Program Supports Military Families With Special Needs


About a year ago, Air Force Maj. Nicholas Sabula received word of an upcoming assignment following his deployment in Afghanistan.

He became concerned, however, when he learned that his new duty station and the local area didn’t have adequate services for his son, who was diagnosed with autism in 2006. But shortly after, based on a recommendation from his Exceptional Family Member Program coordinator, Sabula’s assignment was cancelled and he moved here instead.

“The benefit to our son was tremendous,” he said. “It showed the availability of services at one location versus another can make an incredible impact on that child. Knowing that EFMP took care of my family, that was critical to me,” he added.

Ensuring military families with special medical and educational needs receive the best care and support possible is the goal of the Exceptional Family Member Program, said Rebecca Posante, deputy director of the department’s office of community support for military families with special needs. The program assists these families with everything from assignments, as in Sabula’s case, to referrals for military and community resources, Posante said, with a focus on three key areas: identification and enrollment, assignment coordination and family support.

Family members — whether a spouse, child or dependent adult — with a chronic medical condition or special educational requirement are eligible to enroll, Posante explained. Conditions run the gamut, she noted, covering everything from asthma and allergies to autism and Alzheimer’s disease.

“If you’ve got something that requires you to see someone beyond your family doctor, you probably should come and see if you need to be enrolled,” she advised. An enrollment referral can come from several sources, Posante explained, including a military treatment facility or school, or from the service or family member. A program coordinator at the local military treatment facility handles the enrollment process, she added.

Once enrolled, the service member’s records would include a “flag,” Posante explained, which serves as an alert that the member’s family may need special consideration when up for an assignment, whether stateside or overseas. This ensures a family member’s special needs are considered in the assignment process, she added.

“There may be places where if a family member has a particular issue, it may not be advisable for you to go to this area,” she noted, citing asthma as an example. The condition might be fine at one location, but exacerbated at another, she explained. Or, a child or spouse may need a specialized orthopedic program that’s only offered in limited locations.

The program also helps to avoid treatment disruptions, Posante noted. If a cancer patient is undergoing treatment at one base, a program coordinator can recommend that patient not be moved until therapy is completed.

“We’re saying, ‘Let’s take this into consideration before we put you into an untenable situation,’” she said. “We’re looking only at medical and educational needs to be met where they’re going.”

When notified of a move or upon arrival, Posante recommended families contact their local installation family support providers. The program recently added these providers, she explained, and they’re now situated in family centers at every installation. These providers help families identify and access programs and services, both on base and within the community. Their services include information and referrals for military and community services, local school information, referral to other family center providers, and education and training about issues related to the special need. The support providers also provide a “warm handoff” to the gaining installation, she said, by sending information, with the family’s permission, to the program contact there.

Families with special needs often feel like they’re starting from scratch at a new duty station, Posante noted, as they work to enroll in new programs and ensure education plans are up-to-date. “If I’m getting ready to move, it’s helpful to have one person I can contact for information and points of contact,” she said. “They can help navigate these systems.”

Military families who aren’t near an installation, including those of the National Guard and Reserve, can call a Military OneSource consultant for support and to discuss special-needs concerns. Families can receive 12 free consultations per year by calling 1-800-342-9647 or by visiting the OneSource website. Posante said her office is planning to host a panel next month during which active and reserve service members with special needs family members — from children to adults — will explain what challenges they face and offer suggestions to improve the program. This information will help shape the program in the years ahead, she added.

More than 120,000 military families with special needs are enrolled in the program, but Posante said there could be twice that many with enrollable conditions, ranging from the minor to the severe. She’d like to see more service providers enroll so they can receive the care and support their families need. “It’s in their benefit, their family’s benefit, to be enrolled,” she said.

ARTICLE SOURCE: American Forces Press Service

April is Military Child Month!
The Military's Survivor Benefit Plan and the Disabled Child

The Voice is the e-mail newsletter of The Special Needs Alliance. This installment was written by Special Needs Alliance member Kelly Thompson of Arlington, Virginia. Ms. Thompson is the author of "The Administration in a Day" (published by The Virginia Bar Foundation) and the "Adult Incapacity" chapter of the Virginia Lawyer Deskbook, and she is an active volunteer with The ARC of Northern Virginia. She also serves as counsel for the pooled special needs trust for The ARC of Northern Virginia, and she is a member of the Legal Advisors group for the National Capital Chapter of the Multiple Sclerosis Society. Ms. Thompson's readable article "Planning for Individuals with Special Needs" is available online. "The Military's Survivor Benefit Plan and the Disabled Child" was originally published in The Voice, June 2009 - Vol. 3, Issue 3.

