



DEPARTMENTS OF THE ARMY AND THE AIR FORCE
NATIONAL GUARD BUREAU
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NGB-ARH

30 July 2008

MEMORANDUM FOR The Adjutants General of all States, Puerto Rico, the US Virgin Islands, Guam, and the Commanding General of the District of Columbia

SUBJECT: Exceptional Family Member Program (EFMP) Implementation for Active Guard Reserve (AGR) Personnel (NGB-ARH Policy Memo #08-024)

1. References:

- a. Department of Defense Directive (DODD) 1010.13, Provision of Medically Related Services to Children Receiving or Eligible to Receive Special Education in DOD Dependent Schools Outside the United States, 28 Aug. 86.
- b. DODD 1342.12, Provision of Early Intervention and Special Education Services to Eligible DOD Dependents in Overseas Areas, 12 Mar. 96.
- c. DODD 1342.17, Family Policy, 30 Dec. 88.
- d. AR 608-75, Exceptional Family Member Program, 22 Nov. 06.

2. Purpose. This memorandum establishes policy, assigns responsibility, and prescribes procedures for Soldiers with children and adult Exceptional Family Members (EFM).

3. Applicability. This memorandum applies to Army National Guard (ARNG) AGR personnel serving under the authority of Titles 10 and 32 of the United States Code who have Family members with special medical or educational needs.

4. General. The EFMP is designed to provide a coordinated approach during the duty assignment process for support to Families with special needs. When possible, assignments will be made to ensure the EFM has the medical or educational support required.

5. Enrollment. Soldiers with EFMs will enroll in the EFMP. Participants in the EFMP are permanently enrolled in the program unless the medical or special education needs warrant case closure or the Soldier is separated from the ARNG AGR program.

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6. Responsibilities.

a. Personnel Policy and Readiness Division (NGB-ARH):

- (1) Publish policy guidance for the ARNG EFMP.
- (2) Provide a representative to the Headquarters, Department of Army (HQDA) EFMP Committee.
- (3) Receive EFMP enrollment packets and forward originals of DA Form 2792 (EFM Medical Summary) and 2792-1 (EFM Special Education/Early Intervention Summary) to the appropriate AGR Managers for T10 and T32 AGR Soldiers.
- (4) Notify NGB directorates (ASM, HCM, and FP) of EFMP participants in the T10 AGR program.

b. Human Capital Management Office (NGB-HCM):

- (1) Notify T10 AGR Soldiers of EFMP enrollment.
- (2) Consider the medical and educational requirements of the EFM during the duty assignment process and when possible make assignments to accommodate the EFM needs.
- (3) Complete DA Form 7413 (EFMP Assignment Coordination Sheet) to document EFMP coordination during the initial phase of the military personnel assignment process.
- (4) Advise T10 AGR Soldiers to coordinate with the nearest active duty Medical Treatment Facility (MTF) EFMP Manager for enrollment into the program.
- (5) Advise Soldiers to provide DA Form 5888 (Family Member Deployment Screening Sheet) for OCONUS assignments to the gaining command for pre-coordination of services required upon request.
- (6) Advise Soldiers to update their EFMP enrollment status at least every 3 years.
- (7) Maintain original DA Forms 2792 and 2792-1 and forward copies to the Soldier.

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c. The Adjutant General:

(1) Assign a program manager to assess the needs of T32 AGR EFMs during the military personnel assignment process.

(2) Ensure that AGR Managers coordinate with the appropriate medical special needs advisor at the supporting MTF to determine availability of medical resources for the Soldier's EFM.

(3) Ensure assignments of Soldiers to an area where the educational or medical needs of the Soldier's EFM can be accommodated when it is consistent with the needs of the Army.

(4) Ensure all eligible T32 AGR family members are enrolled in the EFMP.

d. State AGR Managers:

(1) Notify T32 AGR Soldiers of the EFMP and enroll eligible EFMs for medical and education support.

(2) Assist T32 AGR Soldiers in coordinating with the nearest active duty MTF EFMP Manager for enrollment into the program.

(3) Complete DA Form 7413 to document EFMP coordination during the military duty assignment process and maintain in AGR personnel record.

(4) When possible, assign Soldiers to an area where the special needs of their EFM can be accommodated.

(5) Remind Soldiers of their responsibility to update EFMP enrollment at least every 3 years.

(6) Maintain original DA Forms 2792 and 2792-1 and forward copies to the Soldier.

(7) Provide EFMP Web site information to Soldier with eligible EFMs: www.militaryhomefront.DOD.mil and www.militaryonesource.com.

(8) Track EFMP enrollments and provide reports when requested to NGB-ARH.

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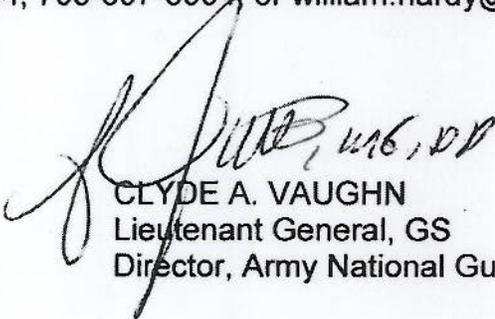
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e. State Surgeon. Ensure that procedures are implemented to refer Soldiers to the EFMP upon diagnosis of an eligible family member with a medical or educational condition which warrants enrollment into the program.

f. Individual Soldier. Soldiers are responsible for enrollment and for keeping the medical or special education needs documentation current as EFM conditions change or every 3 years, whichever comes first.

7. The privacy of all EFMP enrollment documents must be protected under the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. The HIPAA institutes business processes to protect the use and disclosure of protected health information (PHI), which is individually identifiable health information, including demographics, in paper, electronic, or oral form. For additional information regarding the HIPAA Privacy Rule, please refer to www.tricare.oas.mil/hipaa.

8. The point of contact is Mr. William Hardy, Acting Chief, Personnel Policy and Readiness Division, at DSN 327-5904, 703-607-5904, or william.hardy@us.army.mil.



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