

2020 ASSIGNMENT PROCESS SURVEY



Exceptional Families
of the Military



One Community,
One Voice

EXECUTIVE SUMMARY

Exceptional Families of the Military (EFM) believes that wide sweeping change is needed across all branches of the military in regards to the Department of Defense (DoD), and the Department of Homeland Security (DHS) Exceptional Family Member Program (EFMP). EFM was created and is staffed by volunteer EFMP families.

We kept hearing antidotal stories about military moves negatively impacting care for EFMP families. The purpose of this survey was to answer this question: "Does your family receive the care they need at your current or new duty location?" Our findings, that consisted of 194 respondents, concluded the majority of families do not receive care within the Tricare standard. Approximately half have experienced a wait time of over 120 days for required care¹ and a small percentage are going without care. Our conclusion is that we have just scratched the surface on EFMP families being stationed at a location where the necessary medical care is unavailable or untimely. This is the exact opposite of what the EFMP program is mandated to provide.

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¹ CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE UNIFORMED SERVICES, 32 C.F.R. § 199.17 (2002).

BRANCH OF SERVICE

As of October 2018, approximately 8% (137,000) military dependents are enrolled in DoD's Exceptional Family Member Program (EFMP)¹. Service break out is as follows: Army 40%; Air Force 35%; Navy 15%; USMC 10%.

During the February 5, 2020 hearing on EFMP, The Congressional Committee on Armed Services asked DoD for standardization across all services and for the services to address the inequities.² There are wide disparities on services provided per branch. For example, the United States Marine Corps (USMC) is the smallest service and has 107 full time equivalent family support staff. The Army is the largest service and has 119 in comparison. Respite care for the Air Force and Navy/USMC is 40 hrs per month and the Army provides 25 hrs per month without sibling care.

ARMY

49.2%

BRANCH BREAKOUT

EFM's 194 responses are representative of the EFMP break out within DoD. There were 0 Space Force respondents¹. The survey has comparable numbers to the Oct 2018 enrollment overall percentages for Army and Air Force but under-represents Navy and Marine Corps enrollment.