Many military families with disabled children face a dilemma when they retire - whether or not to choose the Survivor Benefit Plan (SBP) retirement option.

SBP will pay up to 55% of the military member's retirement pay to a spouse and/or dependent child. The member can select a lesser benefit at less cost, if they choose. The military member can select between coverage for a spouse only, a spouse and children, or children only. The member pays about 6.5% of retirement pay for SBP for a spouse and only about $20/month for dependent children.

In addition to or in place of SBP, a military member can provide an array of benefits for a child with a disability. In most cases a disabled child over age 18 can be designated as an Incapacitated Dependent (DD Form 133-5) and be permanently eligible for military post privileges as well as TriCare health benefits.

However, military benefits do not include supported living programs or vocational opportunities and the SBP and TriCare benefits are often not enough to support a child with a disability. So the family looks to other programs. If the disabled child over age 18 has assets of less than $2,000 and minimal income, the disabled adult child will usually be eligible for Supplemental Security Income (SSI) and Medicaid. Although SSI only pays $674 monthly and Medicaid may seem to duplicate TriCare, these programs can be critical to the long term support for a disabled child. If a disabled child is living independently, SSI money pays for food and shelter while Medicaid pays for supported living programs, day programs, job coaching and other supports. Thus, TriCare does not provide the same benefits as Medicaid; they complement each other for the disabled child.

SSI payments are offset by income received by the disabled child. Any unearned income over $20 offsets SSI income dollar-for-dollar. Once SSI income reaches zero, SSI is lost and, in most cases, Medicaid is lost. If the military member dies having chosen SBP for his or her child, the disabled child will receive 55% of the member's income. If that 55% of the member's income, if that 55% of the member's income, is lost, the disabled child will receive 55% of the member's income. If that 55% of the member's income, if that 55% of the member's income, is lost, the disabled child will receive 55% of the member's income.

Non-military parents can easily assign their pension and life insurance benefits to a special needs trust for their child with a disability. This allows the child to receive SSI and Medicaid and supplement those funds with a special needs trust containing other assets or benefits the parents have earned to help care for their child. Defense Finance and Accounting regulations state that the SBP may only be paid to a person who is not legally able to work due to a physical or mental condition, and that SBP pays only to a person who is legally able to work due to a physical or mental condition. Support is growing for a legislative fix to this problem, allowing SBP to be assigned to a special needs trust. The Military Coalition has placed this issue on their legislative agenda and House Resolution 289 was introduced on April 23, 2009. The new law, if enacted, would allow the SBP to be assigned to a special needs trust. An identical provision is expected to be introduced by Senator James Webb of Virginia, as part of the National Defense Authorization Act later in the legislative session. The Special Needs Alliance is actively participating in the lobbying effort on this legislation.

If you have or know of a story of the adverse impact of this SBP rule on a disabled adult child, please share your story with us. We may be able to use it in our lobbying effort.

About this Newsletter: We hope you find this newsletter useful and informative, but it is not the same as legal counsel. A free newsletter is ultimately worth everything it costs you; you rely on it at your own risk. Good legal advice includes a review of all of the facts of your situation, including many that may at first blush seem to you not to matter. The plan it generates is sensitive to your goals and wishes while taking into account a whole panoply of laws, rules and practices, many not published. That is what The Special Needs Alliance is all about. Contact information for a member in your state may be obtained by calling toll-free (877) 572-8472, or by visiting the Special Needs Alliance online.


PEATC Workshops and Events: April 2013

April 12, 2013 – KidWX Expo – Exhibitor
April 13, 2013 – Wytheville – IEP topical Institute - Presenter
April 13, 2013 – Culmore Multicultural Day 2013, Falls Church, VA – Exhibitor
April 16, 2013 – “IEP Planning, Communications and Accommodations” Buchanan County Public Schools, Grundy, VA - Presenter
April is Military Child Month!

Special-needs Families Offer Insight on Challenges

Military families with special needs would benefit from better consistency in services, more effective communication and improved health care education -


A group of specially selected family members offered up these suggestions for improving ongoing challenges facing an exceptional family member panel held last week at the Defense Department’s office of community support for military families with special needs here. The panel was composed of 10 families with special needs -- from children with educational or physical challenges to adults with medical problems -- with representation from all services, as well as the active duty and reserve components. The panel’s aim was to help DOD officials “get a pulse” on the challenges special-needs military families face, said Rebecca Posante, deputy director of the office of community support for military families with special needs, which oversees the department’s Exceptional Family Member Program. “We want to make sure what we think are the issues are what the families think are the issues,” she said, “and see if we’re going in the right direction.” Panel members spotlighted three key areas of concern: consistency, communication and health care, Posante said.

