

Idaho Infant Toddler Program Eligibility/Developmental Disability (DD) Determination Checklist

Name: _____ Date of Birth or Date of Expected Birth: _____

Staff Signature: _____ Date: _____

Meets ITP Eligibility: Yes No

INFANT TODDLER PROGRAM ELIGIBILITY	MEDICAID DD ELIGIBILITY
<p>Infant Toddler participants must meet one of three eligibility categories listed below, as defined in the <i>Idaho Infant Toddler Program eManual, Evaluation and Eligibility</i>. Documentation must be obtained to support eligibility.</p> <p><input type="checkbox"/> A. DEVELOPMENTAL DELAY</p> <p><input type="checkbox"/> 1. 30% below age norm or exhibits a six-month delay, whichever is less, adjusted for prematurity up to 24 months</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> 2. Demonstrates at least two (2) standard deviations below the mean in one (1) of these functional areas:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Cognitive <input type="checkbox"/> Social/Emotional <input type="checkbox"/> Adaptive</p> <p style="margin-left: 20px;"><input type="checkbox"/> Physical (<input type="checkbox"/> fine and/or <input type="checkbox"/> gross motor)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Communication (<input type="checkbox"/> receptive and/or <input type="checkbox"/> expressive)</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> 3. Demonstrates at least one and one-half (1.5) standard deviation below the mean in two (2) or more of functional areas identified in the <i>Idaho Infant Toddler Program eManual, Evaluation and Eligibility</i>.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> B. ESTABLISHED CONDITION (AT LEAST ONE)</p> <p><input type="checkbox"/> 1. Confirmed sensory impairment must document that child has <u>at least one</u> of these conditions:</p> <p style="margin-left: 20px;"><input type="checkbox"/> a) Deaf-Blind</p> <p style="margin-left: 20px;"><input type="checkbox"/> b) Hearing Impaired: must document that child has <u>at least one</u> of these conditions: Hard of Hearing, Deaf, Hearing Loss, Hearing Impairment, Chronic Otitis Media, chronic allergies, and/or eardrum perforations</p> <p style="margin-left: 20px;"><input type="checkbox"/> c) Visually Impaired</p> <p><input type="checkbox"/> 2. Physical Impairment (Orthopedic)</p> <p><input type="checkbox"/> 3. Neurological/Physiological Impairments/Developmental Disabilities</p> <p><input type="checkbox"/> 4. Interactive Disorders</p> <p><input type="checkbox"/> 5. Other Health Impairments</p> <p><input type="checkbox"/> 6. Medically Fragile Infant</p> <p><input type="checkbox"/> 7. Prematurity Plus Significant Environmental Risk</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> C. INFORMED CLINICAL OPINION</p> <p>Date of decision: _____</p> <p>Multidisciplinary team members: _____</p> <p>_____</p> <p>Factors influencing the decision: _____</p> <p>_____</p>	<p>Prior to receiving reimbursement from Medicaid, the child must have a developmental disability determined by meeting the criteria listed below, as defined in IDAPA 16.03.10 "Medicaid Enhanced Plan Benefits", Section 501.</p> <p><input type="checkbox"/> A. Is attributable to an impairment, such as an:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Intellectual Disability; OR</p> <ul style="list-style-type: none"> • An IQ test score is not required below the age of 5. In these cases it may be necessary to rely on the results of a functional assessment. • An intellectual disability is evidenced by a broad independence score or overall composite standard score of 75; or by an overall composite age equivalency or broad independence age equivalency that demonstrates at least a 30% delay compared to the chronological age at the time of testing. <p style="margin-left: 20px;"><input type="checkbox"/> cerebral palsy; OR</p> <p style="margin-left: 20px;"><input type="checkbox"/> epilepsy; OR</p> <p style="margin-left: 20px;"><input type="checkbox"/> autism;</p> <p style="margin-left: 20px;"><input type="checkbox"/> or other condition found to be closely related to or similar to one of these impairments that requires similar treatment or services;</p> <p style="margin-left: 20px;"><input type="checkbox"/> or is attributable to dyslexia resulting from such impairments;</p> <p style="text-align: center;">AND</p> <p><input type="checkbox"/> B. Results in substantial functional limitations in three (3) or more of the following areas of major life activity:</p> <ul style="list-style-type: none"> <input type="checkbox"/> self-care, <input type="checkbox"/> receptive and expressive language, <input type="checkbox"/> learning, <input type="checkbox"/> mobility, <input type="checkbox"/> self-direction, <input type="checkbox"/> capacity for independent living, <input type="checkbox"/> or economic self-sufficiency; <p>*See the DD Functional Limitations Guideline (back of form)</p> <p style="text-align: center;">AND</p> <p><input type="checkbox"/> C. Reflects the needs for a combination and sequence of special, interdisciplinary or generic care, treatment or other services which are of life-long or extended duration and individually planned and coordinated.</p> <p>*See the DD Functional Limitations Guideline (back of form)</p> <p>*Eligibility based solely on informed clinical opinion does not meet Medicaid Developmental Disability criteria.</p>
<p><i>Sources and dates of Information (include developmental or other current evaluations, and medical records):</i></p>	

RECOMMENDATION: (Use Guide to ICF/ID Level of Care Recommendation checklist if needed.)