AIR FORCE

43%

NAVY

4.7%

**MARINE
CORPS**

1.6%

**COAST
GUARD**

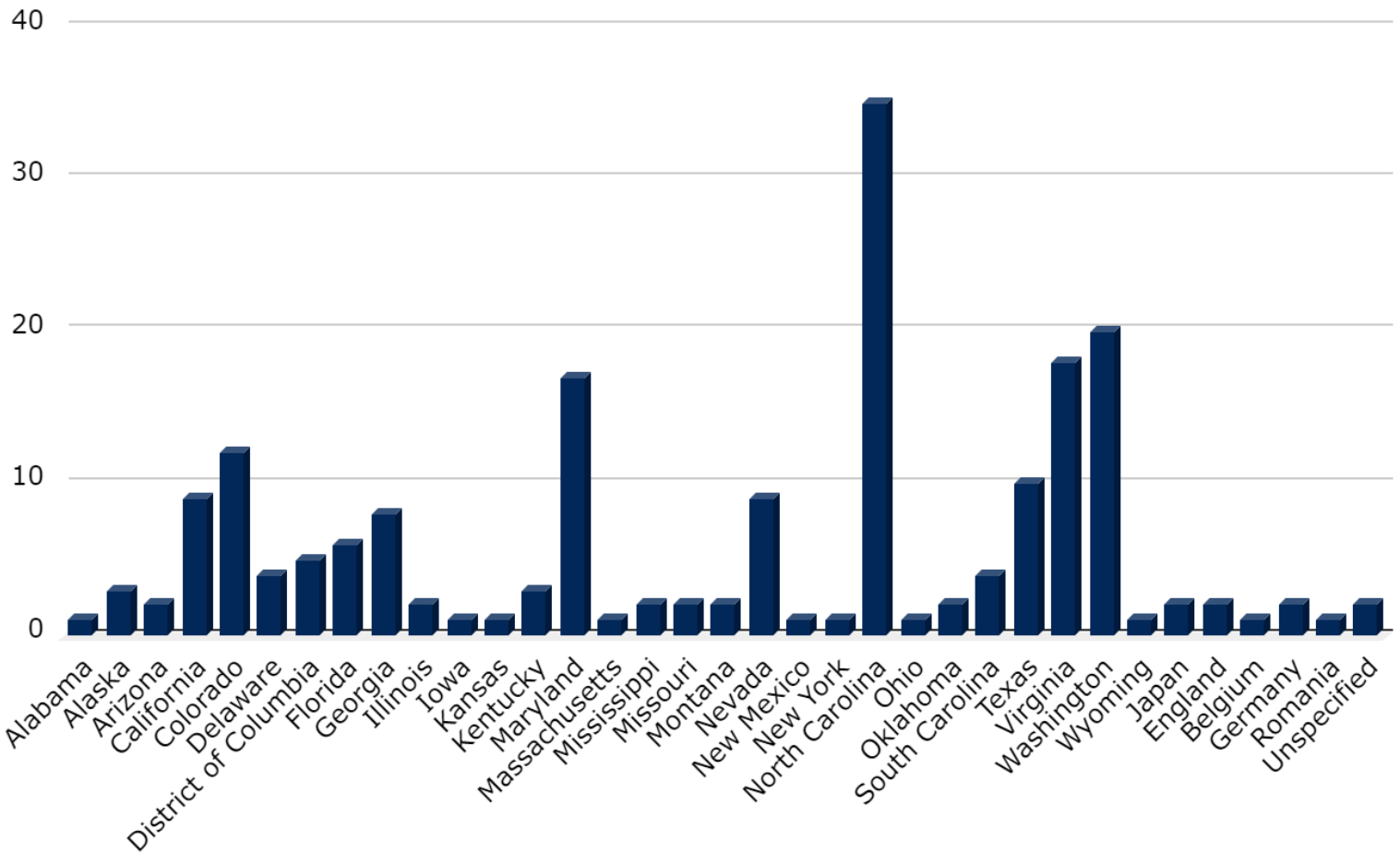
1.6%

¹DEFENSE PRIMER: EXCEPTIONAL FAMILY MEMBER PROGRAM (EFMP) 01/29/2020

²20200205 MLP: "EXCEPTIONAL FAMILY MEMBER PROGRAM"

PARTICIPANT DUTY STATIONS

The majority (95%) of survey participants are stationed in the Continental United States. Approximately 5% are overseas. Our survey respondents centered around major/expedited EFMP approved locations indicated some of the highest wait times.



NUMBER OF FAMILIES LIVING SEPARATED FROM THEIR SERVICE MEMBER

The majority of survey participants (88%) are stationed with their family members.

Some sample reasons/responses for staying together are paraphrased as follows:

"Regret staying together due to lack of services at current duty station."

"Our motto is that our family stays together."

"They tried to but we fought hard and were able to get the waivers put into place."

Approximately 12% were separated from a family member(s). Multiple respondents stated simply they were forced into the situation.

Some sample reasons/responses for the separation are paraphrased as follows:

"We had to keep our child with his current medical/therapy/school team."

"Service member overseas on a restricted tour."

"Service member in command in an area not supportive of needs. His career is important."

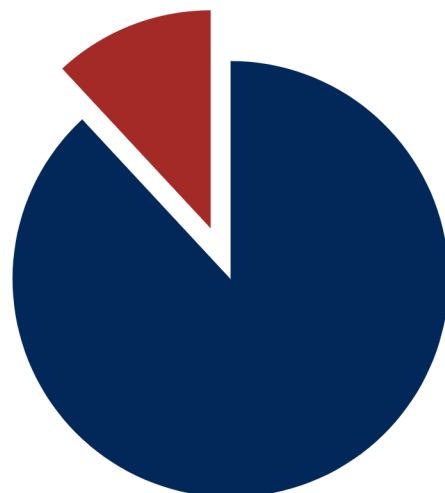
"Service member in short-term school slot and decided to stay at location to continue services/avoid lengthy process to set up new services."

"Waitlist at new duty location is too long."

