



DEFENSE  
HEALTH AGENCY

**OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE  
HEALTH AFFAIRS**

7700 ARLINGTON BOULEVARD, SUITE 5101  
FALLS CHURCH, VIRGINIA 22042-5101

JAN 14 2014

**MEMORANDUM FOR ALL DEFENSE HEALTH AGENCY EMPLOYEES**

**SUBJECT: Reasonable Accommodations for Individuals with Disabilities Guidance**

The Defense Health Agency (DHA) is committed to providing reasonable accommodations to its employees and applicants for employment in order to assure that qualified individuals with disabilities, permanent or temporary, as required by Federal laws, enjoy full access to equal employment opportunities. The intent of this updated policy, which supersedes previous policy on this matter, is to increase the awareness of managers and supervisors responsible for providing expanded opportunities for individuals with disabilities in the DHA workforce. Further, this policy implements a new maximum amount of time for processing and providing reasonable accommodations decisions to qualified applicants and employees.

Section 501 of the Rehabilitation Act of 1973, as amended, requires employers to make "reasonable accommodation" to the known physical or mental limitations of qualified applicants and employees with disabilities unless the agency can demonstrate that the accommodation would impose an undue hardship on the operation of its program. Executive Order 13164 requires all Federal Agencies to establish procedures on handling requests for reasonable accommodations. DHA established the following procedures:

1. An employee's oral or written request (using DHA Form 31) for reasonable accommodation(s) by the agency or supervisor will be processed using DHA Form 31.
2. Supervisor must forward a completed DHA Form 31 to the servicing Equal Employment Opportunity (EEO) Office, which in turn will forward a copy to the DHA EEO Disability Program Manager for record and tracking.
3. The DHA EEO Disability Program Manager will assign a log number and share it with the supervisor along with the suspense date for a decision on the request.
4. Employer or supervisor will consult with the individual to determine what accommodation(s) are needed to do the job.
5. If necessary, determine what the essential functions of the employee's job are.
6. Request documentation of the qualified disability, if not known or visible, and the limitations to be accommodated.
7. Select the accommodation(s) that is most appropriate in view of the individual's and agency's needs.
8. If the supervisor cannot approve accommodation(s), forward reason(s) for disapproval to DHA EEO Disability Program Manager for consultation with the Office of General Counsel or the servicing legal office.

9. Once accommodation decision processing is completed and the request is approved or disapproved, forward copy of DHA Form 31 to DHA EEO Disability Program Manager for file. Agency or supervisor will ensure approved accommodation(s) are implemented within 30 days from the date of the signed approval, unless there are extenuating circumstances.

A “reasonable accommodation” is defined as a change in the work environment, or in the way things are customarily done in the performance of a job, an employment practice, or the work environment, that makes it possible for an individual with a disability to enjoy an EEO, unless to do so would cause an undue hardship. A request for reasonable accommodation may be made orally or in writing by an employee or applicant, or the employee or applicant’s family member, health care professional, or authorized representative. The individual making the request need only indicate the need for assistance based on a medical condition. The use of special words is not required (e.g., “reasonable accommodation,” “disability,” or “rehabilitation”).

The use of reasonable accommodations removes workplace barriers that would otherwise prevent qualified individuals with disabilities from competing for jobs or gaining access to the benefit of employment. The DHA supports the use of reasonable accommodations in the workplace, especially the employment of individuals with disabilities.

A “qualified individual with a disability” refers to a disabled individual who meets the job-related skill, experience, and education requirements and, who, with or without a reasonable accommodation, can perform the essential functions of the position held or desired. Individuals with disabilities are those who have a physical or mental impairment that substantially limits one or more of that individual’s major life activities, a history of such impairment, or is regarded as having such impairment. The term “essential functions” means the fundamental job duties of the employment position that the individual with disability holds or desires.

The employee is responsible for completing and submitting the DHA Form 31 to their supervisor unless extenuating circumstances prevent the applicant or employee from completing and submitting the form. In this instance, a representative or the supervisor may fill out the form and submit it to the servicing EEO office. The employee needs to articulate the accommodation(s) needed and participate in the interactive process with their supervisor. Medical documentation may be required from the applicant or employee, and DHA has the right to have it reviewed by a medical expert. Reassignment will be considered as a reasonable accommodation if the DHA determines that no other reasonable accommodation will permit the employee to perform the essential functions of the current position. Employees with disabilities have the right to file an EEO complaint or to use other statutory review processes if the request for reasonable accommodation is denied; however, use of informal dispute resolution processes is encouraged but not required.

