



**DEFENSE HEALTH AGENCY**  
7700 ARLINGTON BOULEVARD, SUITE 5101  
FALLS CHURCH, VIRGINIA 22042-5101

Medical Affairs

27 May 2021

MEMORANDUM FOR Director, Central North Carolina Market  
Director, Coastal Mississippi Market  
Director, Jacksonville Market  
Director, National Capital Region Market  
Director, Tidewater Market  
Lead, Army Direct Support Organization  
Lead, Navy Direct Support Organization  
Lead, Air Force Direct Support Organization

SUBJECT: Re-Issue of Interim Guidance on Medical Standard Processes for Exceptional Family Members (EFMs) during Permanent Changes in Station (PCS)

This memorandum re-issues interim guidance released on October 13, 2020 on standard processes for military Medical Treatment Facilities (MTFs) to ensure smooth transitions of care during PCS moves for family members enrolled in the Exceptional Family Member Program (EFMP). DHA is re-issuing this guidance to remind MTFs of established standard processes to support EFMs during the upcoming PCS cycle (Attachment). The procedures in this guidance should be implemented, if necessary, based on the clinical judgment of the EFM's Primary Care Manager (PCM).

Please disseminate this memorandum to the leadership at each MTF. DHA will codify permanent guidance in a DHA-Procedural Instruction (DHA-PI) within the next year after receiving feedback from the Markets; this interim guidance applies until that time.

My point of contact is Ms. Regina Julian, at (571) 242-4639 or via E-mail at [regina.m.julian.civ@mail.mil](mailto:regina.m.julian.civ@mail.mil). Thank you for your leadership as we continue meeting the needs of our patients, families, communities, and the nation during this challenging time.

*Paul R. Cordts, MD*

Paul R. Cordts, MD  
Senior Executive Service  
Deputy Assistant Director - Medical Affairs

Attachment:  
As stated



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**OCT 13 2020**

**SUBJECT: Interim Guidance on Medical Standard Processes for Exceptional Family Members (EFMs) during Permanent Changes in Station (PCS)**

This memorandum establishes interim guidance on standard processes for military Medical Treatment Facilities (MTFs) to ensure transitions of care during PCS moves for family members enrolled in the Exceptional Family Member Program (EFMP). This guidance updates guidance released on 28 September 2020. In accordance with policy from the DoD Office of Special Needs, each Military Department operates an EFMP, which facilitates PCS assignments for Active Duty Service Members to ensure the needs of family members are considered in the assignment process. The EFMP also applies to active National Guard and Reserve members and their families.

The DHA is responsible for issuing guidance on the medical care and coordination aspect of EFMP. DHA interim medical EFMP guidance is as follows:

- Each MTF Commander or Director will identify an MTF Point-of-Contact (POC) to be responsible for the MTF responsibilities in this interim guidance.
- The MTF POC's organizational email address, address and location, operating hours and office telephone number must be posted on the MTF's webpage and in the MTF's telephone directory within 30 days of receipt of this interim guidance.
- Each MTF POC will coordinate with the installation personnel office(s) to obtain a list of Service members pending family moves at least monthly and will coordinate with the appropriate office to determine each beneficiary's TRICARE enrollment status; i.e., TRICARE Prime, TRICARE Select, TRICARE for Life (TFL), or U.S. Family Health Plan (USFHP). On joint bases, the MTF POC may have to coordinate with multiple Service personnel offices.
- If the family member is enrolled in EFMP and empaneled to a MTF, the POC will notify the MTF Primary Care Manager (PCM) of the impending move. The PCM and his/her Patient Centered Medical Home (PCMH) team will ensure a plan is in place during the PCS, including an updated medication reconciliation and/or any other needs and document the plan in the Electronic Medical Record (EMR).
- The losing PCMH team will retain responsibility for coordinating care for the EFMP patient until the patient is empaneled at the gaining MTF or to a network provider at

the new location. The PCMH team will inform the family that they are available via secure messaging and for virtual visits via telephone or video, if available, to address medical issues while the family is in transit. The PCM or PCMH team will document in a telephone consult in the EMR that the discussion on processes related to the upcoming PCS have occurred.

- If the family member plans to be empaneled to the MTF at the gaining location, the MTF POC will notify the gaining Managed Care Support Contractor (MCSC) and work with the MTF enrollment Lead to arrange for the family member to be empaneled to a PCM in the MTF able to provide needed care once the family arrives at the new duty station. If no capacity exists at the gaining MTF, the MCSC will work to arrange a PCM assignment in the network if the patient is or wants to be enrolled in TRICARE Prime.
- At least 30 days prior to PCS departure, the MTF POC at the losing and gaining duty stations will arrange a person-to-person “warm transfer” via telephone or video-conference between gaining and losing PCMs, PCMH teams and the MTF representatives for all EFMP patients who are being followed by Case Management and any other EFMP patients the PCM deems require a warm transfer, based on the patient’s complex needs or special situations. The warm transfer will proactively prepare for the transition and arrange needed care, with particular attention to coordination of specialty care referrals, appointments, expiring medications and medication refills.
- All individuals working on behalf of the family member will document and keep a record in a telephone consult of any actions taken on behalf of, or discussions with, the family in the EMR and/or the specific Service’s required EFMP documentation program. If the beneficiary is not registered in the EMR, a mini-registration will need to be created. Personnel without mini-registration access will reach out to Patient Administration for assistance.
- If a family member is not and/or does not intend to be empaneled to the Direct Care system:
  - The losing MTF POC will contact the losing and gaining TRICARE contractors to notify them of the impending move and request support within the limits of the current TRICARE contractual requirements. This guidance does not change the TRICARE contracts or obligate the contractors to take any action not already provided for. If the family member enrolled in EFMP has a MCSC Case Manager or a TRICARE Select Navigator, the MCSC will notify these individuals, as well.
  - The losing MTF POC will contact the gaining MTF POC to inform them of incoming EFMs to the area for their awareness once the PCS is approved.
  - If the family member is to be empaneled to the MTF and not in the network or enrolled in TRICARE Select at the gaining location, the MTF POC will notify the losing and gaining MCSCs and work with the MTF enrollment Lead to arrange for the EFM to be empaneled to a PCM in the MTF able to provide needed care.
  - All individuals working on behalf of the family member will document and keep a record in a telephone consult of any actions taken on behalf of, or discussions with, the family in the EMR and/or the specific Service’s required EFMP documentation program.
- Access to care is based on priorities for care identified in Health Affairs Policy 11-005, *Access to Care*. If the EFMP family member has significant medical issues including

being ventilator-dependent or meets other criteria which result in them not being able to travel via privately-owned vehicle or commercial air and who must move via medical evacuation, the MTF POC will notify the Service EFMP POC for assistance and further guidance.

Please disseminate this memo to the leadership at each MTF. MTFs not currently aligned under DHA authority also are encouraged to comply with this memorandum. DHA will codify permanent guidance in a DHA-Procedural Instruction (PI) within the next year; this interim guidance applies until the DHA-PI is issued.

My point of contact is Ms. Regina Julian, at (571) 242-4639 or through email at [regina.m.julian.civ@mail.mil](mailto:regina.m.julian.civ@mail.mil). Thank you for your leadership as we continue meeting the needs of our patients, families, communities, and the nation during this challenging time.

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