



## **Partners in PROMISE®**

### **The State of Military-Connected Children with Disabilities**

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## Abstract

The highly mobile lifestyle of military-connected families poses unique challenges for families with children with disabilities.<sup>i</sup> Frequent moves disrupt medical and educational services for military-connected children causing significant impacts for children with disabilities. Many families report losing critical healthcare, like Medicaid Waiver services, after a military move across state lines as well as experiencing long delays to receive Individualized Education Program (IEP) services. The Department of Defense (DoD) created the Exceptional Family Member Program (EFMP) to ensure families are appropriately assigned to locations and military training facilities (MTF) with services to meet their needs.<sup>ii</sup> However, many families report dissatisfaction with the program, citing gaps in healthcare and educational support.<sup>iii</sup> Another DoD-initiated project, the Military Interstate Children's Compact Commission (MIC3), is designed to assist families with education transferability issues between states but lacks any specific provision for children with disabilities. Additionally, unreliable and incomplete data on military-connected students with disabilities and state-to-state variations in education transferability and transportability of education plans further complicate transitions. Proposed solutions for military-connected families with children with disabilities include targeting policy updates and legislative provisions, strengthening IEP transfer protections, and improving educational data reporting to help address these challenges and better support military-connected families with children with disabilities.

*Keywords:* military children, disabilities, special education, Individualized Education Program (IEP), Exceptional Family Member Program (EFMP), highly mobile

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## Exceptional Family Member Program Improvements

### Background

The Department of Defense (DoD) established the Exceptional Family Member Program (EFMP) to provide comprehensive support to military families with individuals with disabilities through identification and enrollment, assignment coordination, and family support services.<sup>iv</sup> Participation in the program, which the Army began in 1979 with other service branches following soon after, is mandatory for military family members with special medical and educational needs.<sup>v</sup> The EFMP program enrolls approximately 141,000 military-connected children and adults, 58.7% being children, and is designed to facilitate assignment coordination and ensure the availability of specialized medical care at the receiving installation.<sup>vi</sup> Prior to consideration of a Permanent Change of Station (PCS) move, the EFMP member's medical records and Individualized Education Program (IEP) are reviewed by a service-based EFMP staff or assignment personnel to ensure adequate capacity and availability of specialized medical and education resources. Additionally, the EFMP program offers installation-centered Family Support services to assist military families with special needs by providing information, resources, skills, and support.<sup>vii</sup>

In the last decade, EFMP families have increasingly vocalized the negative impacts of the frequent transitions on their children's special education programming within the United States and overseas. In October 2019, a grassroots effort of military spouses, military family advocates, and nonprofit organizations shared their concerns and family stories with military leaders, state

education departments, and state and federal legislators. Founding members of Partners in PROMISE (PiP) presented a Military Special Needs Education session at the Congressional Military Family Caucus, hosted by Congresswoman McMorris Rodgers - WA and Congressman Bishop - SC.<sup>viii</sup> The momentum from this event, in parallel with military families sharing their EFMP family members' medical care stories, led to a Congressional Hearing on EFMP Challenges held by the House Armed Services Committee in February 2020.<sup>ix</sup> This hearing validated the culmination of repeated inquiries into the efficacy of the EFMP program.

Over the last decade, Congress directed the Government Accountability Office (GAO) to study and recommend ways to improve the reported inefficiencies and gaps of care in the EFMP program. Five reports are found on the GAO website, with the most current report published in 2022.<sup>x</sup> The 2021 National Defense Authorization Act (NDAA) contained sweeping provisions to improve and standardize the EFMP program.<sup>xi</sup> An updated DoD Instruction 1315.19 was released in June 2023, outlining new processes and procedures. Several improvements were added such as warm handoffs between EFMP Family Support Offices, the standardization of family member enrollment and disenrollment processes, and the provision of attorneys trained in special education law.

Despite these improvement efforts, questions remain about the program's effectiveness and the lack of performance metrics of this much-needed program for active-duty service members and their family members. This is a concerning trend as the EFMP population has increased sharply since 2018. Notably, while the total active-duty personnel decreased 2.4%, from approximately 1.30 million in 2018 to 1.27 million in 2023, the number of children decreased 46%, from 1,650,464<sup>xii</sup> in 2018 to 888,892<sup>xiii</sup> in 2023. Yet, the EFMP family member

enrollment increased 34% from 104,677<sup>xiv</sup> in 2018 to 140,636<sup>xv</sup> 2023. More research is needed to identify reasons more military-connected family members require specialized medical and education support.

## **Policy Issue and Analysis**

The EFMP program continues to struggle to meet the needs of its enrolled members across all service branches. One fundamental problem with the program is its organizational structure. The 2011 NDAA established the Office of Special Needs (OSN) to develop and implement a comprehensive program for EFMP family support.<sup>xvi</sup> OSN resides within the Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy under the directorate of Office of Military Family Readiness Policy.<sup>xvii</sup> Its responsibilities are to monitor program effectiveness, develop plans to address gaps, and ensure the program meets the needs of military family members. However, a GAO report from 2012 explains that the then-current and still remaining framework fails to provide OSN tools to enforce compliance of military service branches with DoD or service-level requirements, with no actionable change in program or policy implementation since. Without a measure of accountability or clear chain of command, the OSN does not have the required infrastructure or resources to compel implementation and compliance. Additionally, the lack of a clear framework hinders the ability to properly assess program performance.

