

The U.S. Army Enterprise EFMP

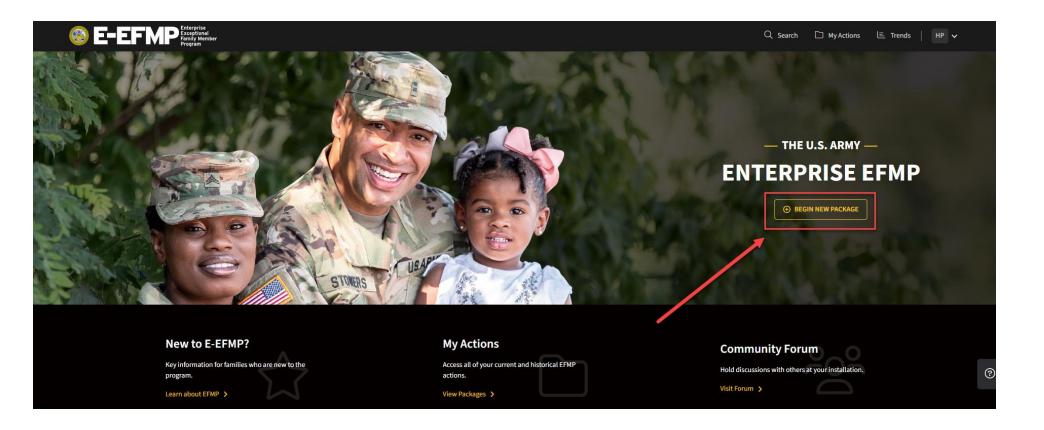
User Guide: Creating a Family Member Travel Screening as a Service Member

General Information and Navigation Tips

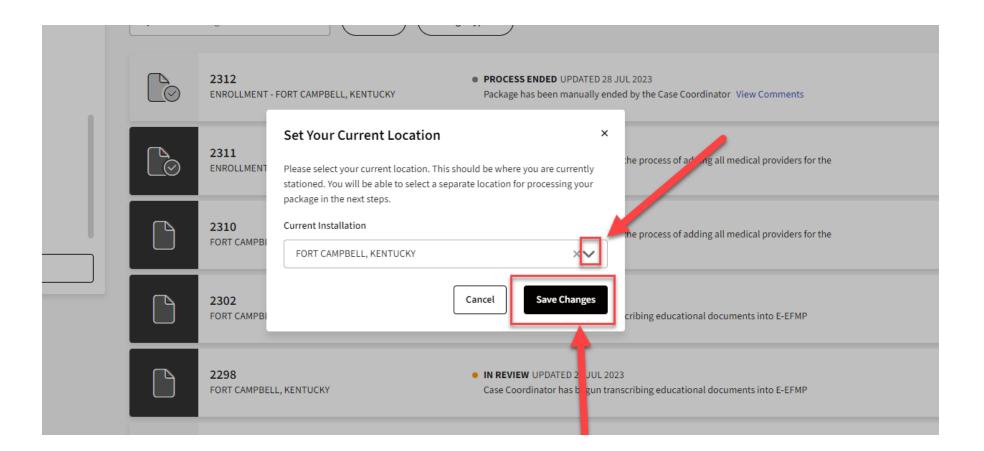
- Contact your EFMP Office when seeking guidance about how to complete the FMTS Package.
- Your information is populated from DEERS. If you have any questions about information listed in the package or if it is incorrect, contact your EFMP Office for assistance.
- If there is a *red asterisk* * beside the question, that question is required to be answered.
- You can click the *question mark icon* for more information about a question. A pop-up with additional information will appear.
- Click Continue to proceed to the next page, and Back to return to the previous page.

There are two pathways to start a new FMTS Package.

