

To: FIT Service Coordinators

From: Andy Gomm, FIT Program Manager

Date: 06/30/10

Re: Implementation of FIT Program Changes for FY11

As you probably know, the FIT Program is having to make a number of changes to eligibility and service models in order to address the funding shortfall projected in Fiscal Year 2012 (July 2011 – June 2012).

Projected budget shortfalls for the FIT Program are due to:

- American Recovery and Reinvestment Act (ARRA) or “stimulus” funds coming to an end
- Reduced Federal Medical Assistance Percentage (FMAP)
- No additional State General Funding available from the New Mexico State Legislature

Changes to the FIT Program in order to reduce expenditures were developed in collaboration with the Interagency Coordinating Council (ICC) and approved by Department of Health Secretary, Alfredo Vigil M.D. The plan is to make these changes now in order to avoid more fundamental changes in the future. Remember, New Mexico is one of only five (5) states serving children at risk through IDEA Part C and the only one of two (2) states serving kids over age three.

As service coordinators, you will have the biggest job of implementing these changes in the coming months and in explaining these changes to families. Attached to this memo are:

- A table showing the changes to be implemented in Fiscal Year 2011
- A flow chart showing the changes to be implemented in Fiscal Year 2011
- A letter to families effected by the changes. Service coordinators should go over the letter with families including where the family can go if they have questions or concerns.

The FIT program will be hosting two conference calls with service coordinators to go over these changes. The details of the calls are as follows:

- July 07th, 2010 from 3:00 – 4:00
- July 08th 2010 from 9:00 -10:00

Tel: 1-218-844-8230 (note: there is a long distance charge for this call so Service Coordinators may want to call in on one line)

Code: 363819#

One of the calls will be recorded in case you are not available at these times.

Service Model Changes:

Change 1.	Who does this apply to and when?	Tips for Service Coordinators
<p>Limit the amount of services that a child eligible under either biological / medical risk or environmental risk and their families can receive to: 24 hours of early intervention, plus 12 units of service coordination per year.</p>	<p>Who? All children eligible under Biological / Medical Risk or Environmental Risk</p> <p>When? Services must be reduced by 10/01/10</p>	<ul style="list-style-type: none"> • Immediately begin discussing changes with all families served who are eligible under the “at risk” category • Determine if families are due for an annual IFSP before 09/30/10. • If families are not due for their annual IFSP before 09/30/10, you must schedule an IFSP meeting. • By 09/30/10 develop a new Individualized Family Service Plan (IFSP) to change the frequency and possibly the mix of services. • Services can continue at the current level until the new IFSP is in place. • If an initial or annual IFSP is held before 09/30/10 the reduced hours will be implemented once that IFSP is in place. • The new IFSP should be considered an annual IFSP (pages from a previous IFSP can be carried forwarded if conducted within the past 6 months). Enter the new IFSP into FIT-KIDS. • If the annual IFSP is being held early then no new ECO will be needed. The ECO can be done at the next annual IFSP or at exit, whichever is first. • The year is from the IFSP until the next annual IFSP. • The number of hours can vary over the year e.g. 1 X week for 2 months; 2 X a month for 4 months; and 1 X month for 6 months = 24 hours • The 24 hours include consultation • Attendance at an IFSP meeting or transition meeting is not included in the 24 hours.
Change 2.	Who does this apply to and when?	Tips for Service Coordinators
<p>End all services and transition / exit all “at risk” children at age three.</p>	<p>Who? All children eligible under Biological / Medical Risk or Environmental Risk</p> <p>When? Children at risk who are currently over age 3 or turning 3 before the</p>	<ul style="list-style-type: none"> • Have someone at you agency run the “<i>Children with an IFSP Who Turn Three in a Period of Time</i>” report in FIT KIDS to determine when children on your caseload will be turning 3* • The Transition Plan in their IFSP

