

DOD CRITERIA FOR IDENTIFYING FAMILY MEMBERS WITH SPECIAL NEEDS

REF: DoD Instruction 1315.19, effective April 19, 2017

SPECIAL MEDICAL NEEDS. Individuals who meet one or more of the criteria in this section will be identified as a family member with special medical needs:

1. Potentially life-threatening conditions or chronic (duration of 6 months or longer) medical or physical conditions requiring follow-up care from a primary care manager (to include pediatricians) more than once a year or specialty care.
2. Current and chronic (duration of 6 months or longer) mental health condition (such as bipolar, conduct, major affective, or thought or personality disorders); inpatient or intensive (greater than one visit monthly for more than 6 months) outpatient mental health service within the last 5 years; or intensive mental health services required at the present time. This includes medical care from any provider, including a primary care manager.
3. A diagnosis of asthma or other respiratory-related diagnosis with chronic recurring symptoms that involves one or more of the following:
 - a. Scheduled use of inhaled or oral anti-inflammatory agents or bronchodilators.
 - b. History of emergency room use or clinic visits for acute asthma exacerbations or other respiratory-related diagnosis within the last year.
 - c. History of one or more hospitalizations for asthma, or other respiratory-related diagnosis within the past 5 years.
4. A diagnosis of attention deficit disorder or attention deficit hyperactivity disorder that involves one or more of the following:
 - a. Includes a co-morbid psychological diagnosis.
 - b. Requires multiple medications, psycho-pharmaceuticals (other than stimulants) or does not respond to normal doses of medication.
 - c. Requires management and treatment by mental health provider (e.g., psychiatrist, psychologist, social worker, or psychiatric nurse practitioner).
 - d. Requires the involvement of a specialty consultant, other than a primary care manager, more than twice a year on a chronic basis.
 - e. Requires modifications of the educational curriculum or the use of behavioral management staff.
5. A chronic condition that requires:

- a. Adaptive equipment (such as an apnea home monitor, home nebulizer, wheelchair, custom-fit splints/braces/orthotics (not over-the-counter), hearing aids, home oxygen therapy, home ventilator, etc.).
- b. Assistive technology devices (such as communication devices) or services.
- c. Environmental or architectural considerations (such as medically required limited numbers of steps, wheelchair accessibility, or housing modifications and air conditioning).

SPECIAL EDUCATIONAL NEEDS. Family members of active duty Service members (regardless of location) and civilian employees appointed to an overseas location eligible for enrollment in a DoDEA school on a space-required basis will be identified as having special educational needs if they have or are found eligible for either an Individualized Family Service Plan (IFSP) or an IEP in accordance with DoDI 1342.12 and DoDM 1342.12.