

Frequently Asked Questions: School District Funding for Early Intervention Services, Birth through Two

Introduction

Beginning in September of 2009, all school districts will be required to participate in early intervention services for children birth through age two, in accordance with RCW 28A.155.065. The Department of Social and Health Services (DSHS), Infant Toddler Early Intervention Program (ITEIP) is the state lead agency in Washington for the Individuals with Disabilities Education Act (IDEA) Part C services. This Frequently Asked Questions (FAQ) document is designed to provide information to school districts related to the fiscal portion of providing birth through two services and counting children for apportionment purposes.

Districts may choose to provide early intervention services within the school district or contract with other entities for early intervention services. Districts may also develop interlocal agreements with other districts for the provision of early intervention services. District contracting decisions are negotiated at the local level, between the district and the Part C local lead agency, or individual early intervention providers. Through the contracting process, districts can choose to contract some or all of their Part C early intervention services. The same is true with interlocal agreements.

Contracts should include, but are not limited to: definition of financial responsibility, reimbursement policies and procedures (including Medicaid), policies and procedures for resolving interagency disputes, procedures and responsibilities for interagency coordination, and definition of nonpublic agency involvement. **Early intervention services under Part C are not required to be Free Appropriate Public Education (FAPE).** OSPI urges districts to work closely with their business office and legal counsel when designing contracts and interlocal agreements.

The following questions and answers are provided to address questions from the field.

1. How do districts receive reimbursement for early intervention services? As in special education funding for three to 21 year olds, a district can only count children who:

- are enrolled in the district,
- have a current evaluation,
- have a current IFSP, **and**
- are receiving services.

If any of these conditions are not met, districts cannot count the child on the P-223H form. As in special education funding for three to 21 year olds, the P-223H form is the method school districts use to receive funding for children who receive early intervention services.

2. Are there federal funds available to school districts for early intervention services? Districts may access state special education funds for birth through two programs. The Part C state lead agency (ITEIP) receives federal funds for early intervention. Part C funds are “payor of last resort” funds and

can only be spent after all other available funds have been expended. The Family Resource Coordinator determines when Part C funds are accessed, according to “payor of last resort” protocol. In a small percent of cases school districts could receive federal funds for an early intervention service, pursuant to an interagency or interlocal agreement.

3. Are districts responsible for funding Family Resource Coordinator (FRC) services? Traditionally FRC services have been a Part C expense. Districts may negotiate and fund FRC services as part of their contract. However, districts are not obligated to fund or contribute to FRC services. If a district chooses to pay for FRC services, this funding should be limited to children who are receiving early intervention services (have met the four criteria described in question one). Under Part C criteria, FRC service is an entitlement. This means children can receive FRC service before an eligibility determination has been made and after a child is no longer eligible for early intervention services. However, for counting purposes, all four criteria described in question one must be met in order for districts to receive funding for early intervention services.

4. How is the indirect rate determined for contracted Birth through Two programs? Indirect rates for early intervention service providers are locally negotiated as part of the contract.

5. How is a child counted if the *only* early intervention service received is a consult? Districts can count a child who *only* receives a consult service on the P-223H form *for the month in which the consult occurs*. This child cannot be counted in the months when the consult does not occur.

6. Can a child be counted on the P-223H form when a family’s private insurance is used to pay for an IFSP service? Under Part C regulations, private insurance may be used to fund early intervention services. If a family’s private insurance is used to pay for an entire service (i.e. occupational therapy), the child would not be reported on the P-223H form. However, if private insurance covers only a portion of the service(s), the child could be counted on the P-223H form for the early intervention services which the district is responsible for funding.

7. Are school districts expected to fund all early intervention services? No, districts are one of the partners responsible for providing early intervention services. **Early intervention services under Part C are not required to be Free Appropriate Public Education (FAPE).** Other partners who may also contribute to funding for early intervention services are: Department of Health, Department of Social and Health Services, private insurance, Medicaid, local service organizations, etc. Part C is the “payor of last resort” for early intervention services, meaning Part C funds can only be spent after all other available funds have been expended. The Family Resource Coordinator (FRC) is responsible for coordinating funding sources for early intervention services.

8. How can I learn more about the Part C system? To learn more about the Infant Toddler Early Intervention Program (ITEIP) go to its website <http://www1.dshs.wa.gov/iteip>. The entire “Application for Federal Assistance” containing the lead agency’s policies and procedures are available on this website. Districts may also contact ITEIP by phone at (360) 725-3500.