e.g., CPAP machine, g-tube, O2, pacemaker, shunt, tracheostomy, wheelchair or other aide)
- ◆ Mental Health Conditions
 - Current and chronic duration of 6+ months, inpatient or intensive outpatient MH services within the last 5 yrs.
 - Intensive outpatient MH services required at present time >1 monthly visit for more than 6 months, **this includes medical care from ANY provider, including PCM.**
- ◆ Seizure Disorders/Epilepsy
- ◆ Sickle Cell Disease/Bleeding disorders
- ◆ Special Education/Early Intervention Requirements
 - Requiring services at home using an Individualized Family Service Plan (*IFSP*)
 - Requiring accommodations at school using an Individualized Education Plan (*IEP*)
- ◆ Substance Abuse
- ◆ Thyroid Problems
- ◆ Vision Problems/Blindness
 - Sight not corrected with glasses **OR**
 - Any conditions requiring ophthalmology)

Any medical, psychological, or educational condition should be considered if specialty follow up is required.
Specialists include but are not limited to:

Allergy	Gastroenterology	Neurology	Otolaryngology (ENT)
Audiology	Hematology	Neurosurgery	Psychology
Cardiology	Immunology	Obstetric	Psychiatry
Dermatology	Infectious Disease	Gynecology	Pulmonology
Developmental Pediatrics	Internal Medicine	Oncology	Rheumatology
Endocrinology	Neonatology	Ophthalmology	Surgery
ENT	Nephrology	Orthopedic Surgery	Urology