Supervisor(s) are responsible for receiving and acting on the request for reasonable accommodation(s) whenever possible at the lowest level of management when in agreement as to the type of accommodation(s). Supervisor(s) must engage in the interactive communications

process with the employee and assess the essential job functions and request pertinent medical documentation, if appropriate. If the immediate supervisor cannot approve the request, he/she must forward, within 5 business days from date of receipt, to the second-line supervisor in the requestor's chain of supervision for review and approval or disapproval.

The maximum time for processing and providing reasonable accommodation decisions to an applicant or employee shall not exceed 30 business days from the date of DHA's receipt of the written request, absent any "extenuating circumstances." If the first line supervisor cannot approve or make a decision on the reasonable accommodation request, then he/she must forward the request and any supporting documents to the second-line supervisor in the chain of supervision for review and a decision within 7 business days. If the EEO Division, DHA, does not receive a response to approve or disapprove the request within 14 business days, the EEO Division will contact the Chief Functional level for the employee to assist with making a decision.

For clarification purposes, "extenuating circumstances" are unforeseen or unavoidable events or factors that could not reasonably have been anticipated or avoided that prevent the prompt processing and delivery of an accommodation decision. Some examples of extenuating circumstances are: waiting on a response to a request for medical information, purchase of equipment, equipment ordered may be back-ordered, or removal of architectural barriers.

DHA Form 31, DHA Reasonable Accommodations Request, will be used to process all reasonable accommodation requests (enclosed). Managers and supervisors will be trained annually on their responsibilities under the procedures for reasonable accommodation.

The DHA point of contact for reasonable accommodation issues is Mr. Keith Gaiter, DHA EEO Deputy Director. Mr. Gaiter may be reached at (703) 681-9564, or [Keith.Gaiter@dha.mil](mailto:Keith.Gaiter@dha.mil).



Douglas J. Robb, DO, MPH  
Lieutenant General, USAF, MC, CFS  
Director

Enclosure:  
As stated

## DHA Reasonable Accommodation Request

### CONFIRMATION OF REQUEST FOR REASONABLE ACCOMMODATION

This statement serves to inform you of the purpose for collecting personal information through DHA Form 31, Reasonable Accommodation Request

**AUTHORITY:** 29 U.S.C. §701, Employment of Individuals with Disabilities; DoD Directive 1020.1, Nondiscrimination on the Basis of Handicap in Programs and Activities Assisted or Conducted by the Department of Defense (November 21, 2003); and E.O. 13164.

**PURPOSE:** To record, track, and make determinations regarding requests for reasonable accommodation by individuals with disabilities.

**ROUTINE USES:** Information may be disclosed for any of the DoD "Blanket Routine Uses" published at [http://www.defenselink.mil/privacy/dod\\_blanket\\_uses.html](http://www.defenselink.mil/privacy/dod_blanket_uses.html) as well as those generally permitted under 5 USC 552a (b).

**DISCLOSURE:** Voluntary; however, if you do not provide the information requested in this form, DHA may not provide you with a timely accommodation, and you may not receive important information.

#### 1. INDIVIDUAL INFORMATION:

Applicant or Employee Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Pay Plan, Series, Grade \_\_\_\_\_ Date of Request \_\_\_\_\_  
Organization \_\_\_\_\_  
Form Completed By \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
  
Employee Signature \_\_\_\_\_

#### 2. ACCOMMODATION REQUESTED: *(Be as specific as possible, e.g., adaptive equipment, reader, or interpreter):*

**3. REASON FOR REQUEST:**

If accommodation is time sensitive, please explain:

**4. SUPERVISOR INFORMATION:**

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Organization \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Return Form to Supervisor

**5. LOG NUMBER:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notes:** (1) This form should be completed by the employee making the reasonable accommodation request and provided to his/her supervisor. An applicant should return the form to a DHA employee with whom the applicant has had contact in connection with the application process. If a third party is completing the form on behalf of the employee or a management official is documenting an oral reasonable accommodation request, a copy of the completed form will be provided to the employee to confirm receipt of the reasonable accommodation request. Supervisors must provide a copy of this form to the DHA EEO division, who will assign a log number and return a copy of the form to the supervisor.

(2) The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information" as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

(3) DHA Reasonable Accommodation Request: The maximum time for processing and providing reasonable accommodation shall not exceed 30 business days from the requests day, absent "extenuating circumstances."

### 6. APPROVE/DISAPPROVE

Approved

Disapproved

Reason(s)

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_