	<p>beginning of the 2010 – 2011 school year would continue services until they transition at the beginning of the 2010 – 2011 school year.</p> <p>Children turning 3 after beginning of the new school year (2010 – 2011) will transition by the end of the month in which the child turns 3.</p>	<p>will be revised for children turning 3 after the beginning of the next school year (~August 15th 2010). The transition plan should reflect that the child will transition by the end of the month in which the child turns 3.</p> <ul style="list-style-type: none"> • One additional month of SC can be provided after transition if delineated on the transition plan. • Consider making referral to Early Head Start / Head Start / Parents As Teachers or to another early childhood provider. Priorities for Head Start are typically are given for homelessness; single parent families; parents concerned about their child’s development (but not eligible for Part B); teen parents; foster children. Grantees serve families under 100% of poverty, however may consider up to 10% of families over income. There may be a gap in services depending on when the child turns 3 – however it good for the family to have their referral submitted.
Change 3.	Who does this apply to and when?	Tips for Service Coordinators
<p>A statewide Ages & Stages developmental tracking program will be established.</p> <p>A central unit will mail Ages & Stages Questionnaires (ASQ) to parent(s). The ASQ will be scored after being returned (postage paid) from the parent(s) and if concerns arise then the parent will be contacted to ask if they want be referred to the FIT Program</p>	<p>Who? Any child who is referred and determined not to be eligible for the FIT program</p> <p>When? A statewide developmental tracking program will be established by Sept 01st 2010</p>	<ul style="list-style-type: none"> • Ask families of children who are determined not to be eligible for the FIT Program if they would like to sign up for the statewide “Ages & Stages for Kids (ASK)” program (see attached form). • For children determined ineligible before September 01st the service coordinator should hold on to the ASK Program Form and we’ll let you know where to fax / e-mail it to. • If the agency has Ages and Stages Questionnaires - they can give the family the next age level if it occurs before Sept. 01st

FIT Eligibility Changes:

Change 4.	Who does this apply to and when?	Tips for Service Coordinators
<p>Require the use of 1-2 approved norm referenced tools by all providers statewide to determine eligibility of 25% developmental delay in one area of development</p>	<p>Who? All children receiving a Comprehensive Multidisciplinary Evaluation (CME)</p> <p>When? Begin 01/01/11</p>	<ul style="list-style-type: none"> • Training and technical assistance will be provided on the required evaluation tool(s).
Change 5.	Who does this apply to and when?	Tips for Service Coordinators
<p>Mandate use of the Environmental Risk Assessment Tool.</p>	<p>Who? All children determined eligible under the Environmental Risk Category</p> <p>When? Begin 07/01/10</p>	<ul style="list-style-type: none"> • Gather information from the family as part of the relationship building intake process “ If you are comfortable, please tell me about...” • Gather information from the referral source (CYFD, shelter etc.) and review referral / records. • While <u>required</u> for children determined eligible under Environmental Risk category – the ERA tool continues to be recommended for use with all families when risk factors are present, even if the child is eligible under another category – as the information gathered can be used to develop family outcomes in the IFSP.
Change 6.	Who does this apply to and when?	Tips for Service Coordinators
<p>Biological Medical Risk Changes:</p> <p>The following conditions will no longer make the child eligible:</p> <ol style="list-style-type: none"> 1) Chronic otitis or serous otitis (> 4 months duration) 2) Epilepsy (except febrile seizures) 3) Medical factors such as hypothyroidism, severe chronic anemia 	<p>Who? All children determined eligible under the Biological / Medical Risk category (Note: this change does not effect children who are currently eligible for the FIT Program)</p> <p>When? Begin 07/01/10 for all children determined eligible after that date.</p>	<ul style="list-style-type: none"> • Use the revised eligibility list at www.fitprogram.org under “Making a Referral” for both the Biological Medical Conditions and Established Conditions that make a child eligible. • If you have questions about a whether a particular condition makes a child eligible please e-mail us at fit.program@state.nm.us • Reminder that for children determined not eligible for the FIT Program, the parents may sign up for the Ages & Stages for Kids (ASK) Program (see Change 3 above)

<p>4) Low Birth weight is now under 1,500 grams (previously under 2,500 gms)</p> <p>5) Prematurity is now under 32 weeks gestation (previously under 35 weeks)</p>		
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- * **“Children with an IFSP Who Turn Three in a Period of Time”** report in FIT-KIDS
 To determine children turning 3 before the beginning of the 2010 – 2011 school year:
 - Enter date parameters between July 1, **2009** (*this will ensure it captures any child currently enrolled who is already age 3*) and the date the 2010-11 school year begins.
 - Be sure to capture just those children eligible for “at risk” categories by selecting those two categories prior to generating the report.

To determine children turning 3 during the 2010 – 2011 school year who will need to transition by the end of the month in which they turn three:

- Enter the date the 2010 – 2010 school year begins and the date the school year ends.
- Be sure to capture just those children eligible for “at risk” categories by selecting those two categories prior to generating the report.