For example, the shortage of quality data on this underrepresented population compounds the lack of understanding of the problems families face and inhibits movement towards actionable solutions. One of the first research studies on the EFMP community was conducted in

2019. Researchers compared the healthcare access of military families with special healthcare needs of civilian families. The data indicated EFMP-enrolled families could not get a referral and find a specialist in a reasonable amount of time after relocation compared to their civilian counterparts.<sup>xviii</sup> When asked to describe their experience regarding both the referral process and the ability to see a specialist after relocating to a new duty station, EFMP-enrolled military family respondents most commonly cited the process as “taking too long” and limited provider/specialist availability.<sup>xix</sup>

The Congressional EFMP Hearing in 2020 sparked questions from stakeholders to better understand the lived experiences of the EFMP community. In 2020, PiP launched the first of three annual *Military Special Education Surveys*. PiP was the first nonprofit organization to survey military families enrolled in EFMP with special education needs. In partnership with Ohio State University, PiP’s survey findings released in 2023 revealed 68% of respondents enrolled in the EFMP program reported waiting an average of 4.72 months for medical services after their most recent permanent change of station (PCS) move.<sup>xx</sup> Further, nearly 34% of all survey participants reported their child waited roughly 4.25 months for special education services after a duty-related move.<sup>xxi</sup>

In November 2022, the DoD launched the first EFMP Survey and released its findings in 2024. The survey found that only 43% of EFMP families reported satisfaction with the program, with 31% of respondents stating they did not receive any medical care at their new location in a timely manner.<sup>xxii</sup> Long wait times for medical care were also identified in the Blue Star Families Military Family Lifestyle Survey (MFLS) 2023 Comprehensive Report; noting that while enrollment in EFMP should provide families support services, programs, and allowances, the

“majority of active-duty family respondents whose oldest child receives mental health care and is enrolled in EFMP reported longer wait times for care than their counterparts who are not enrolled in EFMP.”<sup>xxiii</sup>

Independent research on the EFMP program indicates the EFMP program needs a full scope evaluation to determine if the program has the tools necessary to fulfill program objectives without relying on enhancing current, but less than effective, mechanisms. As EFMP enrollment increases alongside the DoD’s focus on military readiness and retention, enhancing the EFMP program is essential to ensure systematic benefits and effective support to families.

### ***Child Find***

The persistent failures in meeting the overall healthcare needs of EFMP children create secondary effects. Military children with suspected disabilities may not be identified on a timely basis due to the absence of a consistent relationship and subsequent continuous care of a primary care physician or pediatric medical provider. When a child does not receive continuity in their primary healthcare, important milestones may be missed, which contributes to the delayed identification of military children with disabilities or suspected disabilities, as well as delayed access to early childhood intervention and special education services.<sup>xxiv</sup> Studies show participation in Early Intervention programs positively impacts the child’s long-term educational outcomes by reducing their need for special education services or repeating a grade, as well as increasing the rate to meet high school graduation requirements to receive a standard diploma.<sup>xxv</sup>

Mandated through the Individuals with Disabilities Education Act (IDEA) Part C, the Child Find program requires states to locate, identify, and evaluate children with suspected

disabilities residing in its physical jurisdiction from birth to age 21.<sup>xxvi</sup> While responsibility typically falls on the local school district to identify and refer children to the Child Find program, any professional with knowledge of developmental milestones, including medical providers, child development center programs, early learning programs, parents, or caregivers, may refer children to begin the early intervention screening process.

Child Find on a military installation is dependent on whether the federal jurisdictional status of the property is exclusive, concurrent, partial, or for proprietary interest only, and sometimes requires a memorandum of agreement to establish jurisdictional implementation.<sup>xxvii</sup> For exclusive jurisdiction properties (i.e., military installations), the DoD 1342.12 Companion<sup>xxviii</sup> assigns the Department of Defense Education Activity (DoDEA) to implement the Child Find requirement for the children who participate in installation-based and community child care and development centers or are enrolled in a DoDEA school. These providers may refer military children for an evaluation for early intervention and special education services.<sup>xxix</sup>

The DoD recently bolstered its efforts to support military children through the 2023 NDAA mandate for a new pilot program that requires Special Needs Inclusion Coordinators within a limited number of on-base Child Development Centers.<sup>xxx</sup> These extra supports aim to help the DoD implement the federal requirement of Child Find and coincide with a DoD website, Military One Source, to provide Early Intervention Benefits information to the military community.<sup>xxxi</sup> The question remains as to which government entity leads the Child Find efforts between military treatment facilities (MTFs), child development centers, and DoDEA on each installation. DoD Instructions (DoDi) 1342.12 (June 2015)<sup>xxxii</sup> and 1342.19 (June 2023)<sup>xxxiii</sup> mandated the establishment of a DoD Coordinating Committee to recommend policies regarding

the provision of early intervention and special education services. However, there is no publicly accessible information available pertaining to the implementation or effectiveness of the Committee throughout DoD.

