



**Overview of Early Steps
Proposed Policies
For Implementation
4/2012 and 7/2012**

Overview Presentation



- Participants:

- Write comments down during presentation
- Make comments following presentation



Access to Documents



● Proposed policies:

- http://www.cms-kids.com/families/early_steps/public_participation.html



● Part C application:

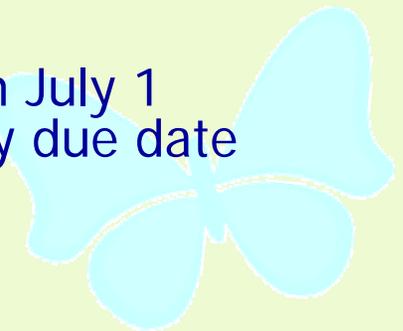
- http://www.cms-kids.com/families/early_steps/public_participation.html



Annual IDEA, Part C Application for Funds



- State submits application for funds to Office of Special Education Programs (OSEP) in spring of each year
- OSEP allots amount of funds each state will receive
- State completes use of funds/budget section
- Amount budgeted must add up to the total amount of the state Part C allotment for the year
- State provides assurances that state will operate consistent with IDEA, Part C requirements
- State submits any policy changes for OSEP review/approval along with the application for funds
- IDEA Part C grant funds are available to states on July 1 each year - as long as application is submitted by due date and all requirements are met



Policy Handbook



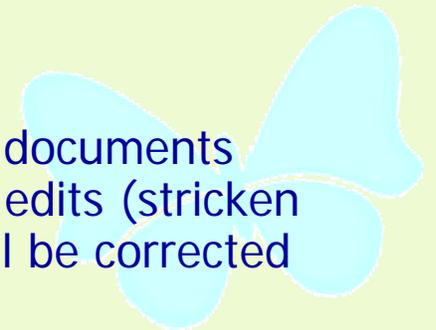
- Symbols continue to differentiate federal  and state  policies
- Formatted for electronic use



- Links to:
 - Federal Statute & Regulations
 - State Statutes
 - Operations Guide
 - Other Policy
 - Other Relevant Documents



- NOTE: actual page numbers in proposed documents may not match table of contents because edits (stricken and added language) are shown – this will be corrected when documents are final



Operations Guide



- Refers to related policy number
- Formatted for electronic use
 - Links to:
 - Attachments
 - Forms
 - Instructions
 - Websites
- Not guidance for every policy
- Navigate between policy handbook, operations guide and attachments



General Rules re: Policies

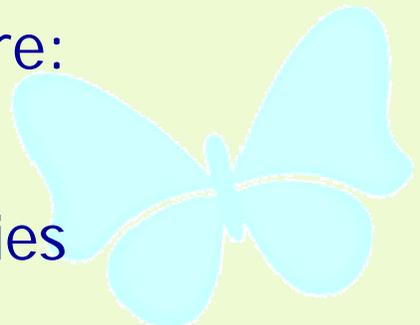


- Definitions linked
- Other agency/program policies (e.g., AHCA/Medicaid, DOE, DCF, provider management) not included/repeated, but linked



Policy Review/Revision Process



- Sept. 2011: Part C regulations released
 - Sept. - Dec. 2011: review regulations to determine impact on Florida policy & draft policy revisions
 - Jan. - Mar. 2012: public participation
 - By April 15, 2012: implement certain policies
 - April 16, 2012: submission to OSEP
 - By June 30, 2012: response from OSEP re: approval and/or conditions
 - July 1, 2012: implement remaining policies
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Component 1 – General Supervision and Administration

System of Payments

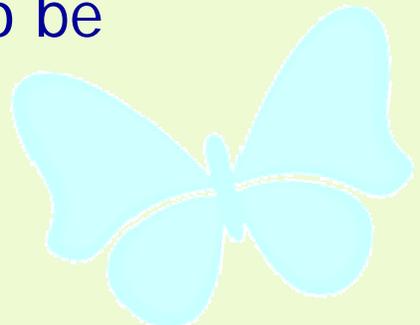


- Clarifies that no services that a child is entitled to receive are delayed or denied because of lack of parental consent to use private insurance (1.5.3 Policy)
- Revises policy to require LES to pay all co-payments and deductibles for Part C services authorized on the IFSP, up to the established Part C rate (1.5.5 Policy)



