



Eligibility for Early ACCESS / Early Intervention Services

Eligibility for Early ACCESS

Infants and toddlers under the age of three years old are determined eligible to receive Early ACCESS early intervention services when they meet **any one of the three** following criteria:

1. A child has a diagnosed and documented ***physical or mental condition*** which has a high probability of resulting in developmental delays.
 - Includes conditions such as chromosomal abnormalities; genetic or congenital disorders; sensory impairments; inborn errors of metabolism; disorders reflecting disturbance of the development of the nervous system; congenital infections; severe attachment disorders; and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome.

OR

2. A child has a 25% or more delay as measured by appropriate diagnostic instruments and procedures, in one or more of the following developmental areas:
 - Cognitive development,
 - Physical development, including vision and hearing,
 - Communication development,
 - Social or emotional development, and
 - Adaptive development.

OR

3. Informed clinical opinion may be used as an independent basis to establish a child's eligibility even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments used to establish eligibility.

Determination of Early ACCESS Eligibility

A multidisciplinary evaluation/assessment team, which includes the family and is led by the service coordinator, works collaboratively to complete comprehensive, multidisciplinary evaluations and child and family assessments in order to establish eligibility and address the concerns of the family about the child's development.

Documented Delay or Diagnosis

A child with a diagnosed and documented physical or mental condition which has a high probability of resulting in developmental delays is eligible for Early ACCESS. The team must utilize the [Early ACCESS Diagnosed Conditions Eligibility List](#) to determine conditions which are automatically eligible for Early ACCESS.

At the time of referral or within the established 45-day timeline, infants and toddlers with a known **physical or mental** condition are eligible to receive Early ACCESS services. Children may or may not be experiencing a delay in development at the time of referral and evaluation.

Examples of *physical and mental* conditions infants and toddlers may have which have a high probability of later delay include and are NOT limited to conditions such as:

- chromosomal abnormalities;
- genetic or congenital disorders;
- sensory impairments;
- inborn errors of metabolism;
- disorders reflecting disturbance of the development of the nervous system;
- congenital infections;
- severe attachment disorders;
- disorders secondary to exposure to toxic substances, including fetal alcohol syndrome;
- preterm birth less than 32 weeks gestation;
- very low birth weight less than 1500 grams (3 pounds 5 ounces).

Developmental Delay

A child has a 25% or more delay as measured by appropriate diagnostic instruments and procedures in one or more areas of the following developmental areas: cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development.

For those children who do not have a known physical or mental condition at the time of referral, Iowa uses a 25% delay in **at least one** of the developmental areas listed above to establish Early ACCESS eligibility. The delay is established by carrying out multidisciplinary evaluations and assessment activities.

Informed Clinical Opinion

A child's eligibility may be determined based on Informed Clinical Opinion. Informed clinical opinion makes use of qualitative and quantitative information to assist in forming a determination regarding difficult-to-measure aspects of a child's development and the potential need for early intervention. If results of the evaluation indicate concerns in the child's development, and are not at the 25% delayed level, it may be appropriate to provide early intervention services to the child and family.