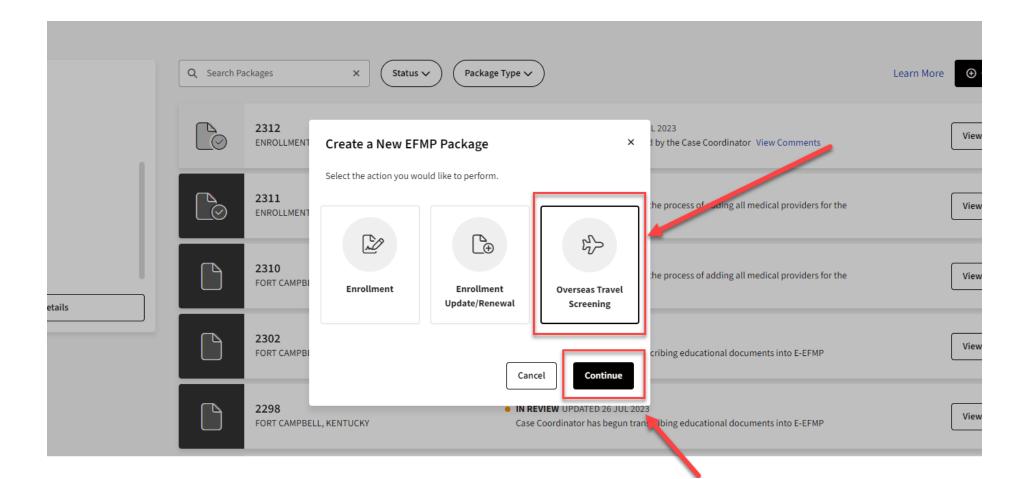
Pathway One: Click Begin New Package



Select your Current Installation from the drop-down menu and click Save Changes.

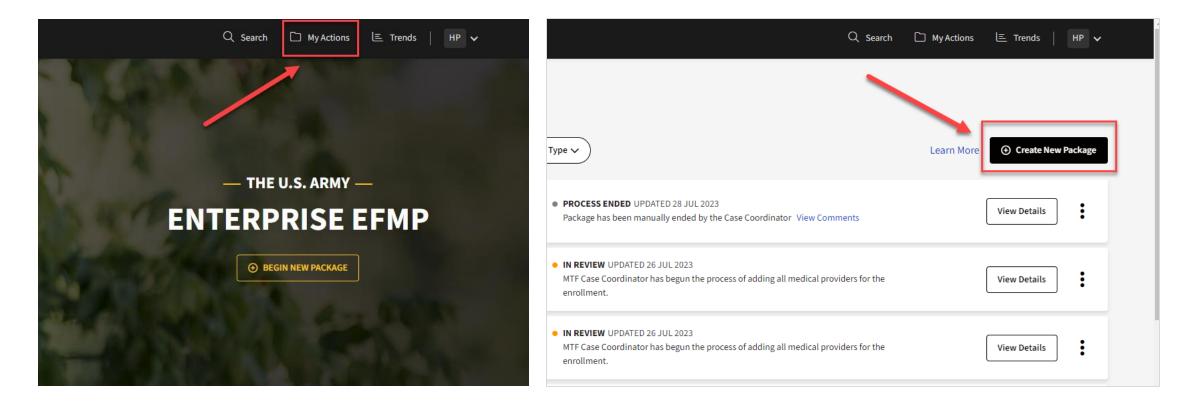


Next, select Overseas Travel Screening and click Continue.



Pathway Two: Click *My Actions*, then *Create New Package*.

You will be prompted to select your *current installation* and a *package type*. Select Overseas Travel Screening as the package type to create a FMTS package.



Purpose & Disclosure

Read the Welcome information and click Get Started.

E-EFMP Enterprise Exceptional Additional Additiona Additional Additional Additiona Additional Additional Additional Additional Addit	Q Search □ My Actions
← Package #2370	C Last saved 01 Jan 1900 at 00:00:00 Delete Package
Purpose & Disclosure	
Pre-Screening	Welcome!
Demographics	Welcome to Enterprise-EFMP, an online system designed to help you create and manage your EFMP requests including overseas Family Member Travel Screening, Enrollments, and Disenrollment. Throughout this application you may be required to provide information and upload documents related to your family's medical, dental and educational needs. If necessary, you can exit this application and resume at a later time - the timestamp above displays when your enrollment was last saved. If you have started this package in error, you may use the red "delete" button. Get Started
↑ Unload Decuments	

Purpose & Disclosure

Read the Purpose & Disclosure statement. To accept the agreement, click on the checkbox beside *"I accept the purpose and disclosure agreement"* and click *Acknowledge & Continue*.

(?)

Purpose & Disclosure

PURPOSE: Screening Verification, identifies the Family Member(s) of a Service Member who is requesting travel at Government expense and / or consideration for Command Sponsorship, including Service Members traveling to locations supported by the State Department. The DoD requires the Family Member(s) be screened prior to family travel.

PRINCIPAL PURPOSE(S): Information will be used by the Military Services during the Family Member Travel Screening portion of the assignment coordination process to identify Family Members with potential travel concerns, which may include medical, educational, and/or dental needs, to coordinate the availability of required services at the projected OCONUS or overseas location. Information submitted during this process will be used to capture fields for DA Forms 5888 and 7246. If determined to need EFMP Enrollment, then information will be captured for DD Forms 2792, 2792-1, and 2813.