Public and Private Insurance



- Clarifies that an LES representative must discuss with each family:
 - written consent/refusal required before billing insurance
 - system of payment policies that identify potential cost to parents of using insurance
 - written notice for use of insurance to be provided
 - determination of financial loss
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(1.6.1 Policy and Guide)

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Public and Private Insurance



- Modifies description of financial loss to be consistent with “no cost protections” in regulations:
 - decrease in available lifetime coverage or any other insured benefit for that child or parent;
 - result in the child’s parents paying for services that would otherwise be covered by the public benefits or insurance program;
 - result in any increase in premiums or discontinuation of public benefits or insurance; or
 - risk loss of eligibility for home and community-based waivers based on aggregate health-related expenditures.
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(1.6.9 Policy)

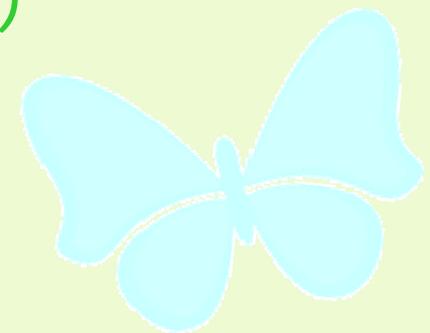


Public and Private Insurance



- Deletes CMS Form 1064 and replaces with new forms (discussed later)
 - Adds Use of Insurance Update Letter for use by service coordinators at least annually
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(Component 1 attachments)



Use of Private Insurance



- New requirements related to use of private insurance. LES must:
 - Provide “Written Notice Related to Public and Private Insurance” using new form
 - Obtain written parental consent to use private insurance with new “Notice and Consent for Use of Insurance” form
 - at initial IFSP, and
 - each subsequent time that consent for services is required due to increase in service provision
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(1.7.1 Policy and Guide)

Use of Public Insurance/Medicaid



- New requirements related to use of public insurance. LES must:
 - not require parents to enroll in public insurance/Medicaid;
 - ensure no cost protections;
 - obtain consent using “Notice and Consent for Use of Insurance” form if use does not meet no cost protection provisions;
 - provide written notice, using new “Written Notice Related to Public and Private Insurance” form re:
 - consent requirements
 - no-cost protections
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(1.8.1 – 1.8.3 Policies and Guide)

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State Interagency Coordinating Council



- Amends membership requirements to be consistent with federal regulations.
 - Clarifies Coordinating Council functions
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(1.9.4 and 1.9.8 Policy)



Monitoring, Technical Assistance and Enforcement



- Expands and strengthens sanctions and enforcement mechanisms for noncompliance. (1.10.9 Policy)
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- Incorporates long-term requirements regarding the Part C State Performance Plan into policy. (1.10.20 Policy)





Component 2 – Public Awareness

Public Awareness



- Revises requirements related to public awareness materials.
- Requires LESs to:
 - Inform parents about the Prekindergarten Program for Children with Disabilities;
 - Conduct activities that accurately and effectively describe the Early Steps system. *(2.1.6 Policy)*



Child Find



- Adds new organizations for coordinated child find efforts. *(2.1.2 and 2.1.5 Policy)*



Primary Referral



- Changes requirement to refer a child to Early Steps from “two working days” to “as soon as possible but in no case later than seven days” after identification. *(2.3.1 Policy)*



Referral and Transition



- Clarifies if the child is referred less than 45 days before their third birthday, the LES must refer to the school system but is not required to conduct an evaluation/assessment, determine eligibility, or develop an initial IFSP. *(2.3.7 Policy)*





