

# California Early Start Program Eligibility

## Current Policy

An infant or toddler shall be eligible for early intervention services if he or she is between birth up to thirty-six months of age and meets one of the criteria specified below.

(a) **Developmental Delay**

A developmental delay exists if there is a significant difference pursuant to California Code of Regulations (CCR), Title 17, §52082 between the infant's or toddler's current level of functioning and the expected level of development for his or her age in one or more of the following developmental areas:

- (1) Cognitive;
- (2) Physical: including fine and gross motor, vision, and hearing;
- (3) Communication;
- (4) Social or emotional;
- (5) Adaptive.

(b) **Established Risk**

- (1) An established risk condition exists when an infant or toddler has a condition of known etiology which has a high probability of resulting in developmental delay; or
- (2) An established risk condition exists when an infant or toddler has a solely low incidence disability.

(c) **High Risk for Developmental Disability**

(1) High risk for a developmental disability exists when a multidisciplinary team determines that an infant or toddler has a combination of two or more of the following factors that requires early intervention services based on evaluation and assessment pursuant to CCR, Title 17, §52082 and §52084:

- (A) Prematurity of less than 32 weeks gestation and/or low birth weight of less than 1500 grams.
- (B) Assisted ventilation for 48 hours or longer during the first 28 days of life.
- (C) Small for gestational age: below the third percentile on the National Center for Health Statistics growth charts.
- (D) Asphyxia neonatorum associated with a five minute Apgar score of 0 to 5.
- (E) Severe and persistent metabolic abnormality, including but not limited to hypoglycemia, acidemia, and hyperbilirubinemia in excess of the usual exchange transfusion level.
- (F) Neonatal seizures or nonfebrile seizures during the first three years of life.
- (G) Central nervous system lesion or abnormality.
- (H) Central nervous system infection.

(I) Biomedical insult including, but not limited to, injury, accident or illness which may seriously or permanently affect developmental outcome.

(J) Multiple congenital anomalies or genetic disorders which may affect developmental outcome.

(K) Prenatal exposure to known teratogens.

(L) Prenatal substance exposure, positive infant neonatal toxicology screen or symptomatic neonatal toxicity or withdrawal.

(M) Clinically significant failure to thrive, including, but not limited to, weight persistently below the third percentile for age on standard growth charts or less than 85% of the ideal weight for age and/or acute weight loss or failure to gain weight with the loss of two or more major percentiles on the growth curve.

(N) Persistent hypotonia or hypertonia, beyond that otherwise associated with a known diagnostic condition.

(2) High risk for a developmental disability also exists when a multidisciplinary team determines that the parent of the infant or toddler is a person with a developmental disability and the infant or toddler requires early intervention services based on evaluation and assessment as specified in CCR, Title 17 §52082 and §52084.

(d) A developmental delay shall not be determined based on:

- (1) Temporary physical disability;
- (2) Cultural or economic factors;
- (3) The normal process of second language acquisition; or
- (4) Manifestation of dialect and sociolinguistic variance.

## **New Policy**

An infant or toddler shall be eligible for early intervention services if he or she meets one of the criteria specified below.

### **(a) Developmental Delay**

The developmental delay criteria below pertains to initial eligibility determination only and is not to be applied to continuing eligibility of infants and toddlers. If the infant or toddler is determined eligible under either (1) or (2) below, eligibility will continue until 36 months of age or final transition from the Early Start Program.

#### **(1) Between birth and 24 months of age**

The infant or toddler has a developmental delay defined as 33 percent or greater between the infant or toddler's current level of functioning and the expected level of development for his or her age in one or more of the following five developmental areas:

- (A) Cognitive;
- (B) Physical: including fine and gross motor, vision, and hearing;
- (C) Communication;
- (D) Social/emotional;
- (E) Adaptive/self help.

#### **(2) Age 24 months or older. If pursuant to the defined intake evaluation and assessment procedures in Title 17, Section 52082,**

- (A) The infant or toddler has a developmental delay defined as 50 percent or greater between the infant's or toddler's current level of functioning and the expected level of development for his or her age in one of the five developmental areas above; or
- (B) The infant or toddler has a developmental delay defined as 33 percent or greater between the infant or toddler's current level of functioning and the expected level of development for his or her age in two or more of the five developmental areas above.

### **(b) Established Risk (Birth to 36 months of age)**

#### **(1) The infant or toddler has:**

- (A) An established risk condition of known etiology which has a high probability of resulting in developmental delay; or
- (B) An established risk condition which is a solely low incidence disability.

### **(c) High Risk for Developmental Disability (Birth to 24 months)**

The high risk for developmental disability criteria below pertains to initial eligibility determination only and is not to be applied to continuing eligibility of infants and toddlers. If pursuant to the defined intake evaluation and assessment procedures in Title 17, Section 52082, the infant or toddler is determined eligible under either (1) or (2) below, eligibility will continue until 36 months of age or final transition from the Early Start Program.

(1) High risk for a developmental disability exists when a multidisciplinary team determines that an infant or toddler has a combination of two or more of the following factors that requires early intervention services:

- (A) Prematurity of less than 32 weeks gestation and/or low birth weight of less than 1500 grams.
- (B) Assisted ventilation for 48 hours or longer during the first 28 days of life.
- (C) Small for gestational age: below the third percentile on the National Center for Health Statistics growth charts.
- (D) Asphyxia neonatorum associated with a five minute Apgar score of 0 to 5.
- (E) Severe and persistent metabolic abnormality, including but not limited to hypoglycemia, acidemia, and hyperbilirubinemia in excess of the usual exchange transfusion level.
- (F) Neonatal seizures or nonfebrile seizures during the first three years of life.
- (G) Central nervous system lesion or abnormality.
- (H) Central nervous system infection.
- (I) Biomedical insult including, but not limited to, injury, accident or illness which may seriously or permanently affect developmental outcome.
- (J) Multiple congenital anomalies or genetic disorders which may affect developmental outcome.
- (K) Prenatal exposure to known teratogens.
- (L) Prenatal substance exposure, positive infant neonatal toxicology screen or symptomatic neonatal toxicity or withdrawal.
- (M) Clinically significant failure to thrive, including, but not limited to, weight persistently below the third percentile for age on standard growth charts or less than 85% of the ideal weight for age and/or acute weight loss or failure to gain weight with the loss of two or more major percentiles on the growth curve.
- (N) Persistent hypotonia or hypertonia, beyond that otherwise associated with a known diagnostic condition.

(2) High risk for a developmental disability also exists when a multidisciplinary team determines that the parent of the infant or toddler is a person with a developmental disability and the infant or toddler requires early intervention services.

(d) A developmental delay shall not be determined based on:

- (1) Temporary physical disability;
- (2) Cultural or economic factors;
- (3) The normal process of second language acquisition; or
- (4) Manifestation of dialect and sociolinguistic variance.