DISCLOSURE: Mandatory for Military Personnel; failure or refusal to provide the information or providing false information may result in administrative sanctions or punishment under either Article 92 (dereliction of duty) or Article 107 (false official statement), Uniform Code of Military Justice. The DoD ID Number of the Sponsor (and the Sponsor's Spouse if dual Military) allows the Military Healthcare System and Service Personnel Offices to work together to ensure any special medical needs of your Family Member can be met at your next duty assignment. Family Member special needs are noted in the Official Military Personnel Files which are retrieved by Name and DoD ID Number.

CONSENT FOR ELECTRONIC SIGNATURE: You will need to sign various documents throughout this process. By accepting below, you are giving consent to utilize an electronic signature which will be placed onto the documents digitally.

I accept the purpose & disclosure agreement



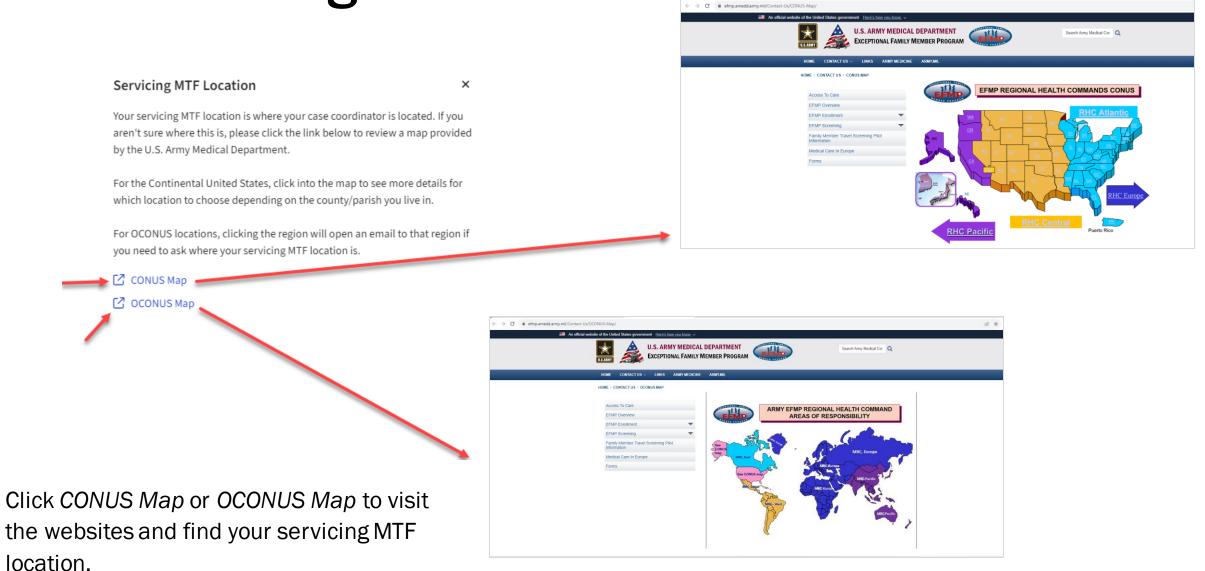
- Select Family Member Travel Screening from the dropdown for the purpose of this package.
- Read all the information and answer all required Yes/No questions.
- Select your *Projected PCS Installation* and *Screening Purpose* from the drop-downs.

nterprise xceptional amily Member rogram	Q Search □ My Actions 트 Trends HP	~
	⊘ Last saved 09 Aug 2023 at 13:33:01 Delete Pi	ckage
~	Pre-Screening	
	What is the purpose of this package? * Family Member Travel Screening	~
	Any family members that are traveling must be registered in the Military Health System Electronic Health Record, GENESIS/AHLTA. Unregistered family members must call or go to the Military Treatment Facility Patient Administration Division to register.	
	Do you have overseas assignment instruction or RFO?	
	Projected PCS Installation * Screening Purpose * Select an item Select a screening purpose	
	Are you currently attending Advanced Individual Training (AIT) or are in Student Status?	
	Yes O No Are you filling a command position at the battalion level or above?	C
	Ves O No	
	Is this an enrollment or update to support a compassionate reassignment to another installation for enhanced medical care?	
	Are you a recruiter?	

For more information about a question, you can click the *question mark icon* next to the label. A pop-up with additional information will appear.

For example, clicking on the icon next to *your* servicing MTF Location will display more information on finding your MTF location.