Component 3 – First Contacts/Evaluation/ Assessment

Eligibility



- **Developmental Delay**



- Adds new policy that informed clinical opinion may not be used to negate the results of an evaluation instrument that has established the eligibility of a child. *(3.1.4C Policy)*

- **Established Condition**

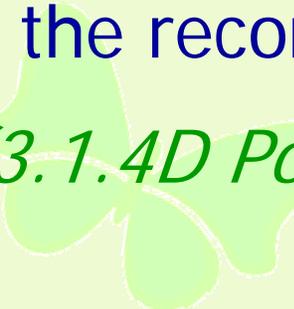
- Adds Fetal Alcohol Syndrome to the Established Condition List. *(Attachment to 3.1.3 Guide)*
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Eligibility



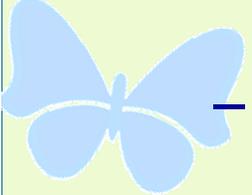
- **Adds** policy allowing an LES to use medical records to establish a child's eligibility for Early Steps without conducting an evaluation if:
 - the records indicate the child's level of functioning meets Florida's eligibility criteria based on developmental delay, and
 - the records are from within the past 90 days.
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(3.1.4D Policy)



Screening



- Adds new screening requirements. LES must:
 - Provide the parent with prior written notice of intent to screen
 - Obtain prior parental consent using new form: Informed Notice and Consent for Screening, Evaluation, Assessment and Follow-Up Review
 - Conduct screening within 45 days of date the LES received referral
 - Conduct an evaluation if parent requests at any time during the screening process.
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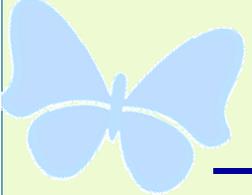
(3.3.1B Policy)

Screening



- The LES must:

- provide screening results to the parent
(3.3.1C Policy)



- conduct an evaluation if results indicate the child may be delayed (with parental consent) *(3.3.1C Policy)*

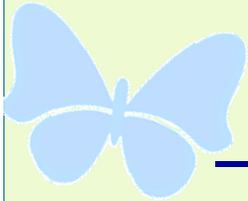
- ensure parent is notified if the screening indicates the child is not developmentally delayed *(3.3.1D Policy)*



Evaluation and Assessment



- Allows exceptions to the 45-day timeline when:
 - the child or parent is unavailable due to exceptional family circumstances;
 - the parent has not provided consent for either the evaluation or assessment despite attempts by the LES.

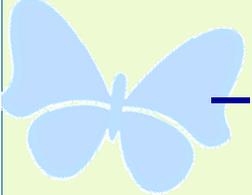


(3.4.3 Policy)



Evaluation

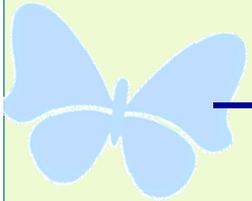


- Clarifies that each evaluation must include:
 - Use of standardized evaluation instrument
 - Documentation of the child's history
 - Child's level of functioning in each developmental area
 - Information from other sources
 - Review of medical, educational or other records. *(3.5.3 Policy)*
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Assessment



- Clarifies that each assessment must include:
 - Review of evaluation results
 - Personal observations of child
 - Identification of the child's needs in each developmental domain



(3.6.2 Policy)



Annual Review

- Replaces use of *progress reports* during the annual review with more definitive wording regarding the use of *progress monitoring data*.

(3.1.11 Guide)



Component 4 – Service Coordination

Service Coordination Responsibilities



- Clarifies that service coordination services include:
 - Conducting follow-up activities to determine that appropriate Part C services are being provided. (4.2.6 Policy).
 - Coordinating funding sources for Part C services ONLY. (4.2.5 Policy).