- Review for DD Eligibility: Yes No Reason: _____
- Review for ICF/ID Level of Care: Yes No

**Developmental Disability
Functional Limitations Guidelines for Birth - 3**

Definition	Standards
(b) results in substantial functional limitations in three (3) or more of the following major life activities:	<p>“Results in” means that the substantial limitation must be because of the impairment. A “substantial” limitation is one in which the total effect of the limitation results in the need for a “combination and sequence of special interdisciplinary, or generic care, treatment or other services that need to be individually planned and coordinated.” Listed below are standards for substantial functional limitations in each major life area.</p> <p>Birth to Age 3: The following criteria must be utilized to determine a substantial functional limitations for children under 3:</p> <p>a. The child scores 30% below age norm; or</p> <p>b. The child exhibits a 6 month delay; or</p> <p>c. The child scores 2 standard deviations below the mean.</p>
self-care;	Birth to Age 21: A functional limitation is manifest when the child's skills are limited according to age-appropriate responses such that the parent, caregiver, or school personnel is required to provide care that is substantially beyond that typically required for a child of the same age (such as excessive time lifting, diapering, supervision).
receptive and expressive language;	Birth to Age 3: A substantial functional limitation is manifest when they have been diagnosed by a qualified professional who determines that the child performs 30% below age norm (adjusted for prematurity up to 2 years) or demonstrates at least 2 standard deviations below the mean in either area or 1 1/2 below in both areas of language development.
learning;	Birth through Adult: A substantial functional limitation is manifest when cognition, retention, reasoning, visual or aural communications, or other learning processes or mechanisms are impaired to the extent that special (interventions that are beyond those that an individual normally needs to learn) intervention is required for the development of social, self-care, language, academic, or vocational skills.
mobility;	Birth to Age 21: A substantial limitation would be measured by an age appropriate instrument which compares the child's skills for postural control and movement and coordinated use of the small muscles with those skills expected of children of the same age.
self-direction;	Birth to Age 21: A substantial limitation is manifest when the child is unable to help his self or cooperate with others age appropriate assistance to meet personal needs, learn new skills, follow rules, and adapt to environments.
capacity for independent living; or	Birth to Age 21: A substantial limitation would be measured by an age-appropriate instrument which compares the child's personal independence and social responsibility expected of children of comparable age and cultural group.
economic self-sufficiency; and	Birth to Age 5: A substantial limitation in this area is evidenced by the child's eligibility for SSI, early intervention, or early childhood special education under the Individuals with Disabilities Education Act (IDEA).
AND	
(c) reflects the needs for a combination and sequence of special, interdisciplinary or generic care, treatment or other services which are of life-long or extended duration and individually planned and coordinated.	Birth to Age 5: The expected duration may be frequently unclear. Therefore, determination of eligibility by a multi-disciplinary team for early intervention services through SSI, an IFSP, child study team or early childhood special education services through an IEP will be an indicator of these criteria.

ITP Eligibility/Developmental Disability Determination Checklist Guidance Document

Determining the child has a developmental delay or established condition under the Infant Toddler Program **does not** mean the child meets Developmental Disability eligibility for Medicaid.

MEDICAID DEVELOPMENTAL DISABILITY CRITERIA HINTS

Developmental Delay:

- Impairment:
 - The SIB-R is not required to identify the category of an intellectual disability for children under age 5. The ITP may use any functional assessment to identify a delay.
 - The child must have a broad independence score or overall composite standard score of 75; **or** have an overall composite age equivalency or broad independence age equivalency that demonstrates at least a 30% delay compared to the chronological age at the time of testing.
- Functional Limitations:
 - In addition, the child must have functional limitations in 3 or more of the 7 areas.
- Multiple Service Needs:
 - In addition, the child must reflect the need for a combination of services for an extended duration.

Established Condition:

- Impairment:
 - The majority of the conditions eligible under the Infant Toddler Program are not covered under developmental disability criteria.
 - Deaf-Blind, hearing impaired, visually impaired, physical impairment, interactive disorders, other health impairments, medically fragile infant, and prematurity plus significant environmental risk are not covered under developmental disability eligibility.
 - Impairments that are covered under developmental disabilities fall within the “neurological/physiological impairments/ developmental disabilities” condition under ITP, and must be or be closely related to one of the following:
 - Intellectual Disability (developmental delay under age 5)
 - Cerebral Palsy
 - Epilepsy
 - Autism
- Functional Limitations:
 - In addition, the child must have functional limitations in 3 or more of the 7 areas.
- Multiple Service Needs:
 - In addition, the child must reflect the need for a combination of services for an extended duration.

*** There are specific guidelines for children Birth - 3 to assist you with identifying if they meet the criteria for functional limitations and multiple service needs (guidelines are included with this checklist).**

Informed Clinical Opinion:

- Eligibility based solely on informed clinical opinion does not meet developmental disability criteria.