 ✓ Package #2362 ✓ Package #2362 ✓ Ves O NO ✓ Yes O No ✓ Yes	y Actions 🔳 Trends HF
Purpose & Disclosure Ves Projected PCS Installation * Screening Purpose * Continuation of Overseas Tour (COT) Are you currently attending Advanced Individual Training (AIT) or are in Student Status? Yes Yes No Are you filling a command position at the battalion level or above? Yes No Servicing MTF Location Your servicing MTF location is where your case coordinator aren't sure where this is, please click the link below to review	ug 2023 at 13:33:01 Delete I
Projected PCS Installation * Screening Purpose * GRAFENWOEHR, GERMANY Continuation of Overseas Tour (COT) Are you currently attending Advanced Individual Training (AIT) or are in Student Status? No Yes No Are you filling a command position at the battalion level or above? Servicing MTF Location Yes No Is this an enrollment or update to support a compassionate reassignment to another insis Your servicing MTF location is where your case coordinator aren't sure where this is, please click the link below to review	
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Are you filling a command position at the battalion level or above? Yes No Is this an enrollment or update to support a compassionate reassignment to another ins: Yes No Yes Yes No Yes No Y	
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Is this an enrollment or update to support a compassionate reassignment to another inst. Your servicing MTF location is where your case coordinator aren't sure where this is, please click the link below to review	×
O Yes O № aren't sure where this is, please click the link below to review	is located. If you
DV TDE U.S. AFMV MEDICAL DEPARTMENT.	w a map provided
Are you a recruiter?	
○ Yes O No For the Continental United States, click into the map to see	more details for
Please select your servicing MTF location.	ou live in.
Ft Campbell For OCONUS locations, clicking the region will open an ema	il to that ragion if
Please select your servicing MPD location.	in to that region in
FORT CAMPBELL, KENTUCKY	
CONUS Map	
Upload Documents	
	Close



Select your servicing MTF location and servicing MPD location from the drop-downs. Review your information and click Save & Continue.

Please select your servicing MTF location. * 🔞		+
Ft Campbell		>√ ⊘
Please select your servicing MPD location. *		
FORT CAMPBELL, KENTUCKY		× 🗸
	Save & Continue	

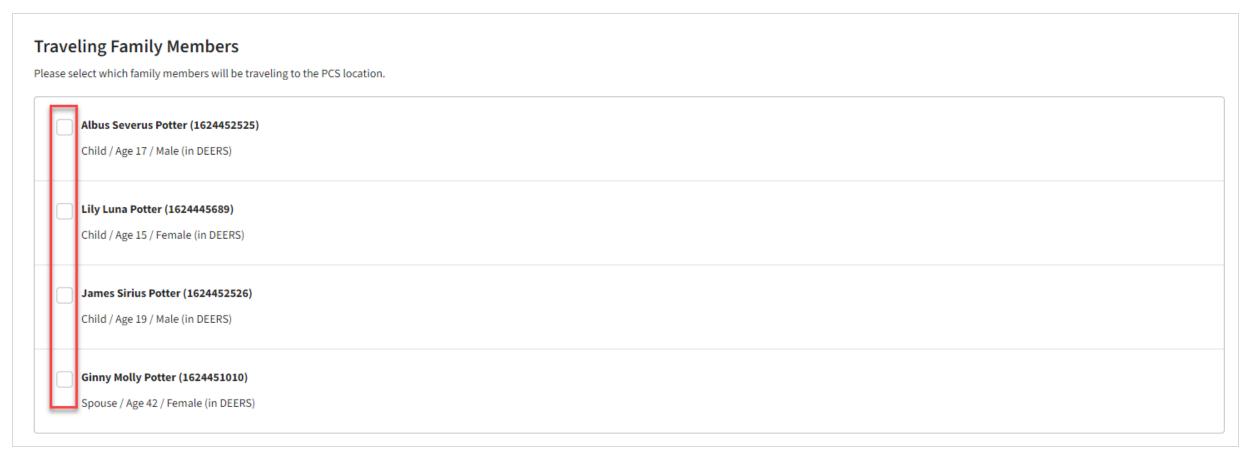
Demographics

- Review your *Personnel Information* and make changes as needed.
- Review and edit your *Current Mailing Address* and *Duty Address*.
- Click Continue to proceed.

Soldier Demographics				
Please verify your demographics information below.				
Personnel Information				
Current Supervisor Email *		Current Commander Email *		
Branch of Service *		Status *		
Army	~	Active Duty	~	
Rank / Grade *		MOS *		
Warrant Officer 1	~	140K - Air and Missile Defense (AMD) Systems Tactician	×v	
Current Installation *				
FORT CAMPBELL, KENTUCKY	×v]		
Sponsor Current Mailing Address		Mobile Phone *		
8008413005		5558675678		
Address Line 1 *				
Duty Address				
DSN Phone		Commercial Phone *		
		4568213365		
Address Line 1 *				
57 sweet st				
Address Line 2				
Country *	City *	Zip Code *	State *	
United States XV	Barbara	78236	KY - Kentucky XV	
Back				

Demographics

Click the checkbox next to each Family Member who will be traveling to the PCS location.