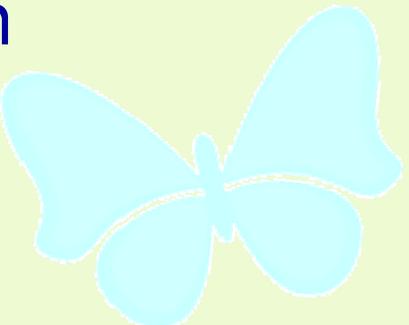




Component 5 – Individualized Family Support Plan (IFSP)

Content of the IFSP



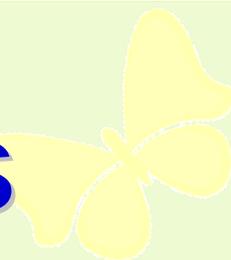
- Clarifies that:
 - the information on child's level of development is based on the child's evaluation and assessments (5.3.1 Policy).
 - the family's concerns, priorities, and resources are identified through assessment of the family (5.3.2 Policy).
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Initial IFSP

- Clarifies exceptions to the 45-day timeline for initial IFSP:
 - child/parent unable to comply due to documented exceptional circumstances; or
 - consent not obtained despite documented repeated attempts;
- If 45-day timeline is not met, the LES must
 - complete the necessary actions as soon as possible
 - develop and use interim IFSP if needed.

(5.5.2 Policy)

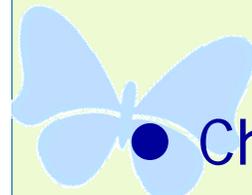
IFSP FORM & INSTRUCTIONS

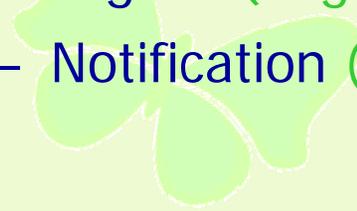


- Changes to IFSP Form

- Adds “length” to column heading on **Form G**
- Adds “and state educational agency (SEA)” to **Form I**

- Changes to IFSP Instructions to clarify documentation requirements for:



- “informed clinical opinion” and continuing eligibility (**Pages 30 & 31, Form D**);
 - children initially found eligible and later determined no longer eligible (**Page 33, Form D Note**); and
 - **Notification (Page 60, Form I)**.
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Component 6 – Early Intervention Services and Supports

General Requirements



- Strengthens requirement to provide early intervention services in other settings **only** when outcomes and services cannot be achieved in a natural environment, and
- Clarifies there must be a justification for **each** service not provided in the natural environment which must be based on the child's outcomes as determined by the IFSP team and documented on the IFSP.



(6.1.5, 6.1.6 Policy)



General Requirements



- Clarifies requirements that early intervention services and supports must
 - meet the needs of the family to assist appropriately in the child's development;
 - be provided under public (lead agency) supervision;
 - be selected in collaboration with the parents; and
 - be provided at no cost to the family.



(6.1.7, 6.1.9 Policy)



General Requirements



- Clarifies that:

- The IFSP team must ensure services are necessary to meet the unique needs of the child and family to achieve the results or outcomes identified on the IFSP;
 - The IFSP identifies medical or other services the child or family needs or is receiving through other sources but are neither required nor funded under Early Steps.
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(6.1.13, 6.1.19 Policy)

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Team-Based Primary Service Provider (PSP) Approach



- Adds language to policy, guidance and definitions to clarify the Team-Based PSP Approach.



(6.2.1, 6.2.2 Policy and Guide)

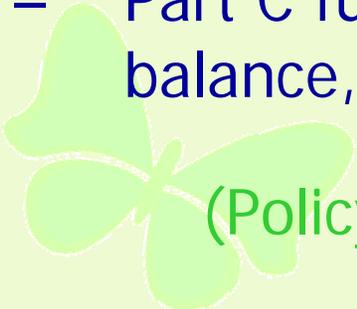


Assistive Technology (AT)



- Adds new form for AT assessment.
 - Adds to the requirement that AT vendors be reimbursed at no more than 80% of the usual and customary charge. If provider is unwilling to accept 80%:
 - parents are not required to pay the difference;
 - Part C funds may be used to cover the remaining balance, if necessary.
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(Policy 6.4.1 & 6.4.6 and Attachment)