Frequent military moves, delayed healthcare access, short care history at the MTF, and inconsistent program oversight may cause families to miss critical early intervention services. Study findings indicate a need for additional collaboration between military-based programs and civilian early intervention services.<sup>xxxiv</sup> Additionally, the limited awareness among military parents about Child Find services and early intervention further complicates timely identification. Considering the importance of timely identifying children with suspected disabilities, timely execution of Child Find programs is essential for military-connected families.

### ***Special Education Legal Assistance***

Special education is the provision of modified curriculum and individualized supports and services for students with disabilities enrolled in public or DoDEA schools. The provision of special education is mandated by the IDEA Part B which provides students an Individualized Education Program (IEP) to access a free appropriate public education (FAPE).<sup>xxxv</sup> Approximately 15% of children in public school systems are enrolled in special education.<sup>xxxvi</sup>

The IDEA special education process requires schools and parents to develop an appropriate and individualized education program for the child. This collaborative process can be stressful for parents unfamiliar with special education law. This knowledge gap about the law and their protections was identified in all three *Military Special Education Surveys* conducted by

PiP, leading to their creation of the Special Education and EFMP Binder for military families.<sup>xxxvii</sup>

The IEP development process also presents opportunities for parents to advocate for their child’s educational needs, which can cause disagreement among the rest of the IEP Team. According to the 2022 PiP *Military Special Education Survey*, findings confirm this disagreement, with 74.46% of families reporting their current school recognizes their child’s diagnosis(es), but only 63% recognized the educational impact of their diagnoses.<sup>xxxviii</sup> If a family does not agree with the supports and services offered by the public school district or they feel the program does not adequately address their child’s needs, the family may want to seek legal assistance to resolve the dispute.

Attorneys who specialize in special education law and disputes are highly trained and qualified in the unique aspects of special education law and state-specific implementation, which is challenging for highly mobile military families. Special education attorneys understand the legal complexities and can help to ensure proper procedures are followed by the school district or DoDEA. They also serve to even the playing field when families experience elevated disputes. Despite the need for this niche practice across the U.S., very few special education attorneys are located near military installations which makes securing legal representation difficult for military families. Additionally, the cost of special education legal representation is not feasible for the majority of military families, especially enlisted service members. In the 2021 PiP *Military Special Education Survey*, military families reported that “a lack of financial support was a significant barrier for some families who wanted to file [a complaint] but didn’t with 73% saying that they would be “extremely likely” [to] file a complaint if they had financial support.”<sup>xxxix</sup>

In response to the increase of special education concerns for military families, the 2021 NDAA mandated each service branch to provide special education legal assistance to military-connected families.<sup>xl</sup> However, neither the 2021 NDAA nor the 2023 EFMP DoDI standardized the process or delivery of special education legal assistance across each service branch, leaving program implementation and supervision unclear. Additionally, each service branch determines and implements its own policy and directs military families in need of special education legal assistance to different tenants on the installation (e.g., the Army refers families to the Legal Assistance office and the Navy directs families to the EFMP Family Support Office).

Once military families locate the proper tenant, the extent of special education legal support available exclusively depends on whether the installation-based attorney staff are civilian-employed attorneys or military judge advocates. Additional factors impacting the families' access to this benefit include the quality of the attorney's special education law training, relevant experience and scope of their practice, their capacity, the state policy that allows attorneys to represent military families, and each service branch's interpretation and implementation of DoD policies. Interestingly, many families with children attending a DoDEA school report they are not able to access the benefit of legal services at the same installation due to conflicting policy regarding legal representation in matters against the interests of the United States.<sup>xli</sup>

Installation commanders may not be aware of the level of challenges that military children with disabilities face in the local educational agencies (LEA). While the School Liaison Program (SLP) can assist all military families on education matters, no formal mechanism to track reported issues or disputes existed until recently. The 2021 NDAA provision mandated the

Secretary of each service branch to annually report the number of special education disputes filed by military service members as well as the outcomes.<sup>xlii</sup> EFMP Family Support Offices and other military officials are tasked to collect special education disputes, and other relevant disputes, reported by service members. However, neither the Office of Special Needs Annual Report submitted to the Armed Services Committees nor the EFMP DoDI (updated in June 2023) includes any reference to this mandate or the reported data. If this data is reported and collected, the policy is neither standardized nor transparent as to the process or quality of data (e.g. what constitutes a dispute, the definition of “filed,” whether the SLP provides data to the EFMP office or Installation Commanders, etc). Despite the provision and data collection mandate from Congress, the lack of standardization and performance metrics leads to more questions about the number of special education disputes CONUS and OCONUS and the delivery and efficacy of the provision of special education legal assistance.