Demographics: Adult Family Member Details

If you select an **adult** family member (FM), you will need to provide the following:

- Add their Phone Number and Email Address.
- Select whether the FM is enrolled in EFMP or not (Yes/No).
- Click the *checkbox* if the FM resides with the sponsor or add the *FM*'s *Address* if they reside elsewhere.
- Select the MTF Location from the drop-down. If the FM is not geographically separated, this will be the same as the sponsor's MTF Location.

Ginny Molly Potter (1624451010)	
Spouse / Age 42 / Female (in DEERS)	
Phone: Not set Email: Not set	
Enrolled in EFMP: Unanswered	
Resides with sponor: No	
MTF Location: Ft Campbell	
Phone *	Email *
Is this family member enrolled in EFMP? *	
Yes No	
Resides with sponor	
0 0	Address Line 2
Resides with sponor	Address Line 2
Resides with sponor	Address Line 2
Resides with sponor	Address Line 2 State/Province *
Resides with sponor Address Line 1 *	
Resides with sponor Address Line 1 *	
Resides with sponor Address Line 1 *	
City *	State/Province *
City *	State/Province *
City *	State/Province *
Resides with sponor Address Line 1 *	State/Province *

Demographics: Minor Family Member Details

If you select a **minor** family member (FM), you will need to provide the following:

- Select whether the FM is enrolled in EFMP or not (Yes/No).
- Click the *checkbox* if the FM resides with the sponsor or add the *FM's Address* if they reside elsewhere.
- Select the *MTF Location* from the drop-down. If the FM is <u>not</u> geographically separated, this will be the same as the sponsor's MTF Location.

/		Lily Luna Potter (1624445689) Child / Age 15 / Female (in DEERS) Enrolled in EFMP: Unanswered Resides with sponor: No MTF Location: Ft Campbell	
_		Is this family member enrolled in EFMP? *	
_	-	Resides with sponor Address Line 1 *	
		Address Line 1	Address Line 2
	-	City *	State/Province *
		Zip Code *	Country *
		MTF Location *	
		Ft Campbell	

Demographics

You can make additional updates to a FM's information by clicking *Edit Demographics.* Edit the information and click Save *Changes.*

After you have completed all items for your FMs, click *Continue*.

elected family members have been indicated as traveling to the PCS location.	Lily Luna Potter (1624445689)
Albus Severus Potter (1624452525) Child / Age 17 / Male (in DEERS)	Child / Age 15 / Female (in DEERS) Enrolled in EFMP: No Resides with sponor: Yes MTF Location: Ft Campbell
Lily Luna Potter (1624445689)	Edit Demographics
Child / Age 15 / Female (in DEERS) Enrolled in EFMP: No Resides with sponor: Yes MTF Location: Ft Campbell Edit Demographics	Is this family member enrolled in EFMP? *
James Sirius Potter (1624452526) Child / Age 19 / Male (in DEERS)	Cancel Save Changes
Ginny Molly Potter (1624451010)	
Spouse / Age 42 / Female (in DEERS) Phone: 5555555 Email: Enrolled in EFMP: No Resides with sponor: Yes	
MTF Location: Ft Campbell Edit Demographics	

OCONUS Questionnaire

- Read the DA 5888 Privacy Act.
- To accept the Privacy Act, click the *checkbox*.
- Click Acknowledge & Continue.

DA 5888 - DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 10, USC Section 3013.

PRINCIPAL PURPOSE: Personnel support.

ROUTINE USES: To validate family member deployment screening, and to provide gaining command with data to assist in making an assignment decision.

DISCLOSURE: The provision of requested information is mandatory. Failure to respond may preclude successful processing of an application for family member travel/command sponsorship and may lead to appropriate administrative or disciplinary action against the soldier.

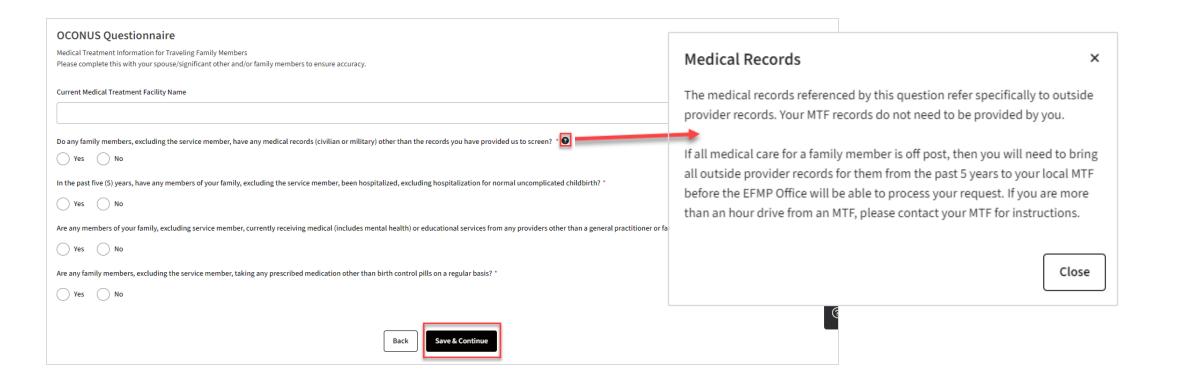
✓ I accept the Privacy Act statement agreement