Health Services

- Clarifies what health services do and do not include. (6.5.2, 6.5.3 Policy & 6.5.1 Guide)
- Clarifies when a medical service is considered an early intervention service (6.6.1 Policy)



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Component 7 – Transitions

Transition Planning



- Adds language to ensure:
 - Transition plan completed for all children not fewer than 90 days and, at the discretion of all parties, not more than 9 months before the child's third birthday. *(7.1.2 Policy)*
 - LES informs parents, not fewer than 90 days prior to child's third birthday, of the availability of services in the school district Prekindergarten Program for Children with Disabilities. *(7.1.3 Policy)*
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Transition Planning



- Clarifies that any meeting to develop the transition plan (Form I of the IFSP) must meet the requirements regarding:



- accessibility and convenience of IFSP meetings
- participants in IFSP meetings

- Clarifies that this meeting may be combined with the transition conference. *(7.1.3 B Policy)*

Notification



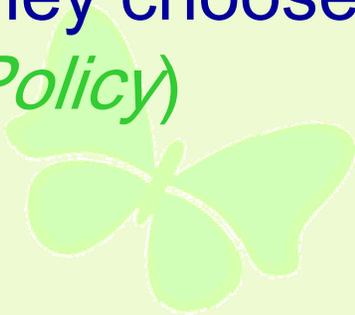
- Adds language to clarify that unless the parent chooses to opt-out, notification must be provided to the school district *and Department of Education* not fewer than 90 days before the child's third birthday. (*7.2.1 Policy*)



Notification



- Clarifies that if a child is determined eligible for Early Steps more than 45 days but less than 90 days before the child's third birthday and may be eligible for preschool services, the LES must provide notification. (*7.2.4 Policy*)
- Clarifies that parents must indicate *in writing* if they choose to opt-out of notification. (*7.2.6 Policy*)



Notification



- Adds new Notification Opt-Out form for use when parent objects to sharing of notification information. (*7.2.6 Policy*)



- Revises *Understanding Notification* brochure to include appropriate Part C federal regulations. (*Component 7 Attachments*)



Transition Conference



- There is no longer a specific timeframe required for convening the transition conference for children who may not be eligible for the school district Prekindergarten Program for Children with Disabilities. (*7.4.1 Policy*)

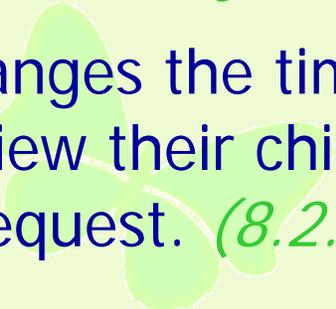




Component 8 – Procedural Safeguards

Opportunity to Examine Records



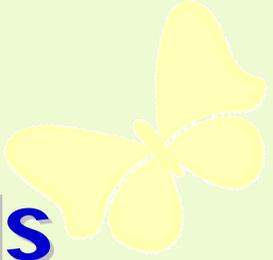
- Combines Confidentiality Section with Opportunity to Examine Records. *(Section 8.2.0)*
 - Adds records related to “screening” and “provision of early intervention services” to information that parents have the right to inspect and review. *(8.2.3 Policy)*
 - Adds requirement that LESs inform parents of the locations of records kept on their child, upon request. *(8.2.4 Policy)*
 - Changes the timeline for a parent’s right to inspect and review their child’s record to not more than 10 days after a request. *(8.2.5 Policy)*
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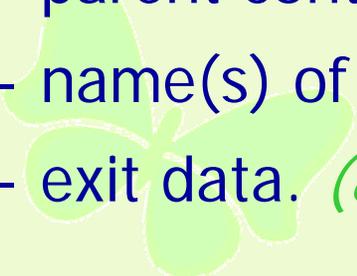
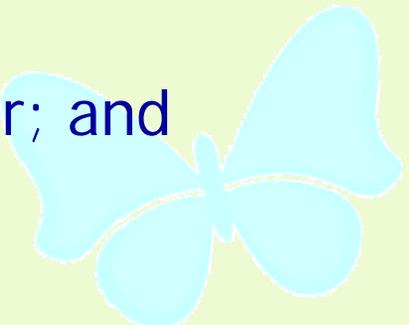
Opportunity to Examine Records