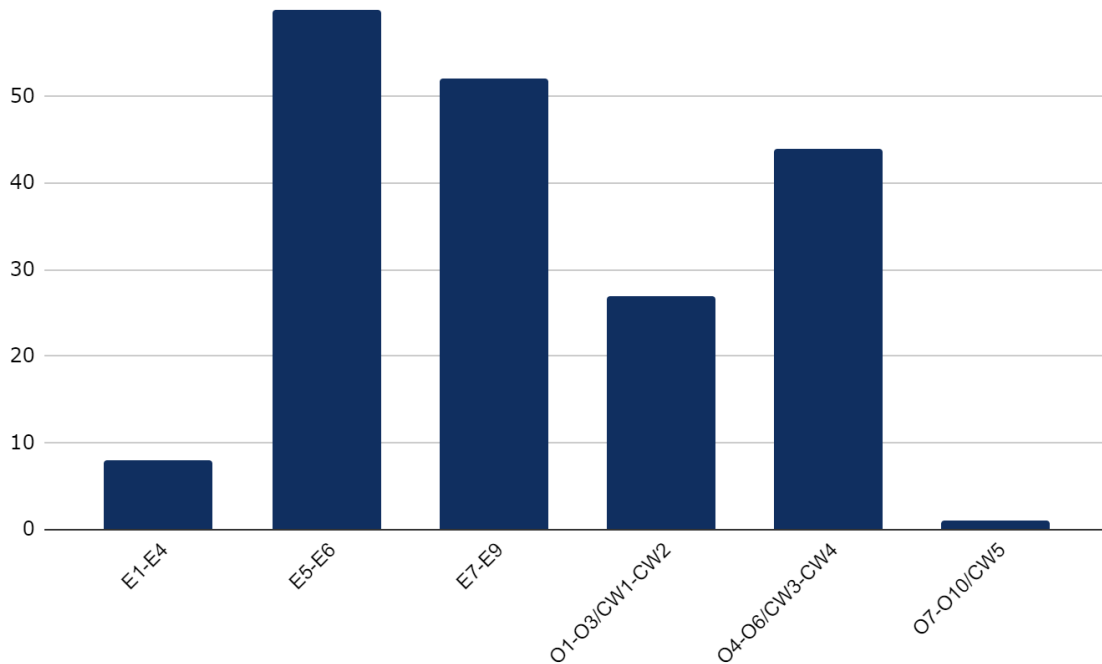
Approximately 16% of our families were offered more than one EFMP assignment option.

