

Child Find in Arizona

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In July 2006 the AAP released a policy statement, *Identifying Infants and Young Children with Developmental disorder in the Medical Home: An algorithm for Developmental Surveillance and Screening*. The statement highlights the critical importance of early identification of, and intervention for young children with possible developmental problems. Recommendations include:

- Elicit and address parents' concerns at every visit.
- Screen at 9, 18, and 24 or 30 months and beyond with accurate tools.
- Administer an autism specific screen at 18 and 24 months.),
- Refer promptly – there is no value to a wait and see approach

Whether one is using the conventional developmental surveillance or more formal measures of development such as the PEDS tool, or m-CHAT, the question arises of where to refer when developmental issues are noted. The emphasis on screening has led to increased referrals and increased frustration for providers in referring patients for intervention. It is the purpose of this article to delineate the various systems in Arizona, and eligibility and access to those programs.

In Arizona we have a system of systems that includes Az Department of Education(ADE), Department of Economic Security(DES) - Division of Developmental Disabilities(DDD), Arizona Schools for the Deaf and Blind(ASDB), DES - Arizona Early Intervention program(AzEIP), AHCCCS, Arizona Long term Care System(ALTCS) , and Arizona Department of Health Services which includes such programs as Children's Rehabilitative Services(CRS), Office of Children with Special Health Care Needs(OCSHCN) and Regional Behavioral Health Authorities (RBHA) among others. These agencies also coordinate with services from private Health Plans, Early Head Start, Head Start and other community and state early childhood programs

This complexity can make it difficult for both parents and providers but fortunately, entry into the system has been simplified into a program called Child Find. It is a component of the Individuals with Disabilities Education Act (IDEA) that *requires* states to identify, and evaluate all children with disabilities birth through age 21, who are in need of early intervention or special education services.

Unfortunately, all of the above agencies have been impacted by recent and ongoing budget cuts and have had to make changes to align with available resources. As pediatric providers we can help with this by eliminating unnecessary referrals (recent data show that only 30-35% of referrals from physicians are eligible for services) and maximizing resources. What this means for providers is that for children with AHCCCS, they should be referred initially to their Health Plan for evaluation and for medical services/therapies if needed. IF determined to be significantly delayed, the PCP will then be asked to make the referral to AzEIP. IF a child has private insurance, the provider should consider using that first for evaluation and then a referral

made to AzEIP once the extent of the delay is known. If a child has no insurance, referral to AzEIP for screening and evaluation should be done.

Children Birth to ageThree

For children 0 to 3, AzEIP is the agency responsible for identification, evaluation and intervention. The provider may refer a patient directly or have the parents make the contact. This can be done online at www.azdes.gov/azeip or by calling 1-888-439-5609 or 602-532-9960. AzEIP will then contact the family to set up a screening appointment. If screening indicates, a full evaluation is completed to determine eligibility and, if eligible, develop an Individualized Family Service Plan (IFSP), which identifies family priorities, child and family outcomes, and the services needed to support attainment of the outcomes. The time interval from referral to completion of the evaluation should be 45 days. The evaluator may also determine that the child will qualify for DDD case management and/or ASDB and make the appropriate referral. Separate criteria exist for eligibility for AzEIP and DDD (Table 1) Both AzEIP and DDD offer a menu of 17 services depending on the child's needs.(Table 2). Children who qualify for DDD services will be required to apply to ALTCS. Those that qualify for ALTCS (Table 3) will be eligible for additional services.

It is important to understand that there has been a change in the understanding of what Early Intervention means. First, federal law does not require that all services be provided free of charge, though this was true prior to 1997. What is provided at no cost is an evaluation, the IFSP, service coordination and transition to school services at age 3. If specific therapies are needed the service coordinator will use all available resources to help secure them. For children on AHCCCS plans, their provider will be asked to prescribe the medically necessary therapies outlined in the IFSP. For ALTCS eligible children followed by DDD, therapy will be provided through that agency. Some AzEIP- only children *may* have therapies covered but AzEIP funding is increasingly limited by state budget issues. Private insurance companies may also be requested or required to provide therapy services as with the recent legislation regarding children with autism. Second, Early Intervention and provision of services are not the same thing. The goal of EI is to support families in promoting their child's optimal development and to facilitate the child's participation in family and community activities. As pediatrician and developmental specialist Dr. Larry Desch noted in a recent webinar on the subject, "early intervention is not a federally funded therapy clinic but an empowering or developmental coaching model for families."