Across the board, panel members raised issues about the consistency of special-needs services across the branches and between the active duty and reserve components. For example, if a Navy member goes to an Army facility, that member should expect to receive the same quality and similar types of services, Posante said. And, people should get the same support regardless of activation status or uniform, she added.

Family members wanted to know, “Why do we get this when we’re here, but not in another place?” Posante said. Panel member Debra Childs, wife of Navy Chief Petty Officer Louis Childs, said she was pleased this issue was brought to the table. The couple has five children, three of whom are enrolled in the Exceptional Family Member Program. Their 11-year-old daughter, Desiree, was diagnosed with sickle cell anemia at birth and her asthma, and their two adopted sons, 14-year-old Jordan and 10-year-old Scottie, have issues ranging from learning disabilities to autism. The 17-year-old couple said they hope the department can find a way to make the program universal across the branches to “make sure the language is the same, the application process is the same and the services are the same” for all. That way, she said, if she’s living near an Air Force base, she can be assured the experts there will know what types of services she’s supposed to receive regardless of her service affiliation. These consistency issues, Childs noted, can be compounded when moving. Parents want to ensure important services aren’t interrupted during transition, she said.

Fellow panel member Army Maj. Charlotte Emery, mother of twin boys and a military lawyer at Fort Belvoir, Va., said she’d like to see better consistency regarding respite care for children. Her 2-year-old sons both are enrolled in the Exceptional Family Member Program. One was diagnosed with autism at 18 months and his brother with developmental delays for speech, language and socio-emotional behavior. Emery said she relies on respite child care for a break from her full-time job and parenting of the twins and her older daughter. Just a few hours for a run or a nap can carry her through the tough days when the boys are running around nonstop, she said. However, the ease of getting a few hours of child care varies from service to service. It “is disconcerting, when you see such a difference between service branches, especially when we’re in such a joint environment,” she said. Military families with special-needs families all start the same process with the same form, she said, and “everything that flows from that form should mirror.

Communication is another point of concern, Posante noted. It’s an ongoing challenge to ensure the right information is getting to the right people in a timely manner. Her office, she pointed out, already is working this issue. They just launched a mobile website, she explained, that can be accessed via smartphone with the simple swipe of a barcode.

The site offers a program overview, links to service program sites and features an Exceptional Family Member Program contact locator. “We’re hoping this will open up the program to a lot of younger people,” she said. Posante said military families who aren’t near an installation, including those of the National Guard and reserves, can call a Military OneSource consultant for support and to discuss special-needs concerns. Families can receive 12 free consultations per year by calling 1-800-342-9647 or by visiting the MilitaryOneSource website.

On the topic of health care, families discussed the need for better education regarding benefits, Posante said. Panel members suggested TRICARE develop an online health care course that describes benefits for special-needs families clearly and in detail. For an online course, she noted, is “very double.” Other health care issues, Posante explained, centered on Extended Care Health Option, or ECHO, a supplemental program to the TRICARE basic program that offers financial assistance for a certain set of services and supplies for eligible active duty family members.

The panel also discussed fiscal constraints and how the current austere budget environment would affect the program, Emery noted. “Much of the time, we were talking more policy -- how to do more with less,” she said. “What should we do to optimize services for everyone? What can we do that wouldn’t be cost-add, but effective?” Emery said the family members tried to give personal examples, but veered away from keeping the topics too personal, trying to make sure they addressed the big-picture issues that affected the most people possible. It was encouraging to note that “much of what we discussed, they are already working on or bad conceived of,” Emery said of Posante’s office. “We were validating where they’re already headed. That’s the telling point. We weren’t that far apart.”

Officials will use the panel’s feedback and suggestions in an after-action report, which will help them devise an approach to tackling these issues, Posante said. Some of the suggestions, such as TRICARE online training, can be implemented quickly, while other ideas will call for a longer haul, she added. Either way, the plan is to bring the same family members back in six months to evaluate progress and offer suggestions for the future, she said.

“I walked away feeling like we had a real partnership with the families,” Posante said, noting her gratitude for the families’ participation. “A lot of what we’re doing, we’re right on track, but a few things we might need to put a new focus on.”

Childs said she was grateful for the experience. “I feel extremely hopeful,” she said. “The people who put this together really valued and sought our opinion. They encouraged us to be frank, and reassured us that they will take the suggestions and will apply them to the program appropriately, and the program will be better than it is today.”