- Adds requirement that an initial copy of the record must be provided at no cost. *(8.2.6 A. Policy)*
- Clarifies that a parent may never be charged a fee for a copy of an evaluation/assessment, and IFSP. *(8.2.6 B. Policy)*

Opportunity Examine Records



- Clarifies the LES must be provided documentation if a parent does not have authority to inspect and review the record (custody, foster care, etc.). *(8.2.10 Policy)*
 - Allows specific information to be maintained in the record without time limitation, including:
 - child's name;
 - date of birth;
 - parent contact information;
 - name(s) of service coordinator and provider; and
 - exit data. *(8.2.16 B. Policy)*
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Native Language



- Requires that prior written notice, evaluation/assessment, and IFSP be in native language.

(8.3.1 Policy)



- Requires LES to document that native language requirements have been met when family mode of communication is not a written language.

(8.3.2 Policy)



Parental Consent



- Adds requirements regarding when parental consent must be obtained. In addition to long-standing requirements, consent is now required before:
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- screening (for eligibility purposes);
- public/private insurance is used.

(8.5.1 Policy)

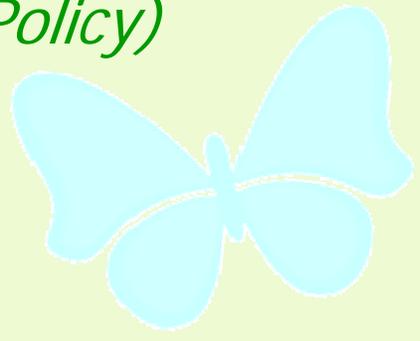


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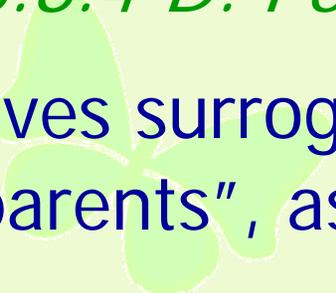
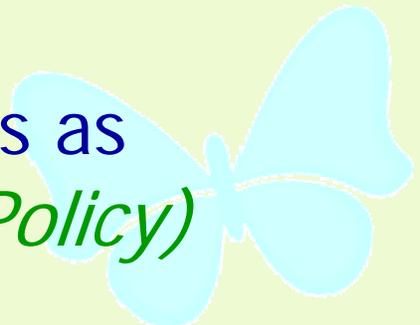
Parental Consent



- Requires new “Authorization to Disclose Confidential Information” form to document consent for release of personally identifiable information. *(8.5.5 Policy & Attachments)*
 - Allows record to be released without consent to an organization conducting a study for ESSO or LES. *(8.5.6 F. Policy)*
 - Prohibits use of due process hearing procedures to challenge parents’ refusal to consent. *(8.5.9 Policy)*
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Surrogate Parent



- Adds provision that a surrogate parent may be appointed by the judge overseeing a child's case if child is a ward of the state. *(8.8.3 B. Policy)*
 - Clarifies that a surrogate parent may not be an individual providing early intervention services, education, care, or other services to the child. *(8.8.4 D. Policy)*
 - Gives surrogate parents the same rights as "parents", as defined by IDEA. *(8.8.7 Policy)*
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Due Process Hearing

- The Early Steps State Office is proposing to adopt the Part B due process hearing procedures.