11.9%

OF FAMILIES WERE SEPARATED FROM THEIR SERVICE MEMBER

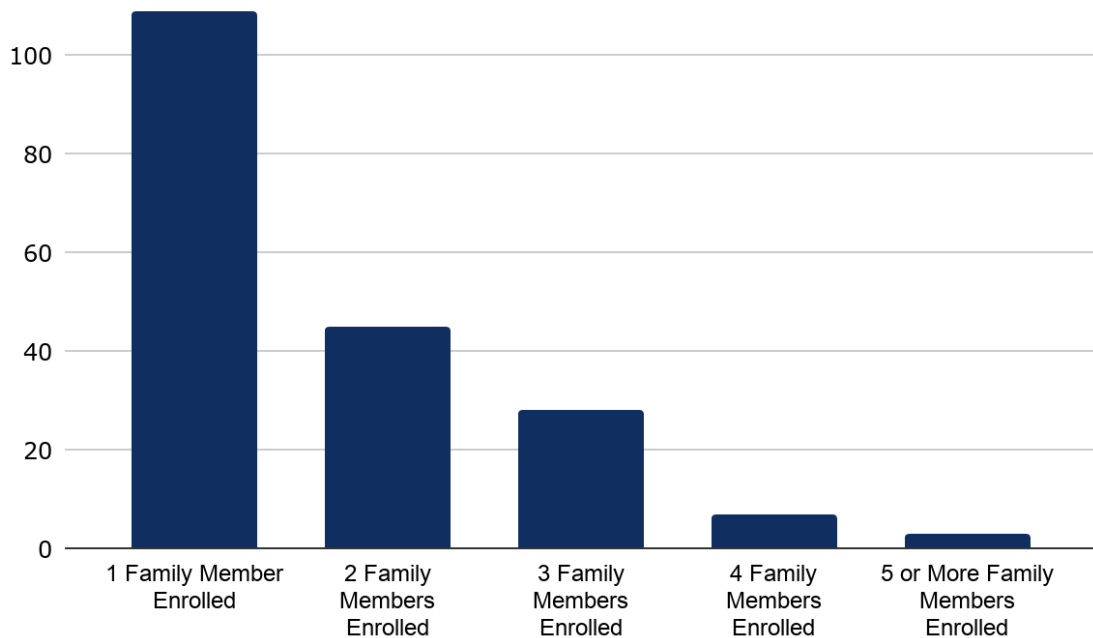


RANK BAND BREAK OUT



Break out of respondents is comparable to DoD rank structures except within the E-1 to E-4 ranks. The lowest ranks were disproportionately represented in the EFM survey and had a significantly lower response rate.

NUMBER OF DEPENDENTS ENROLLED IN EFMP



Approximately 43% of the respondents have more than 1 family member enrolled in EFMP.

AVERAGE TIME WAITING FOR SERVICES

The majority of families (87%) waited longer than one month for services at their current duty location, despite the Tricare standard currently being 4 weeks for specialty care. EFMP failed 10% of families who do not have the services they need at the location they are stationed. An additional 48% of families had a 120 day or longer wait period for services.

The major family pain points were wait lists and unavailability for specialists and therapists. There were multiple complaints from families being stationed at locations that were "overloaded" with EFMP family members, exasperating the wait lists and general availability. Approximately 17% moved within the last six months, having potential COVID-19-type impacts on their move. There were multiple comments about having qualified for respite care but having no provider availability in their area. There were also multiple comments about the difficulty of switching Tricare contractor regions and a lack of standardization between the contractors. This difficulty is compounded for families when switching PCMs and trying to get new referrals. In some cases the long wait lists at the new area were for the PCM. This problem was already identified in the Feb 2020 hearing. Individuals on Tricare Select (co-pays) are able to get medical care sooner as they do not require referrals for specialty care. If the service member can afford co-pays, this pain point has some relief.

Survey response examples:

"EFMP never helped with anything. I was just told, since we live off post they could not help with that."

"Not enough providers in Las Vegas. Every time we watch the live EFMP virtual town halls they keep saying they have been told we have enough providers when that is so far from the truth. Please reach out to families at these bases and ask them what their wait times are and not just go upon what's in Tricare system."

"The problem falls in needing a new referral at the new duty station. Why can't the PCM (especially at a MTF) just write the referral to streamline the process."

87%

WAITED LONGER THAN THE TRICARE STANDARD OF CARE FOR THEIR FAMILY MEMBER

SPECIALTIES WITH THE LONGEST WAIT TIMES

EFM asked an open ended question on types of specialties families were waiting for at their duty location. From the 158 that responded, 55 cited ABA, speech, physical, occupational, and other types of therapies with long wait lists. 52 responded with a variety of medical specialties that were documented as having long wait lists. The most common were Neurology, Developmental Pediatricians, Mental Health and related services, genetics, endocrinologist, and ophthalmology. Lastly, there were multiple of the 51 "other type" of responses that referenced Branch respite and Tricare ECHO respite services were unavailable in multiple areas or had long wait lists.

Open-ended response examples:

"We dropped insurance from Prime to Select so we could quickly find a provider to meet our needs."

"We have been sent to JBLM because they supposedly have everything my Autistic children need and that is a lie. My oldest son has been on waitlists for ABA therapy the whole 2 years that we have lived here and we are still waiting."

"The first problem was that there were no pediatricians available to act as a PCM and the family care providers we were referred to would not accept the child due to her complex medical needs. A PCM was necessary to create referrals to services. The nearest military base was a two hour drive and we were ultimately referred to a pediatrician as a specialist with a family care PCM."

"Developmental pediatrics - 4 month wait after referral from pediatrician (2 month wait to see PCM)"

"Had to wait 2 months for occupational therapy and 3 months for speech therapy and ABA therapy. Waits were due to long waitlists and lack of information from Tricare on providers. It took hours each day, for almost a month, of making calls to Tricare and then providers just to find places that would get us in. We did every last bit of the legwork ourselves and still had to wait for 3 months. If we had relied on the referral system from Tricare we could have waited upwards of 12+ months for services. We also had to utilize separate therapy offices for all three therapies as well due to wait times for each service. This causes additional issues with scheduling, school and amount of time able to be in therapy."