Fortunately, not all special education disputes need the level of support from a special education attorney. Some issues may be resolved with the assistance of the SLP, an EFMP Case Manager, or EFMP Navigator instead. The degree of training, experience, and comfort level to provide special education assistance varies by service branch and is installation-specific. For example, the Air Force refers families to both the DoD’s SLP and the EFMP Family Support offices with special education concerns.<sup>xliii</sup> Yet, MacDill AFB states that Air Force EFMP Family Support Staff cannot attend IEP Meetings even in a supportive role. Army and Marine Corps EFMP Family Support personnel at MacDill AFB can.<sup>xliiv</sup> Conversely, according to the MyNavyHr website, the Navy permits EFMP Family Support personnel to support military families and attend IEP meetings, yet the MacDill AFB website states the service is not

offered.<sup>xlv</sup> The SLP Program states it offers special education support, yet the level of special education law training is unknown and not standardized across the service branches.<sup>xlvi</sup> Most importantly, none of these individuals are able to give legal advice or represent the family in court.

Currently, the Navy is the only service branch that officially provides special education non-attorney services through six EFMP Regional Special Education Liaisons.<sup>xlvii</sup> The EFMP Regional Special Education Liaison is available to assist the Navy family if the local installation EFMP Case Liaison determines the family's advocacy needs are beyond the scope of their expertise. The local installation EFMP Case Liaison then refers the Navy family to the EFMP Regional Special Education Liaison, who provides in-depth assistance with reviewing IEPs and 504 plans, attending IEP meetings, and supporting military families as they navigate through the special education process.<sup>xlviii</sup>

This position completes a triage model for special education disputes for Navy families. The model begins with Navy families first contacting their installation EFMP Case Liaison with special education concerns. If the installation EFMP Case Liaison is unable to resolve the dispute at their level, the Navy family is then referred to the EFMP Regional Special Education Liaison. Last, if the elevated dispute requires legal assistance, the Navy family is referred to the Regional Special Education Attorney. While all Navy EFMP personnel receive basic special education training, more extensive training and experience are reserved for the Regional-level personnel. This model should be considered the gold standard across the service branches for addressing special education concerns because it sets the expectations of what each EFMP personnel can provide and ensures all Navy families' concerns are resolved at the appropriate level of need.

The varying program implementation and messaging of each service branch and at each duty installation causes confusion among military families seeking special education legal assistance. Similar to the trend in military housing, military families report that school districts and DoDEA schools demand using nondisclosure agreements (NDAs) during dispute resolutions. Lastly, most military-connected families do not know this assistance is available. PiP's 2023 survey shows that 74% of respondents were not aware that special education legal assistance exists.<sup>xlix</sup> Considering the lack of awareness and variability of service delivery, and inconsistent messaging, families are less likely to utilize the service. Notably, this should not be indicative of the need. Standardizing policy implementation across all service branches and increasing awareness with consistent messaging will improve access and utilization of available special education legal assistance.

### ***Medicaid Waivers***

Another obstacle impacting military families enrolled in EFMP is the inability to easily obtain or transfer Medicaid Waivers as families move between states. The Medicaid Waiver program is a federally funded program delivered by the state that offers home and community-based healthcare services (HCBS) to individuals with disabilities.<sup>1</sup> Depending on the disability and level of need, a recipient may receive respite care, personal attendant care, assistive technology support, environmental modifications, employment support and job coaching, residential services, nursing, or various therapies.<sup>li</sup> According to the Children's Hospital Association, approximately 186,000 military- and veteran-connected children rely on Medicaid

Waivers.<sup>lii</sup> Due to their complex medical conditions requiring specialized pediatric services, Medicaid Waivers cover what TRICARE does not.<sup>liii</sup>

Medicaid Waiver eligibility requirements and service variability between states cause significant challenges for military families. With each military-related move, families must re-apply, re-qualify, and potentially face long waitlists after relocating to another state. This results in delayed care and extraordinary stress on family members. This situation may force families to make difficult choices, like living separately from their servicemember, to avoid disruption in care or risk the loss of critical services. The DoD attempted to replicate the Medicaid Waiver services through the TRICARE Extended Care Health Option (ECHO) Program in 2001.<sup>liv</sup> The programs may appear similar, but the ECHO program requires co-pays and does not include key “wrap-around” services like environmental modifications to a home.<sup>lv</sup>

Florida is the only state that offers automatic reciprocity of State Medicaid Waiver services for military families.<sup>lvi</sup> Other states set aside a limited number of Medicaid Waiver slots for military families, but if those slots are filled, the military family must reapply and are placed on a waitlist. The Defense State Liaison Office (DSLO) prioritized this as a state policy issue in 2020 and to date, all but thirteen states passed some form of accepting military families members for a limited number of Medicaid Waiver slots.<sup>lvii</sup> However, this DSLO effort echoes the trend previously discussed regarding EFMP programming - no ongoing oversight or assessment of state policy implementation. To further emphasize, neither the DoD or EFMP messages Medicaid Waiver state policies to military family members, nor do they evaluate policy objectives or measure implementation or access to support military families needing to access the program.