(Section 8.10.0)

- Adds provider right to request a due process hearing. *(8.10.1 Policy)*

- Adds a requirement that the party submitting a hearing request provide the other party with a copy. *(8.10.5 Policy)*

Due Process Hearing



- Expands the required contents of a hearing request. *(8.10.7 Policy)*
 - Revises process for determination of hearing request sufficiency. *(8.10.8 Policy)*
 - Adds steps and timelines for amendment of a hearing request. *(8.10.9 Policy)*
 - Adds requirement that the subject of a hearing request send the parent and ESSO a response within 10 days. *(8.10.10 Policy)*
 - Gives parents the right to one verbatim transcript of the hearing and findings of fact either electronic or written (based on family preference). *(8.10.11 Policy)*
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Due Process Hearing



- Allows only issues addressed in a hearing request to be raised at a due process hearing. *(8.10.13 Policy)*
 - Revises timeline for a due process hearing from 30 days to 45 days. *(8.10.15 Policy)*
 - Requires that child receive the services in the setting authorized on the IFSP during the hearing process. *(8.10.16 Policy)*
 - Clarifies criteria to be considered by hearing officer when determining whether a violation has occurred. *(8.10.23 Policy)*
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Due Process Hearing



- Adds steps, timelines and participants for a resolution meeting after a due process request is received to:

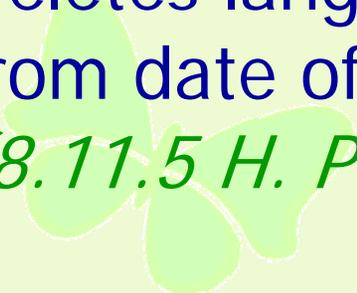
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- discuss the due process hearing request, and
 - attempt to resolve the issues to the satisfaction of the parties.

(8.10.24 – 8.10.29 Policy)



Complaints



- Requires the party filing a complaint to forward a copy to the agency/provider serving the child at the time the complaint is submitted. *(8.11.3 Policy)*
- Requires more detail to be included in a written complaint. *(8.11.5 C.-G. Policy)*
- Deletes language allowing three year timeline from date of allegation for filing a complaint. *(8.11.5 H. Policy)*

Complaints



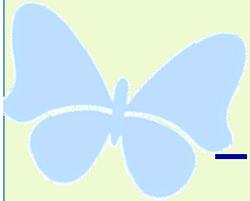
- Provides the subject of a complaint an opportunity to respond to the complaint and propose a resolution. *(8.11.10 Policy)*
 - Allows an extension of complaint timeline if the parties agree to mediation. *(8.11.12)*
 - Deletes notice of right to appeal from content of final complaint report. *(8.11.14 Policy)*
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Attachments



- Revises:

- Comparison of Mediation/Complaints/Due Process Hearings chart to include new hearing timeline.
- Due Process Hearing brochure to reflect changes in process and timelines.
- Summary of Family Rights to include changes related to Records, Prior Written Notice, Parental Consent, Complaint, and Due Process Procedures.





Component 9 – Family Involvement

Family Involvement

No proposed changes





Component 10 – Personnel Development and Standards

Training Requirements

- Incorporates components of personnel development system that were previously *permitted* in federal regulations but now *required*. (10.1.1 and 10.1.2 Policy)

Qualified Personnel



- Updates types of qualified early intervention personnel.
- Clarifies that special educators include teachers of children with hearing impairments and teachers of children with visual impairments.

(10.1.5 Policy)



Service Coordinators



- Adds language related to service coordinators enrolling in Medicaid Targeted Case Management (TCM) to comply with:
 - payor of last resort requirements
 - revised description of service coordination services
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(10.4.7 Policy)



Personnel Standards

- Adds physical therapy and occupational therapy assistants as types of providers that may not serve as a Primary Service Provider.