OCONUS Questionnaire

Read all information and answer the required Yes/No questions.

You can click the question mark icon next to Medical Records for more information.



OCONUS Questionnaire

If you answer Yes to a question, items may appear below for you to complete, as shown below.

After you have completed all items on this page, click Save & Continue.

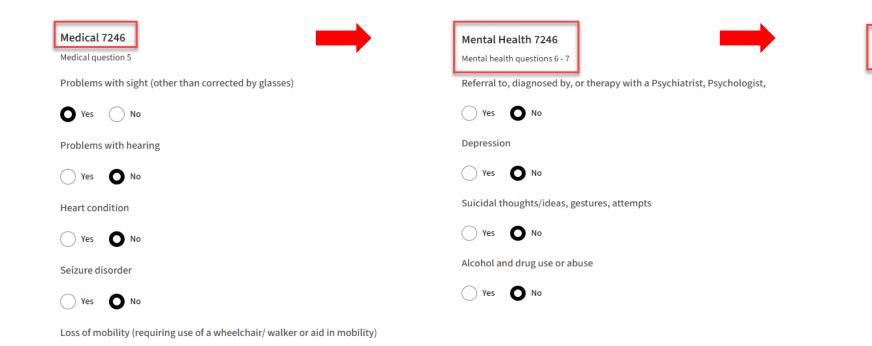
I	n the past five (5) years, have any members of your family, excluding the service member, been hospitalized, excluding h	ospitalization for normal uncomplicated childbirth? *	
	O Yes No		
	Please list and explain:		
	Family Member Name	Hospitalization Reason	
	Family Member Name	Hospitalization Reason	

7246 Questionnaires

O No

() Yes

Complete all 7246 questions for *Medical*, *Mental Health*, and *Education* information. Once these questionnaires are complete, click *Continue* to proceed.



Education 7246

Slow development (infants and preschoolers)

Ves O No

Learning problems (school)

O Yes 🗌 No

Special services (i.e., OT, PT, Speech, etc.) for special education

O Yes 🗌 No

Counseling services for school-related problems

Ves O No

Intellectual disability

Yes O No

Sign & Submit

Download and complete the listed FMTS documentation and *upload* each completed form by clicking *Upload*, selecting the appropriate file, and clicking *Save Document*.

Sign & Submit							
FMTS Documentation							
Document	Document Type	Blank Form		Completed Form			
TestFile	Required	占 Download		යි Upload	Add Required Documer	nt	×
or administrative action. For sole	nal Family Member Program, soldiers will provide accurate informati liers, refusal to provide information may preclude successful process ite action against soldiers who knowingly provide false information, o	ing of an application for	family travel or command sponsors	ship.		p your files or <u>Browse</u>	
						Cancel	e Document

Sign & Submit

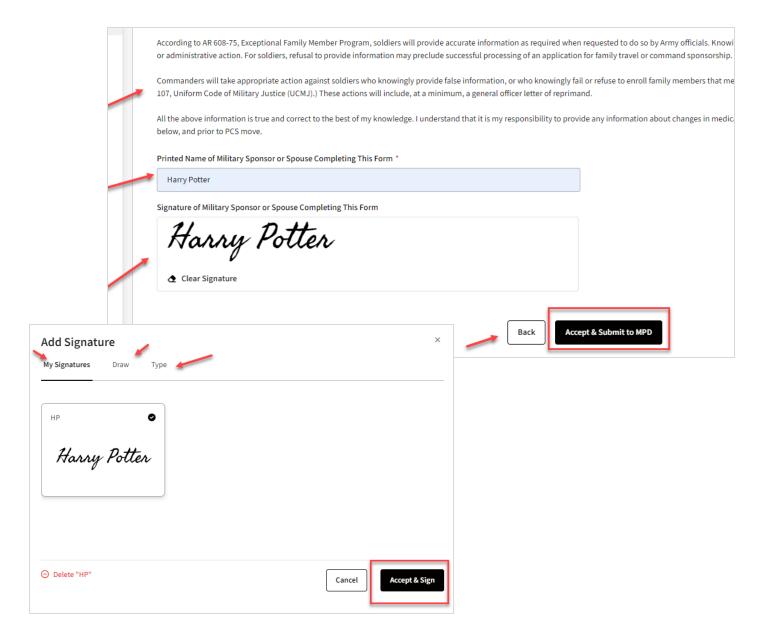
If you uploaded the incorrect document, you can click the *red circle/minus icon* and then click *Delete File*. You will then be able to *upload* the correct document.