Legal Lingo - "Top 5 Myths & Facts about Wills and Trusts"

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As the mom of two young boys, I am committed to making wills, trusts, and guardianship documents accessible for everyday families. The Law Office of Rebecca Geller (http://rebeccagellerlaw.wordpress.com) works with families in Virginia and D.C. to draft wills, trusts, guardianship and power of attorney documents, living wills, and customized legal estate plans.

Myth #1: I am young and not wealthy, I don’t need a will. They are only for rich, old people.

FACT: Everyone has an estate and therefore everyone needs a will. Personal property (e.g., furniture, family heirlooms, art, jewelry, clothing, automobiles), bank accounts, retirement accounts, life insurance policies, and real estate are examples of items that may be disposed of through a will. Without a will, the state will decide who receives the property you acquired throughout your lifetime. Most people don’t want this to happen. Creating a will makes sure that your loved ones receive items of sentimental or monetary value.

Myth #2: I don’t have anything to give anyone when I die. I don’t even own a home.

FACT: Even if you determine that the property you own doesn’t have much monetary value, the sentimental attachment to personal belongings can prompt people to create a will to allocate who receives what when they die. Who will receive your engagement ring? Your photo albums? Aside from property, who will be the guardian for your children? Who will care for your pets? Where do you want to be buried and how? Dying without a will leaves these decisions to the state.

Myth #3: My family will take care of my children when I die. I don’t need to make provisions for them.

FACT: If you don’t appoint a guardian for your children when you die, a judge will decide who raises your children. Is this really what you want? The judge may not share your values, religious beliefs, or child rearing views. Without a will, the judge will not know who you believe is best suited to raise your children in your absence. Creating a will puts you in control of your children’s future. You wouldn’t allow a stranger to dictate how your children are raised while you are living, so why allow a judge to appoint someone to raise your children when you can appoint a guardian yourself.

Myth #4: A trust is a tax shelter for wealthy people. It isn’t meant for regular people like me.

FACT: A trust is an important estate planning tool used to make sure that your kids have money for an education, wedding, down payment on a house, special needs, etc. It is not a tax shelter, although there may be tax benefits to establishing a trust. A trust also helps you avoid the need for a conservatorship in the event of your incapacity. Loss of legal capacity can occur as the result of an accident or illness, and may only be temporary, or can be caused by something more permanent such as Alzheimer’s disease or dementia. Additionally, a living trust keeps your affairs private by avoiding probate. You don’t share all of your financial information with everyone during your lifetime, why do so upon your death.

Myth #5: I have never worked with an attorney before and I am worried that the legal fees will be too expensive and the attorney cannot relate to my life.

FACT: One of the reasons I started my own law practice is to make the legal system accessible and affordable to everyday families. One of my recent clients recommended me to her friends and said: “Rebecca Geller was patient in taking the time to explain the differences between regular wills, trusts, power of attorney choices, etc. She was able to make recommendations that best fit our lifestyle and budget. She was timely, responsive and a pleasure to work with. I have already recommended her to a few friends looking for similar services!”

The Law Office of Rebecca Geller offers a free initial phone consult to anyone interested in a legal estate plan. Please email her at RGeller@rebeccagellerlaw.com to schedule your today.

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LATINO CORNER

Recursos del programa Actividad Educativa del Departamento de Defensa ("DoDEA") - Recursos para familias militares

Información sobre la mudanza (ingles)
Una lista de verificación para familias militares que pronto se mudaran http://www.dodea.edu/Curriculum/specialEduc/relocation.cfm

Derechos de los padres en educación especial de DoDEA (español):

Más publicaciones (ingles)
Tecnologías de apoyo, mudanza, transición y mucho más http://www.dodea.edu/Curriculum/specialEduc/pubs.cfm

Derechos y responsabilidades de los padres (en diferentes idiomas)
http://www.dodea.edu/Curriculum/specialEduc/parentsInfo.cfm

Resources from the US Department of Defense Education Activity (DoDEA) - Resources for military families

Relocation Information (English)
A checklist for those families that are going to be relocating http://www.dodea.edu/Curriculum/specialEduc/relocation.cfm

DoDEA Parent Rights for Special Education (Spanish)

Other publications (English)
Assitive Technology, relocation, transition and much more http://www.dodea.edu/Curriculum/specialEduc/pubs.cfm

Parent rights and responsibilities (in other languages)
http://www.dodea.edu/Curriculum/specialEduc/parentsInfo.cfm