



EFMP Checklist

New Enrollment, Updates, or Disenrollment

DD2792: Family Member Medical Summary (Required for ages 0 – 99)

- Submit all 11 pages. Package **MUST** contain 11 of 11 pages.
 - Header portion (family member name, sponsor name & SSN) must be completed for all 11 pages.
- Sign page 1 (*authorization for disclosure of medical information*)
- Complete all fields on page 2
- SIGN BLOCK #11 ON PAGE 3** – *package cannot be submitted without a signature.*
- A MD, DO, NP, or PA familiar with your required care completes pages 4 – 11
 - For **DISENROLLMENTS**: must note previous condition, resolution of symptoms, & date of last treatment. **Blank packets will be rejected (N/A is NOT a diagnosis).**
- Provider **MUST** sign block #27 on page 7. Make sure credentials (MD, DO, NP, PA) are visible.
- Addendums 1 – 3 **MUST** be included (*if not applicable, complete just the header portion*)

DD2792-1: Special Education / Early Intervention Summary (Required for ages 0 – 22)

- Required for ALL enrollees ages 0 – 22 **UNLESS** they have a G.E.D. or high school diploma.
- Complete # 1 – 4 on page 2
- SIGN BLOCK #7 ON PAGE 2** – *package cannot be submitted without a signature.*

For children with an IFSP	For children with an IEP	No IEP (ages 3 – 22)
<ul style="list-style-type: none"> <input type="checkbox"/> Check “YES” in block #5 <input type="checkbox"/> Sign release of information in block #1 of page 3 <input type="checkbox"/> Complete block #2 student information <input type="checkbox"/> The early intervention service coordinator completes block #3 & signs block #8. <input type="checkbox"/> Include a copy of the IFSP. 	<ul style="list-style-type: none"> <input type="checkbox"/> Block #6: Indicate if child is home-schooled. <input type="checkbox"/> Sign release of information in block #1 of page 3 <input type="checkbox"/> Complete block #2 student information <input type="checkbox"/> A school representative completes block #3 & signs block #8. <input type="checkbox"/> Include a copy of the IEP. 	<ul style="list-style-type: none"> <input type="checkbox"/> Block #6: Indicate if child is home-schooled. <input type="checkbox"/> Sign release of information in block #1 of page 3 <input type="checkbox"/> Complete block #2 student information <input type="checkbox"/> A school representative completes block #3 & signs block #8.
No IFSP (ages 0 – 3)	Homeschooled children	
<ul style="list-style-type: none"> <input type="checkbox"/> Check “NO” in block #6 <i>Make sure block #7 is signed & return to EFMP office.</i> 	<ul style="list-style-type: none"> <input type="checkbox"/> Block #6: Indicate if child is home-schooled & provide requested information. <i>Make sure block #7 is signed & return to EFMP office.</i> 	