To address service transferability issues, the U.S. House of Representatives passed H.R. 8108 during the 118th Congress in September 2024 called the Care for Military Kids Act.<sup>lviii</sup> This act allows military families to retain Medicaid Waiver services when transferring to another state by amending Section 1902 of the Social Security Act<sup>lix</sup> to define military dependents as active duty relocated individuals. Reintroduction of this bill would allow a temporary relocation service-related transfer that includes the temporary relocation state accepting and receiving payment for the military family member's Medicaid Waiver services. This bill guarantees that military-connected children can continue to receive long-term care services through a state-administered Medicaid plan no matter where they move within the United States. The companion bill, S. 5147, was introduced in the U.S. Senate in December 2024.<sup>lx</sup> Since neither bill passed in the 118th Congress, each bill needs to be reintroduced in the new session for consideration.

## **Recommendations**

1. Direct DoD, in coordination with the Government Accountability Office, to conduct a process evaluation with recommendations on its participation in the Child Find program for all military children, specifically military children not enrolled in DoDEA. The evaluation should, at a minimum, assess participation and program implementation of the Child Find program at all military treatment facilities, child development centers, preschools, special needs inclusion coordinators pilot program locations, DoDEA schools CONUS and OCONUS, and overseas locations with Non-DOD Schools Program (NDSP).
2. Direct DoD, in coordination with all service branch legal assistance offices and civilian special education legal assistance attorneys, to establish consistent policy through DoD instruction regarding the provision of special education legal assistance. (i.e., a recent

federal initiative standardized Respite Care across all services. A similar process for legal assistance would be valuable).

- a. DoD should standardize policy implementation across all service branches by assigning responsibilities to develop, implement, administer, and fund special education legal assistance provided to military-connected families, including training, communication, and reporting requirements that best support military families with children in special education.
3. Direct DoD, in coordination with all service branch civilian special education legal assistance attorneys, to establish policy through DoD instruction regarding the provision of special education non-attorney liaisons (e.g. advocates), utilizing the Navy's EFMP Regional Special Education Liaison program as a model.
    - a. The EFMP Regional Special Education Liaisons policy across all service branches will assign responsibilities to develop, implement, administer, and fund EFMP Regional Special Education Liaisons provided to military-connected families, including training, communication, and reporting requirements that best support military families with children in special education.
  4. Support the Care for Military Kids Act to enable Medicaid Waiver portability for military families required to move between states due to military relocation orders.
  5. Direct DoD to establish an independent Exceptional Family Member review committee to evaluate the Exceptional Family Member Programs and other factors that may contribute to the ineffectiveness of the program at the military installations in support of military children with disabilities and provide recommendations for improvement.

# **Military Interstate Children’s Compact Commission (MIC3) Alternatives**

## **Background**

In 2006, the DoD Office of Personnel and Readiness, in cooperation with the Council of State Governments (CSG) and the National Center for Interstate Compacts, created the MIC3.<sup>lxi</sup> A Compact was drafted to help address the educational challenges of military-connected children transferring between states and enrolling in DoDEA or public school districts.<sup>lxii</sup> The following year, an advisory commission was formed to finalize the language and by 2014, the Compact was adopted by all 50 states and the District of Columbia. The Compact is designed and intended to help military families seamlessly transition to a new state and ease the stress and burden of enrollment, school placement, attendance, extracurricular eligibility, and graduation requirements.<sup>lxiii</sup>

## **Policy Issue and Analysis**

According to a study conducted by Penn State Clearinghouse for Military Family Readiness on the efficacy of the MIC3 and other DoD programs created to assist military families and their education, the data clearly denotes confusion and misinformation among stakeholders regarding the MIC3 Compact.<sup>lxiv</sup> Similarly, the Blue Star Families 2022 comprehensive survey report indicated that 74% of 9,442 total survey respondents with a child in K-12 said they did not know about the MIC3.<sup>lxv</sup> To reiterate, the 2022 PiP *Military Special Education Survey* reported that 73% of 1,156 total survey respondents were unaware of the MIC3.<sup>lxvi</sup>

Despite the assumption that the MIC3 includes protections for military children with disabilities, it does not. The MIC3 fails to provide any direct provision or specific protection to military children who receive special education services or 504 Plan accommodations. The MIC3 Compact Rules reiterates IDEA language related to children with IEPs and 504 Plans, but falls short of providing actionable assistance. When approached to revise the MIC3 to address these shortcomings, the MIC3 commissioner restated that federal and state laws are the only laws that support these families.<sup>lxvii</sup> Additionally, when approached to amend the MIC3 in 2022, the MIC3 commissioners voted *not* to consider reopening the Compact for any future actions.<sup>lxviii</sup>

A 2023 NDAA study to recommend MIC3 improvements, directed by the DoD and in coordination with the DSLO, reiterates the lack of express support and consistent implementation of the compact at the state level.<sup>lxix</sup> The DoD study consolidated independent studies from Penn State and Vanderbilt University, a literature review by the DSLO, and information obtained from the MIC3. Conclusively, though it is officially supported by DoD, the Compact protections only apply to children in general education.