Sign & Submit

After uploading the required documents and reading the information on the screen, you will digitally sign and submit your package.

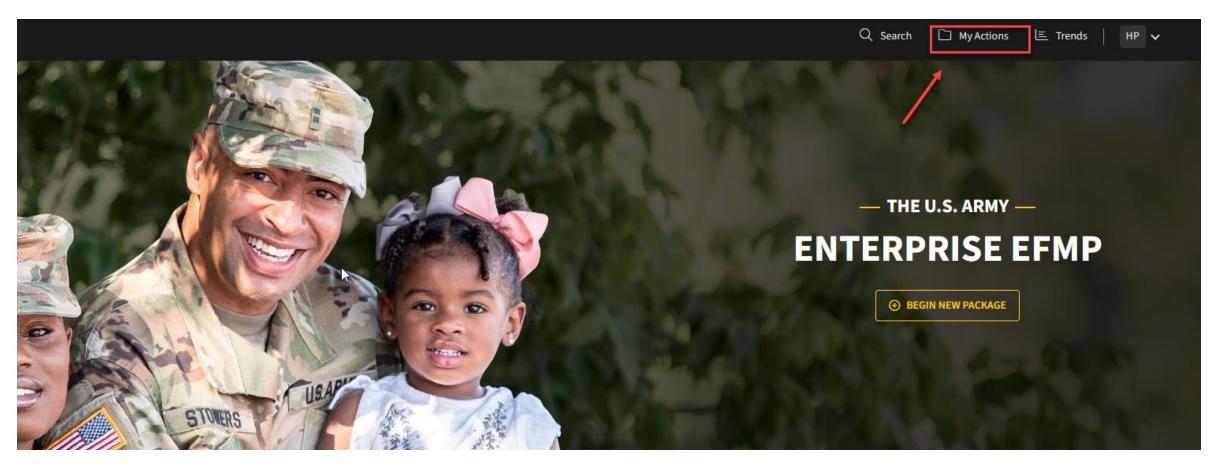
- Type in your name.
- Click Add Signature draw or type your signature in the modal. You will have the option to save this signature for later use.
- Click Accept & Sign.
- Click Accept & Submit to MPD.



After you submit your FMTS, you can check your package status

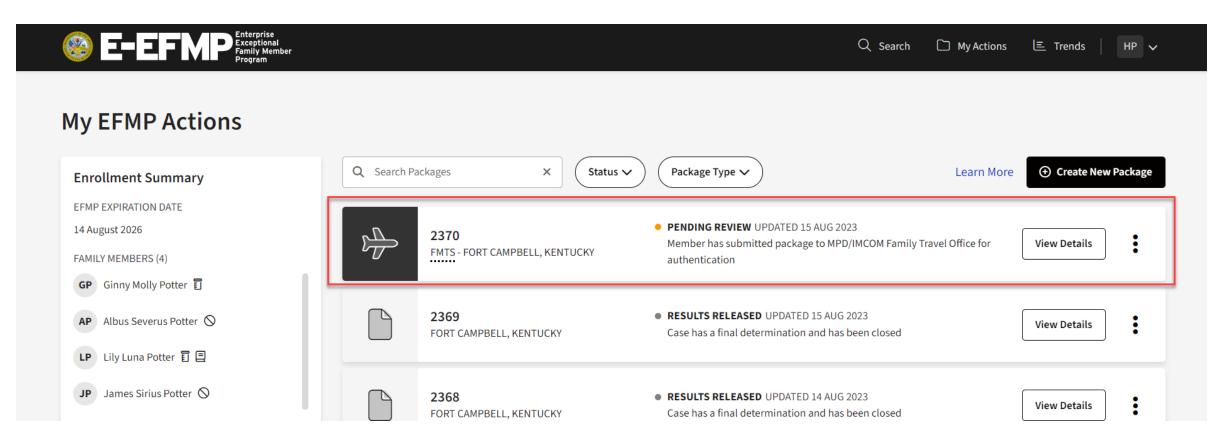
Checking Your Package Status

To see your EFMP packages, click *My Actions*.



Checking Package Status

You can view your package's current status and other details on this page.