Children Three to Six

Children over age 3 with developmental delays should be referred to their school district. The public schools are responsible for "finding" and evaluating eligible children and placing them in appropriate classes for services and therapies. Advise parents to call the special education department of the local school district and ask about "Child find" services. IF they do not know the district, they may use the "find a school" link on the ADE website, www.azed.gov. Another option is to contact the Parent Information Network Specialists at 1-877-230-7467 and ask for Child Find . PIN Specialists serve every county in the State of Arizona. They are parent consultants with the ADE, Exceptional Student Services. Unlike AzEIP where providers may

make the referral, Child Find will require the parents to make the contact. Schools have 45 days to screen the child and then an additional 60 days to complete a full evaluation if indicated.

If a provider feels that a child 3-6 years is delayed sufficiently and may qualify for DDD services (Table 1) that referral may be made also. This can be done online by provider (with parent's permission) or parent at https://www.azdes.gov/ddd/EligibilityReferral/frm_EligibilityRequirements.aspx or by phone at 866-229-5553.

Services discussed thus far are those provided by the State under parts B and C of IDEA. Providers may also seek to have evaluations and therapy such as speech, PT or OT done privately through either self pay or as a covered benefit of a family's health insurance. This past year the Arizona State legislature passed a bill requiring health insurance plans to pay for therapy for children with autism. Discussions are currently underway to define the scope of that therapy and it is hoped that this will be in place by spring 2009. There are also resources such as specialized preschools which provide needed therapies in an inclusion setting. It is beyond the scope of this article to list all these resources but creating such a data base may be a future project for the Chapter.

There are two more important points to be made. First, there are those children who will not qualify for services and yet seem to be mildly delayed or at risk due to other factors. We know that intervening early with these children can make an important difference. In addition to providing the families with education and resources that support development, providers can refer eligible children to Head Start/ Early Head Start. Head Start in Arizona annually serves nearly 23,000 children at over 500 locations throughout the state. These programs are administered by various agencies. Information is available at http://www.azheadstart.org/member_agencies.html. Click on the appropriate agency for your county. Children are eligible based primarily on family income (up to 100% Federal Poverty Level which for 2007-2008 is \$21,200 for a family of four) and availability.

In addition, children may be eligible for free preschool through the Arizona Early Childhood Block Grant Program. Many public schools and charter schools participate in this program providing classes to children who qualify for free or reduced lunches according to the [USDA Income Guidelines](#) (family of four with income less than \$27,560 qualify for free lunch; with income less than \$39,220 qualify for reduced lunch). Parents should inquire through their local school district.

Secondly, the chapter is aware that there have been difficulties in accessing these services throughout the state. This is due in part to a shortage of therapists, especially speech and language pathologists, and perhaps related to the complexity of the system. The chapter has been working with various state agencies, the new First Things First Board and Regional Councils, and advocacy groups to impact this situation. We can use your help both in advocacy and in feedback regarding the system.

TABLE 1

AzEIP Eligibility

A child 0-36months will be considered developmentally delayed when she/he has not reached 50% of the developmental milestones for age in one or more of the following areas

- Physical development –gross, fine, visual, auditory
- Cognitive
- Communication/language
- Social/emotional
- Adaptive

OR

Has a high probability for developmental delay due to an established condition including

- Prematurity
- Hydrocephalus
- Chromosomal abnormalities
- Cerebral palsy
- Spina bifida
- FTT
- Etc

DDD eligibility

A child 0-6 may be eligible for DDD if

- They have a diagnosis of cognitive disability, cerebral palsy, autism or epilepsy

OR

- Have an established condition that puts them at risk for one of the four conditions (metabolic, chromosomal abnormality, FAS, etc)

OR

- Have a significant delay that indicates the potential for one of the four conditions.
 1. The child has not reached 50% of the developmental milestones in any one of the following domains: Physical, cognitive, social/emotional, adaptive, language/communication

OR

 2. The child has not reached 75% of the developmental milestones in 2 or more areas

TABLE 2

DDD and AzEIP Services may include:

- Audiology
- Assistive Technology
- Counseling/Psychological
- Family training, counseling and home visits
- Medical Evaluation (for diagnostic purposes only)
- Nursing
- Nutrition
- Occupational Therapy
- Physical Therapy
- Service Coordination
- Social Work
- Special Instruction
- Speech/Language
- Transportation
- Vision

Table 3

ALTCS Eligibility

ALTCS is a federally funded Medicaid program of both acute medical services and home and community based services to people who are likely to need long term care. Based on a weighted formula of functional and medical assessment, it is generally difficult to qualify for services, especially in the 0-3 year range, unless the child has complex medical needs.