The notable recommendations within the MIC3 improvements study include identifying barriers to advanced enrollment and timely access to special education services, and amending state statutes to enshrine advanced enrollment criteria and eligibility.<sup>lxx</sup> Because any amendment or substantive change to the MIC3 requires unanimity among all state members, the DoD's study recommendations fall short of advancing efforts through the MIC3 on behalf of military children who receive special education services or 504 accommodations.

The MIC3 improvements study does, however, highlight the impact of state legislative efforts to mitigate state-to-state transferability issues in addition to MIC3, especially considering

each state is responsible to define and implement its own education policy. Also highlighted is the absence of both a measuring tool and data to indicate successful MIC3 implementation. Vanderbilt University found MIC3 commissioners considered the lack of stakeholder requests as a measurement of success and recommended the DoD and DSLO should not rely on this to measure impact.<sup>lxxi</sup>

In 2023, the DSLO office identified special education challenges as one of their top ten priorities for military families.<sup>lxxii</sup> Its state policy initiatives aim to minimize months-long delays in receiving special education services and supports at the receiving school district, and also to reduce burdens on military families by requiring parental consent prior to any changes to their child's IEP. Several states have passed similar bills. For example, New Jersey enacted a bill to minimize delays by requiring that IEPs of incoming students be implemented within 30 days.<sup>lxxiii</sup> In the Commonwealth of Virginia, parental consent is mandated to change a child's IEP, which reduces the stress parents would otherwise have if the school could make unilateral changes to their child's IEP.<sup>lxxiv</sup> The process of introducing similar bills at the state level is time-intensive and involves multiple stakeholders and extraordinary support. However, these changes are necessary and progress is being made. As of January 2025, six states have introduced and passed bills to minimize delays, and three states have introduced and passed bills to reduce burdens.<sup>lxxv</sup>

### ***Moving with the Mission***

Recent initiatives like Moving with the Mission, led by the coordinated efforts of Project Unicorn at Innovate EDU with DoDEA and the U.S. Department of Education, are underway to tackle the issue of securely transferring IEP data across state lines.<sup>lxxvi</sup> This initiative focuses on improving data interoperability to ensure IEPs are transferred seamlessly and securely from one

state's school district to the receiving state's school district. This process may include transfers from DoDEA schools to a school district and vice versa. While dozens of K-12 education stakeholders have signed up to work on this issue, the critical challenge remains with Statewide Longitudinal Data Systems (SLDS).

A federal legislative fix is necessary to use SLDS systems as a vehicle to transfer IEPs digitally. The Education Sciences Reform Act (ESRA) does not currently allow interstate data transfer using SLDS systems and includes provisions prohibiting both education and labor data transfer. Expanded and modernized SLDS systems would streamline the IEP process and potentially be a win-win for families and schools. With the parents' consent, schools can ensure IEP delivery to the receiving school district by initiating the transfer process timeline so that the most critical services and supports are in place on the child's first day of school. The receiving schools can plan accordingly for the new student, allocate resources, prepare staff and related service providers, and save time and money with less paperwork and IEP meetings. Importantly, parents will have peace of mind that their child has timely access to an appropriate education at their new school.

## **Recommendation**

1. Advocate for enhanced state policies to:
  - a. minimize delays for military children with IEPs by allowing advanced enrollment and implementing IEPs within 30 days (similar to New Jersey's model), and
  - b. reduce burdens on military families by requiring parental consent prior to any changes to a child's IEP (similar to Virginia's model).
2. Clearly articulate special education provision and limitations of MIC3 in DoD messaging.

3. Support initiatives and organizations, such as Moving with the Mission, to improve interstate data portability and decrease lapses in critical accommodations and services prescribed in the IEP, allowing educators to more promptly identify and adapt curriculum to the military-connected student’s needs.
  - a. This working group is identifying barriers, such as being able to legally transfer electronic documents and data across state lines.
  - b. The working group is also creating a streamlined data system to serve as a cohesive dashboard for policymakers and educators alike.

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## **Educational Data Outcomes Reporting Initiatives**

### **Background**

Military-connected students with disabilities are significantly underrepresented in data collection and educational outcomes reporting. The lack of data leads to gaps of understanding the impact of their highly mobile lifestyle, and particularly whether or not these students can access a free appropriate public education (FAPE)<sup>lxxvii</sup> when the delivery of services and accommodations at a new school is delayed for months after a move. Standardized testing is historically used to identify the educational needs of students, yet testing has not been a consistent or effective method to track the educational progress of military-connected children with disabilities. Since the timing for test administration for state standardized testing varies widely between states, military-connected students often miss the opportunity to participate in testing if a military move falls prior to or after state testing takes place.

