



Growing Together With Proposed Changes in the WV Birth to Three System

WV Birth to Three is committed to working with health care, early childhood, and other community partners to assure that children with developmental delays can be identified and provided with appropriate developmental services. These partnerships have worked well over the past several years, resulting in children with delays being identified at an earlier age. Research has shown the importance of getting developmental services and supports to these children and their families as early as possible. With early services, some children will not need more expensive services later. And children who will continue to need services at a later age, will be better prepared for school and life long learning. Just as important, their families will be better prepared to meet the needs of their children.

The Commonwealth Fund estimates that at least 10% of infants and toddlers across the United States are in need of early intervention services. West Virginia could be expected to have an even higher number of infants and toddlers in need of services due to many risk factors that contribute to developmental delay. In West Virginia, on any given day in 2007, approximately 4.7% of infants and toddlers were receiving WV Birth to Three early intervention services.

West Virginia's collaborative child find efforts have resulted in a steady increase over the years in the number of children needing early intervention services.

In a twelve month period in 2002, WV Birth to Three served 2,700 children.

In a twelve month period of 2007, WV Birth to Three served 5,600 children.

WV Birth to Three receives just over \$2,000,000 per year from the U.S. Department of Education for funding. This amount does not increase even though the number of children in need of services does increase. While some funding may also be earned from Medicaid, not all families who need services are eligible for Medicaid funding. WV Birth to Three services are provided under a federal special education law, Part C of the Individuals with Disabilities Education Act (IDEA). IDEA requires that eligibility for services cannot be based on income, and states cannot have waiting lists for services.

With static federal funds, the State of West Virginia must identify where funding will come from to provide services to the increased numbers of infants and toddlers in need of services. At a time of difficult state budgets, the State must look for ways to assure that services will continue to be available for those children most in need of services, while at the same time operating within available fiscal resources.

To help with this issue, WV Birth to Three convened a stakeholder group that included representatives of parents of children with disabilities, advocacy groups, providers of early intervention services, higher education, and state agencies. This group was called the Family Cost Participation (FCP) Task Group. The FCP Task Group report is posted on the WV Birth to Three website at <http://www.wvdhhr.org/birth23>.

The FCP Task Group recommended three steps that could be taken over the next several months to help with assuring funding for educational services for infants and toddlers with developmental delays. The following table provides a brief summary of the FCP Task Group recommendations, and follow up actions that WV Birth to Three has taken to date.

Task Group Recommendations	WV Birth to Three Actions
1) Revise the State’s definition of developmental delay—which identifies how an infant or toddler can be eligible for WV Birth to Three services. The Task Group’s recommendation for revised eligibility definition is intended to assure that those children who are most likely to have significant delays without the benefit of early intervention services, will continue to be eligible for WV Birth to Three services.	On October 10, 2008, WV Birth to Three released a revised eligibility definition for a 60 day public comment period which ends on December 10, 2008. Following the public comment period, a final policy will be sent to the U.S. Department of Education for approval. The new policy will not be implemented until after all these steps are final. See the WV Birth to Three website for more information regarding public comment.
2) Ask families to share in the cost of early intervention services, by implementing family cost participation as allowed under Part C of IDEA. The FCP Task Group has recommended that families would pay a monthly participation fee while receiving WV Birth to Three IFSP services, based on a sliding fee scale and the family’s ability to pay.	No new WV Birth to Three policy has been developed yet. It is anticipated that no new policy can be developed until July, 2009 or later; after changes to the WV Birth to Three State statute.
3) Ask all private and public insurance to contribute to the cost of providing early intervention services for eligible infants and toddlers.	Conversations are under way to determine the best way to follow up on this recommendation within the next year.

If you have questions about any of these recommendations or steps, please feel free to email us at dhrwvbt@wv.gov, or call the State Office at 1-800-642-9704.

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