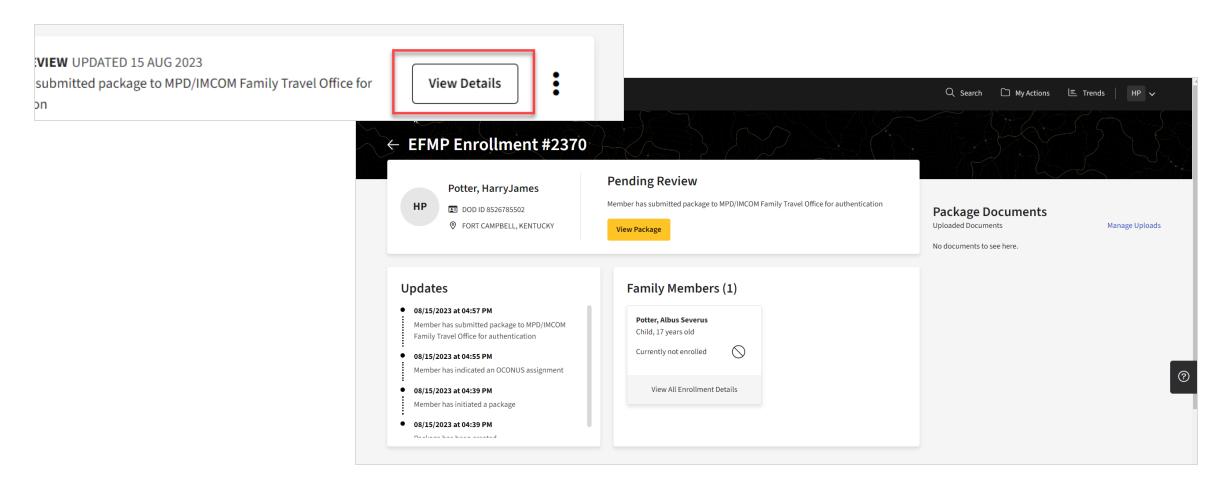
Checking Package Status

To see the full history of your package, click on the three dots, then on *View History*. A full list of all status updates will appear.

 Today at 16:57 Member has submitted package to MPD/IMCOM Family Travel Office for authentication Today at 16:55 Member has indicated an OCONUS assignment Today at 16:39 Member has initiated a package Today at 16:39 Package has been created

Checking Package Status

To view additional details about the package, click View Details.



View Package

To view the full contents of your package, click View Package.

You can access any section of the package by clicking the section title on the left-hand side or clicking the *Back* and *Continue* buttons to navigate the package chronologically.

Pending Review	
Pre-Screening V PURPOSE: Scree Demographics by the State Dep OCONUS PRINCIPAL PUR medical, educatid determined to not Sign & Submit Sign & Submit DISCLOSURE: M statement), Unif your Family Men CONSENT FOR E	Action of the state of the

FMTS Workflow

You will receive the following updates as your package moves through the FMTS process.

08/15/2023 at 04:39 PM

Package has been created

08/15/2023 at 04:39 PM Member has initiated a package

08/15/2023 at 04:55 PM Member has indicated an OCONUS assignment

08/15/2023 at 04:57 PM Member has submitted package to MPD/IMCOM Family Travel Office for authentication

08/15/2023 at 05:23 PM MPD/IMCOM Family Travel Office 5888 authentication review has started

08/15/2023 at 05:24 PM MPD/IMCOM Family Travel Office has submitted package to MTF Case Coordinator 08/15/2023 at 05:24 PM MTF Case Coordinator FMTS review has started

08/15/2023 at 05:26 PM MTF Case Coordinator has submitted package to EFMP Medical Director for review

08/15/2023 at 05:26 PM EFMP Medical Director screening has begun

08/15/2023 at 05:28 PM The package has been sent to the losing MPD for review.

08/15/2023 at 05:29 PM Losing MPD/IMCOM Family Travel Office has received the completed 5888

08/15/2023 at 05:29 PM

Losing MPD/IMCOM Family Travel Office has continued processing overseas movement and is sending any needed forms to Gaining MPD/IMCOM Family Travel Office

08/15/2023 at 05:29 PM

Gaining MPD/IMCOM Family Travel Office has been sent any necessary documents in order to complete process

08/15/2023 at 05:30 PM

Gaining MPD/IMCOM Family Travel Office has started the process of gathering travel memo documentation for upload to the Losing MPD

08/15/2023 at 05:30 PM

Losing MPD/IMCOM Family Travel Office reviews travel memos

08/15/2023 at 05:31 PM

Case has a final determination and has been closed

FMTS Package Results

Once your results have been released, you can return to the package details page by clicking *View Details* to see more information about your results. You can also download and view your *DA Form* 5888.