Despite an effort to track military students academically through the state-collected military student identifier (MSI) required by the Every Student Succeeds Act (ESSA),<sup>lxxviii</sup> each states' definition of who is considered "military-connected," coupled with the variability of whose data to include (i.e. charter schools, private schools, and public schools), are indicators reporting measures need to be improved. The most glaring challenge is the inability to disaggregate the MSI data for all military-connected students from military-connected students with disabilities. This makes it difficult to understand the educational impacts on the delivery of services as a military student moves between states. School districts and parents alike need reliable data to tackle the educational issues these students face and the impact on post-secondary outcomes.

## **Policy Issue and Analysis**

The highly mobile lifestyle of military families compromises states' ability to collect education data. The 2020 PiP *Military Special Education Survey* findings indicate that 90% of military families have experienced a PCS move, with active-duty military families typically moving every 2 to 3 years.<sup>lxxix</sup> As a result, children of active-duty military service members experience 6 to 9 school transitions from kindergarten through 12th grade, often across state lines or overseas.<sup>lxxx</sup> The absence of continuity in educational support during and after these transitions leads to significant variability in conducting evaluations and implementing IEPs with special education services. A child receiving special education services in one state may receive reduced services in another or found ineligible for special education services in yet another.<sup>lxxxi</sup>

Standardized testing is a common tool school systems use to measure student success and progress by assessing students on grade-level proficiency and comparing their results to same-aged peers. In 2022, the PiP's *Military Special Education Survey* highlighted the lack of standardized testing among military-connected students in special education, reporting 33.77% of students did not participate in standardized testing.<sup>lxxxiii</sup> Respondents were given the following options to describe why their child did not participate:

- A. Not eligible - special education status
- B. Not offered by their school for their grade level
- C. Not old enough/too old for testing
- D. Homeschooling
- E. Our school encouraged our family to "opt-out" of testing
- F. Chose to opt-out
- G. Attending a private school
- H. Moved in the middle of testing.

Surprisingly, 23.8% of respondents indicated their child was not eligible due to their special education status.<sup>lxxxiii</sup>

This finding is concerning because the Every Student Succeeds Act (ESSA) mandates only students with the most significant cognitive disabilities take alternative assessments, which do not test students on grade-level proficiency.<sup>lxxxiv</sup> Further, the ESSA requires states to cap alternative assessment participation at less than 1% of the total tested state student population in a subject area.<sup>lxxxv</sup> The National State Boards of Education warns that failing to assess students at appropriate grade-level proficiency unduly places low expectations on students with disabilities, which may detrimentally impact their ability to receive a standard diploma and further limit post-secondary opportunities.<sup>lxxxvi</sup>

The low number of standard assessments combined with delayed IEP supports and services negatively contribute to the education of the military-connected student with disabilities. To demonstrate, if a student transitions with an IEP or 504 Plan six times over the course of their educational career due to military moves, cumulatively, the student is without educational supports for approximately 25.5 months over the course of their time as a military-connected student. This equates to at least 2.5 academic years without access to an appropriate education mandated through the IDEA. Data is not currently being collected to wholly identify these barriers or their long-term impacts on the military-connected student’s progress in the public school setting.

### ***Military Student Identifier (MSI)***

In 2011, the Government Accountability Office (GAO) conducted a study on military students and their education with a resulting recommendation to collect better data.<sup>lxxxvii</sup> The Military Student Identifier (MSI) was included in ESSA as a solution to “provide local educators with quality, actionable data concerning their military-connected students.”<sup>lxxxviii</sup> The state in which the military-connected student physically resides assigns the student a unique MSI. When the military-connected student transitions to a new state, a new MSI is generated and assigned, and their testing information is duplicated as a new MSI in the new state. A “universal” identifier that travels with students with each move would result in more accurate data.<sup>lxxxix</sup>

MSI data collection identifies and reports testing results of military-connected students.<sup>xc</sup> The MSI designation subgroups military-connected student testing results in state and local school district annual “report cards” detailing the results of statewide tests in math, reading/language arts, and science. This reporting enables parents and stakeholders to see the

performance of states and school districts, and compares student data subgroups such as race, ethnicity, disability status, and MSI.<sup>xc1</sup>

However, results of state-reported MSI data is not a reliable source of educational outcomes for military-connected children because each state's definition of “military-connected” varies as does their methods of reporting measures. This skews the data from accurately representing its intended population used to fully inform parents and stakeholders.

The 2023 NDAA mandated DoDEA to evaluate the effectiveness of the MSI. The subsequent 2024 report surveyed the states and their criteria used to collect MSI data and noted the lack of a standardized collection methodology for MSI data.

The State of Delaware defines a military-connected student as any student having any immediate family member, including a parent, stepparent, sibling, or any other person residing in the same household, who is on active duty, serving in the Reserve Component, or recently retired from a branch of the U.S. Armed Forces. Meanwhile, Virginia includes the Commissioned Corps of the National Oceanic and Atmospheric Administration, and the Commissioned Corps of the U.S. Public Health Services which are Uniformed Services in its active duty definition. In Texas, military-connected students are dependents of active duty or former members of the U.S. military, National Guard, or Reserve force.<sup>xcii</sup>

Further, each state decides whether the MSI data is included publicly in the school report card, which limits military-connected parent and stakeholder access to information relevant to their interests.