(10.5.6 Policy)



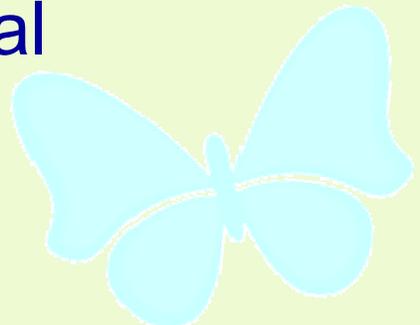
Component 11 – Interagency Agreements

State Level Agreements

- Adds requirement that ESSO have methods in place that clearly define the financial and service provision responsibility of each state level agency that provides or pays for Part C services. *(11.2.6 A Policy)*

State Level Agreements



- Requires ESSO to:
 - Reassign financial responsibility to the appropriate agency when assignment of responsibility was inappropriately made, and
 - Make arrangements to reimburse the agency originally assigned financial responsibility. *(11.2.6 B Policy)*
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State Level Agreements



- Requires that each state level method or agreement include specific IDEA Part B and C transition requirements. *(11.2.6 A.5 Policy)*
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Component 12 – Data Collection/Reporting & Record Keeping

Early Steps Record

- Requires closed Early Steps records to be maintained for a minimum of six years from the date of closure (previously five years)

(12.5.5 Policy)

Data Reporting Requirements



- Incorporates long-term data collection and reporting requirements into policy.



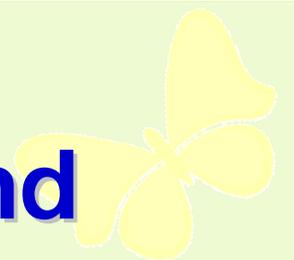
12.7.1, 12.7.2 & 12.7.4 Policy



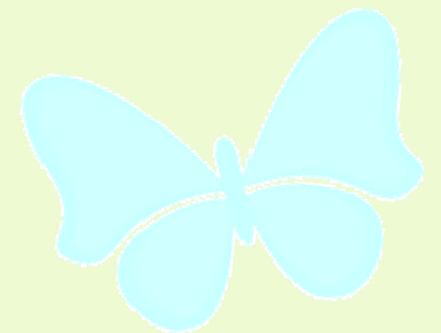


Component 13 – Developmental Evaluation and Intervention (DEI)

Developmental Evaluation and Intervention



No proposed changes





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Component - Definitions

Definitions Added



- Authorized Representative
- CAPTA
- Free Appropriate Public Education (FAPE)
- Length
- Multidisciplinary
- Other Services
- Primary Service Provider (PSP) Approach
- Progress Monitoring
- Scientifically-based Research
- Sign Language
- State Educational Agency (SEA)



Definitions Updated



- Updates 19 definitions to be consistent with changes in federal regulations and state policy



- Those with substantive changes include:

- Assistive technology device

- Intensity

- Native language

- Notification

- Opt Out



Next Steps



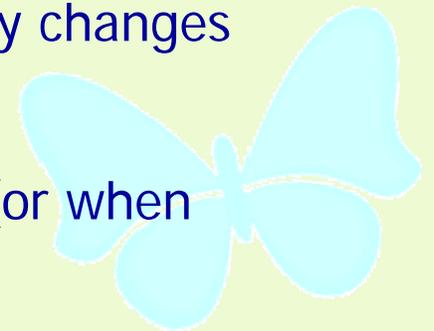
- Early Steps must receive comments no later than March 1, 2012:
 - CMS_EarlyStepsPublicComment@doh.state.fl.us
 - Postal delivery
 - Commercial/Express delivery
 - Hand delivery
- Early Steps will *NOT* accept comments by:
 - Phone
 - Fax
 - E-mail directly to state office staff



Next Steps



- Early Steps State Office will:
 - Review and consider all comments
 - Revise policies and Part C application as deemed necessary
 - Post all comments received on www.cms-kids.com
 - Submit proposed policies and Part C application to Office of Special Education Programs (OSEP) for approval
 - Post final/updated policies on www.cms-kids.com
 - Orient LES staff and providers to approved policy changes
 - Implement policies
 - Receive FFY 2012 Part C funds by July 1, 2012 (or when approved by OSEP)





More Information at
Early Steps website

www.cms-kids.com/families/early_steps/early_steps.html



Thank You!

