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Request for MPRE Test Accommodations

Guidelines for Medical Documentation of Psychological Disabilities

I. Introduction

The National Conference of Bar Examiners (NCBE) is committed to providing reasonable and appropriate accommodations to examinees with documented disabilities who demonstrate a need for accommodations in accordance with the Americans with Disabilities Act Amendments Act of 2008 (ADAAA). The ADAAA and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities.

To support a request for test accommodations, applicants must submit a current diagnostic report prepared by a qualified professional that is on letterhead, typed in English, dated, and signed. The report must establish the nature and existence of the applicant's disability or disabilities, establish his or her current functional limitations, and provide a rationale for each accommodation requested. The current functional limitations caused by the impairment must be relevant to taking the MPRE, and the requested accommodations must be necessary to ameliorate the current limitations.

A summary checklist is provided at the end of these guidelines for quick reference.

The term "psychological disabilities" is used herein to refer to a range of syndromes and conditions characterized by different types and degrees of emotional, developmental, cognitive, and/or behavioral manifestations.

II. Description of the MPRE Administered Under Standard Conditions

The MPRE is a two-hour timed examination administered in paper-and-pencil format in a proctored setting. Most examinees complete the examination in the allotted time. The test consists of 60 multiple-choice questions. Test items are written at an 11th- to 12th-grade reading level. Examinees record their answers by darkening circles on a Scantron answer sheet using a number 2 pencil. Examinees are assigned seats in a quiet environment. Examinees may bring medication, glucose tablets or gel, or medical aids that are necessary to ambulate (cane, crutches, walker, wheelchair, service animal, prosthetic limb, cast, brace, or sling), are necessary to communicate (hearing aid, voice amplifier), or are required for medical or health reasons (heart monitor, insulin pump, glucose monitor, blood sugar testing kit, Epinephrine auto-injector, TENS unit), provided that use of such items will not necessitate any deviation from the standard test policies or schedule.

The Essential Components

I. A Qualified Professional Must Conduct the Evaluation

Professionals conducting assessments, rendering diagnoses of psychological disorders, and making recommendations for appropriate accommodations must be qualified to do so. Appropriate licensure or certification as well as comprehensive training and relevant expertise in diagnosis of psychiatric disorders are essential. Please be aware that we will not grant accommodations based on medical evaluations conducted by family members because of the inherent conflict of interest associated with such an arrangement.

II. Substantiate the Diagnosis and Current Functional Limitations

A comprehensive evaluation or diagnostic report must be provided that includes the following information:

- a specific diagnosis based on the Diagnostic and Statistical Manual of Mental Disorders (DSM-5);
- description of current symptoms across settings (school, work, social, etc.), including the frequency, duration, and severity of symptoms;
- relevant information regarding psychotropic medications expected to be in use during the MPRE test administration and the anticipated impact on the applicant in this setting; and
- relevant information about current treatment and its effectiveness.

A. Diagnostic Interview and/or Psychological Assessment

The professional who conducts the assessment must complete a clinical evaluation addressing all DSM criteria. Behavioral observations, combined with the clinician's professional judgment and expertise, are critical in formulating a diagnostic impression. The information collected for the diagnostic evaluation should include, but not be limited to, the following:

- history of presenting symptoms when the disability is active (e.g., palpitations, sweaty palms, disoriented thinking, mental fatigue);
- onset, duration, and severity of symptoms (including a description that distinguishes common test-taking anxiety from a diagnosed condition);
- relevant developmental, historical, and familial data (including any hospitalization, outpatient treatment, and mental health services);
- relevant medical and medication history, including the individual's current medication regimen, compliance, side effects (if relevant), and positive and negative response(s) to medication;
- current functional limitations in academic, social, or employment settings, with the understanding that a psychological disorder usually presents itself across a variety of settings other than just the academic domain and that its expression is often influenced by context-specific variables; and
- expected progression or stability of the impact of the condition over time, if relevant to test-taking performance.

The evaluator should administer clinical rating scales as necessary to corroborate the severity of the diagnosed disorder. Effort testing to identify possible malingering may be appropriate.

B. Cognitive Impairment

If the applicant is requesting the accommodation of extended testing time on the basis of cognitive impairment caused by the disability or by medication taken for the disability, the claim should be supported by a brief but well-conceived psychological test battery. Obtaining standardized measures of performance on academically relevant tasks may help to objectively demonstrate the need for the requested accommodations. **Test results must be reported using age-based norms where available, and standard scores must be provided.**

III. Each Accommodation Recommended Must Include a Rationale

The report must include specific recommendations for accommodation(s). A detailed explanation supporting the need for each requested accommodation must be provided and correlated with specific functional limitations established through the evaluation process from test results and clinical observations.

The report should include a review of prior accommodations utilized by the applicant (e.g., for standardized examinations such as the LSAT, ACT, or SAT; school examinations; licensing or certification examinations; classroom; etc.) and the extent to which the accommodations met the applicant's needs. It is important to recognize, however, that accommodation needs can change over time and in different settings.

IV. Documentation Must Be Current

The provision of reasonable accommodations is based upon clear evidence of the current impact of the disability on a major life activity that affects the applicant's ability to take the MPRE under standard conditions. Due to the changing nature of psychiatric disabilities, it is essential that the applicant provide recent and appropriate medical documentation. The documentation must address the applicant's present level of functioning and the need for accommodations in the context of taking the MPRE. This is important because an individual's presentation and performance may vary over time even if the diagnosis remains unchanged.

It is difficult to provide hard-and-fast rules regarding the currency of psychological documentation. In most cases, a comprehensive evaluation should have been conducted **within the preceding 12 months**. An evaluation that was conducted more than 12 months ago may suffice, depending on the following variables: a) the nature and type of the psychological disability, including its expected course; b) the severity of symptoms; c) the history of onset and/or duration of the disability; and d) other conditions at the time of last assessment, such as treatment status and stability of functioning. In addition, if symptoms vary in their chronicity and/or severity, up-to-date documentation of current level of functioning is helpful in determining appropriate accommodations. Usually it is sufficient to include a brief status update from a mental health provider or a copy of a recent progress note.

V. Checklist for Psychological Disability Medical Documentation

- A specific diagnosis based on the DSM-IV-TR or DSM-5
- A description of symptoms, including date of onset, duration, and severity
- Relevant developmental, medical, historical, and familial data
- Medication history, including current medication regimen and compliance, any side effects, and positive and negative response(s) to medication
- Elucidation of functional limitations in academic, social, or employment settings based on a comprehensive clinical evaluation conducted within the preceding 12 months
- Up-to-date information about functional limitations relevant to requested accommodations
- Expected progression or stability of the impact of the condition over time
- A neuropsychological, psychological, or psychoeducational assessment battery to document the impact on cognition if extended testing time is requested on the basis of cognitive impairment
- Age-based standard scores for all normed measures administered
- A rationale for each requested accommodation that is correlated with specific functional limitations established through the evaluation process from test results and clinical observations
- A discussion of prior accommodations used and the extent to which those accommodations met the applicant's needs