Most importantly, the MSI data is not disaggregated for students with disabilities. This information has the potential to drive trends that could be helpful to military parents with children in special education.<sup>xciii</sup> For instance, if school data shows a high percentage of military-connected students with disabilities performing well academically, this can indicate a level of experience, resources, and willingness to work with a population that faces a different type of

barrier compared to typical peers. The U.S. Department of Education (ED) recognizes these challenges and partnered with Joining Forces, DoDEA and various stakeholders to include the EdTech community and military nonprofit organizations in the last few years to address these issues. The ED recently announced new actions to support military children with disabilities and ensure they receive the services they need when they move to a new school.<sup>xciv</sup> One initiative is to include military-connected children with disabilities in IDEA Part B subgroup data collection.<sup>xcv</sup> This proposed data collection would provide reliable data about their educational outcomes as highly mobile military-connected students with disabilities. These collaborations between stakeholders and agency partnerships are invaluable and have provided coordinated solutions to support all highly mobile students.

### ***Federal Oversight of Procedural Safeguards of the IDEA***

The IDEA provides procedural safeguards that protect the rights of students receiving special education services and supports.<sup>xcvi</sup> As previously discussed, if a disagreement arises between parents and the school district pertaining to the delivery of special education services or if the parents believe a school district violated the provision of FAPE, the IDEA provides avenues of dispute resolution. Safeguards to bring attention to a dispute may include filing a written state complaint, mediation, pursuing due process, or other dispute resolution options. State complaints are processed and reviewed by the State Education Agency (SEA).

While the process appears to provide an impartial review, evidence suggests SEA oversight tends to minimize the severity of complaints submitted by parents and generally find in favor of school districts. Recent research shows parents rarely receive favorable decisions, with school districts prevailing the majority of the time in due process hearings.<sup>xcvii</sup> Additionally, state

complaint resolution orders from SEA officials were often remanded back to the school district to review their procedures without penalty for violations or failure to enforce the IDEA. These issues were highlighted recently in the Commonwealth of Virginia, where the Joint Legislative Audit and Review Commission (JLARC) committee noted that the Virginia Department of Education heavily relies on school districts to self-report problems regarding special education compliance.<sup>xcviii</sup>

IDEA safeguards are not easily accessible for military-connected families. The 2021 PiP *Military Special Education Survey* indicated 74% of respondents indicated they had a reason to file a complaint regarding their child's special education services, with 22% stating they did not think filing a complaint would make a difference.<sup>xcix</sup> The short timeframe at a duty station does not provide adequate time to collect data to properly identify regression or the inappropriateness of the services and supports. Other factors that may contribute to military-connected families choosing not to file a state or due process complaint include the absence of their service member, lack of access to legal assistance, financial barriers, or the stress of filing a complaint.

Collecting and compiling state complaint and due process complaint data of FAPE violations requires oversight at the federal level. This is imperative to ensure states properly adhere to the federal law that protects children with disabilities which helps to ensure military families have equal access to the protections afforded to their civilian counterparts.

## **Recommendations**

1. Support IDEA Part B subgroup data collection of student outcomes for military-connected children with disabilities.

2. Continue and enhance federal oversight of data collection of state compliance with the IDEA.
3. Improve transparency of complaints and dispute resolution by state.
4. Collaboration between Military Service Organizations (MSOs) and the Presidential Administration
  - a. Working groups (similar to Joining Forces) allow MSOs and the Presidential administration to actively collaborate on issues currently affecting military families. This serves as a direct, experienced link as well as a real opportunity to affect change through honest and open collaboration.

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## **Conclusion**

Military-connected children are often described as resilient because they are asked to endure and overcome challenges that their civilian counterparts commonly do not. Our proposed solutions for military-connected families with children with disabilities include targeting DoD program and policy updates, federal- and state-level legislative provisions to strengthen IEP transfer protections, and improving educational data reporting. Together, these solutions aim to help address challenges and better support military-connected families with children with disabilities.

The education gaps of children with disabilities are compounded with each military-related move, leading to outcomes that fall well below legal standards and, ultimately, puts their ability to become independent, productive members of society at risk. Every school district in the U.S. and across DoDEA that serves military-connected children should strive to lessen the burdens on military-connected families, especially families with children with disabilities.

Overwhelmingly, the lack of research and incomplete data collection on the intersectionality of delayed healthcare access and educational outcomes for military-connected children with disabilities results in a full scope lack of understanding. A concentrated effort by DoD and state leaders, more accurate data collection, new initiatives, and updated policies would inform and drive the efficacy of current DoD programs. These improvements would enable families to transition more effectively, reduce healthcare access delays, and help diminish educational gaps. With less than 1% of the U.S. population currently serving in the military today, spearheading and targeting coordinated efforts to proactively support our most vulnerable military families will undoubtedly strengthen the military family unit and ultimately improve military readiness and retention.

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