

The Consideration of Medical/Clinical Diagnoses in the Educational Identification of Disabilities under IDEA

A diagnosis of a medical/clinical condition alone does not automatically establish eligibility for special education and related services. Eligibility must be based on a comprehensive body of evidence, with a medical/clinical diagnosis serving as just one component of the overall evaluation.

The Individualized Education Program (IEP) team is responsible for determining whether a student meets the eligibility criteria for special education under IDEA. In the same way, a 504 team must determine if a student is eligible for services under Section 504 of the Rehabilitation Act of 2008.

This document guides IEP teams on considering medical/clinical diagnoses in the educational identification of disabilities and IEP development under the Individuals with Disabilities Education Act (IDEA).

Specific Considerations:

- A medical provider/physician may not determine or prescribe special education services. However, the diagnosed condition may contribute to challenges in accessing and making reasonable progress in the general education curriculum. The IEP team must consider this when conducting a Comprehensive Evaluation, and when determining educational impact that requires special education, related services, and specially designed instruction.
- In addition to a medical/clinical diagnosis, teams must also consider secondary health-related effects such as medication side effects, ongoing treatments or therapies, frequent medical appointments, and/or repeated hospitalizations, as these factors may significantly impact engagement and success in the educational environment.
- The terminology used in medical/clinical reports often differs from the disability categories defined under Colorado's Exceptional Children's Education Act (ECEA) and the Individuals with Disabilities Education Act (IDEA), which can lead to misunderstandings or misalignment between medical findings and educational eligibility decisions.
- A medical/clinical diagnosis, physician's note, or medical report must be considered and included as part of the body of evidence, along with other relevant information, when determining eligibility or the provision of Free Appropriate Public Education (FAPE)
- The team may accept or reject medical/clinical information, but all relevant details and sources must be documented in evaluation reports. The rationale for these decisions, especially regarding the students' academic and functional performance, should be recorded in the Prior Written Notice.

Section 504:

Section 504 is a federal civil rights law under the Rehabilitation Act of 1973 and was amended on May 1, 2024. The new rule strengthens protections for individuals with disabilities in settings that receive federal funding, including schools, setting clearer enforcement standards and updating access requirements to reflect current expectations under civil rights law. To qualify for protections and services under Section 504, a multidisciplinary team must determine that a student has a physical or mental impairment that substantially limits one or more major life activities, including major bodily functions. A major life activity may include caring for oneself, performing manual tasks, walking, seeing, hearing, learning, reading, concentrating, thinking, communicating (ADA 2008 34 C.F.R. § 104.3)

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This CDE guidance document is meant for clarification, is not legally binding, and is not to be confused with legal advice. This guidance reflects CDE's recommendations, but Administrative Units (AUs) may have developed their own policies or procedures that differ from those described herein. Be sure to refer to your local AU's policies and procedures through the Director of Special Education. If you are seeking legal advice, please contact your legal counsel.

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