"This area is confusing, and no one from the base is helpful, knowledgeable, reachable, or care to help with anything. Medical referrals, respite care, diaper supplies, continuity of care referrals, nothing. This whole ordeal from July 2019 to the present day?"

APPROXIMATELY 1/3 OUT OF 158 LONG WAIT RESPONSES WERE FOR MEDICAL SERVICES

FINAL SURVEY COMMENTS

EFM's grass roots survey aims to gather data annually on pain points for our families that serve while caring for their special needs members. We encourage this data to be used to improve the quality of life for EFMP families by any entity, or by any person. This is our first year and we intend to grow our respondent pool to provide a larger, more representative sampling of EFMP families in the future. Please reach out to us at www.exceptionalmilitaryfam.com for any feedback or assistance in regards to this report.

Our final survey question asked for any additional comments. We conclude this report with the following excerpts taken from the answers:

"I always advocate for my family, especially my children. I feel like EFMP is not really interested in helping us. They push everything away and tell you they don't have what you need. Where I do my research and I can tell you that Tricare has Therapists, even overseas without waiting times. They are not looking at the complete picture, when they deny your spouse a base. Especially when your career involves overseas duties. My husband has to choose between family and Career. That should never be an aspect to be a good soldier."

"EFMP needs to look at waitlists. The therapy center my son currently attends has a year long waiting list. Also, when looking at wait list times EFMP needs to consider that wait list times are not a one size fits all. For instance school aged children have longer wait lists than toddler aged and younger children due to the fact of they do not have open availability. Also, in regards to waitlists they need to make sure the local system isn't bogged down. While an area may have services those services may take a year or longer to get to."

"Due to EFMP miscommunication and last minute changes, we were unable to stay together as a family and have spent almost a year apart at this point."

"I understand the mission is first. And I also understand what a privilege it is to serve our country. That being said, families with EFMP family members are paying prices that should never have to be paid. Prices of our own health, stress that is beyond words, battles that go against everything that is legal yet no one on the DoD side willing to help. We can do better than this. WE NEED TO DO BETTER!"

FINAL SURVEY COMMENTS

"EFMP assignments should be similar to humanitarian giving families the opportunity to be close to a support system especially when member is high tempo in regard to TDY/deployment."

"Be clear what the steps are when an assignment is denied because of EFMP what the next steps are. We had 3 assignments in 6 years. All denied, but we were never able to ask for or apply for another option."

"It was incredibly hard to understand the process. Frustrating to have to advocate for my families health and care with little to no support from base medical EFMP. This is a great program and I really appreciate the military providing this and wanting to help families. Again this program seems to be such a great thing for families who need extra care. Please help educate those in the field on the process. Our EFMP is still on going 10 weeks and has been confusing along the way. I really appreciate the 2020 video where I could learn more about the process and the my vector tools."

"We've now waited 11 weeks for AFPC to cut us orders and we still don't even have an official "yes" or "no" if we can PCS. The wait time is too long for this kind of stuff. My wife is due to have our baby in 10 weeks and now I have to rush to sale/rent my house, PCS (most likely a DITY now due to the time frame) with two kids and a pregnant wife, move in the snow, try to find new living quarters with only weeks to spare before my wife's due date and find all new medical personnel for both my wife and daughter, and again that's only if we are told "yes." We are insanely stressed out and cannot get any answers, though we email and call regularly to every number and org box we can find. Additionally, my leadership has all tried to get answers with no luck. I cannot stress enough have difficult, time consuming, and downright defeating the EFMP process has been. To say my wife and I aren't "jaded" from this experience is an understatement."

"What frustrates me at the moment is being denied a service station (Fort Leonardwood for example) because they say the wait time for services is too long. But both ABA providers in the area that accepted Tricare stated they had openings. Then being sent to a duty station that had a ridiculously long waiting lists anyway. Could you imagine how long the wait would have been had I not been proactive back in May?"