

MAINE STATE LEGISLATURE

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Source of Report: Public Law 2023, Chapter 643 (LD 2214), Part W (p. 179)

Topic: The Department of Education shall convene a work group to review and recommend expansion of the State's eligibility criteria under Part C of the federal Individuals with Disabilities Education Act

Context

In Part W of the supplemental budget (LD 2214), the Department of Education (DOE) was instructed to convene a work group “to review and recommend expansion of the State’s eligibility criteria under Part C of the federal Individuals with Disabilities Education Act.” With this explicit directive, the group’s work focused on expanding Part C eligibility criteria, based upon the experience and expertise of the group members, in several key areas pertaining to Part C. In crafting the final recommendations of this work group, great consideration was also taken for the potential fiscal and human resource impacts of undertaking any such expansion.

IDEA Part C and Eligibility Criteria

In accepting federal funds for IDEA, states are required to develop a definition of an “infant or toddler with a disability” that includes a developmental delay and a diagnosed physical or mental condition with a high probability of resulting in a developmental delay. Additionally, states must develop a definition of “developmental delay,” which specifies the threshold of functioning that would constitute a developmental delay. A state is able to also serve infants and toddlers deemed “at risk” of a developmental delay under IDEA Part C. Maine’s definition is found in Title 20-A §7001:

1-B. Child with a disability. "Child with a disability" means:

A. For children from birth to under 3 years of age:

(1) A child who needs early intervention services because the child has a significant developmental delay, as measured by both diagnostically appropriate instruments and procedures, in one or more of the following areas: cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development; or

(2) A child with a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay, with the condition being such that the child needs early intervention services; or [PL 2005, c. 662, Pt. A, §15.]

States have considerable flexibility in how it chooses to find infants and toddlers eligible for IDEA Part C services. States are identified as having eligibility criteria in one of three categories of restrictiveness, as established in 2010 by the Infant and Toddler Coordinators Association (ITCA) Data Committee:

- Category A (17 states): least restrictive eligibility criteria
 - Eligibility criteria in this category include: At Risk, Any Delay, Atypical Development, one standard deviation in one domain, 20% delay in two or more domains, 22% delay in two or more domains, 25% delay in one or more domains.
- Category B (19 states):
 - Eligibility criteria in this category include: 25% delay in two or more domains, 30% delay in one or more domains, 1.3 standard deviations in two domains, 1.5 standard deviations in any domain, 33% delay in one domain.
- Category C (16 states, including Maine): most restrictive eligibility criteria
 - Eligibility criteria in this category include: 33% delay in two or more domains, 40% delay in one domain, 50% delay in one domain, 1.5 standard deviations in 2 or more domains, 1.75 standard deviations in one domain, 2 standard deviations in one domain, 2 standard deviations in two or more domains.

Maine's Part C Eligibility Criteria for Developmental Delay is described in rule, Chapter 101: Maine Unified Special Education Regulation (MUSER), page 72. For an infant or toddler to be eligible for Part C services in Maine, they must be 2 or more standard deviations below the mean in at least one developmental area, or 1.5 or more standard deviations below the mean in at least two developmental areas. The developmental areas include cognitive development, physical development, communication development, social or emotional development, and adaptive development. Maine does not serve children deemed at risk for a developmental delay. This places Maine in ITCA's "Category C," or their most restrictive eligibility category.



IDEA Part C

Percentage of all children under the age of three receiving services by Eligibility
(Single day count 10/1-12/1/2022)

— = 4.01% national average

Category A Eligibility (17)

New Mexico	11.20
Vermont	6.79
Pennsylvania	6.11
Kansas	5.41
District of Columbia	5.12
Delaware	4.90
Maryland	4.63
Washington	4.49
Virginia	4.12
Michigan	3.92
Colorado	3.88
Wisconsin	3.46
Hawaii	3.28
Texas	2.85
Iowa	2.76
Alabama	2.53
Arkansas	1.18

Category B Eligibility (19)

Massachusetts	10.40
West Virginia	8.51
Wyoming	6.28
Rhode Island	6.14
New Hampshire	6.04
Indiana	5.93
North Dakota	5.71
New York	5.05
California	4.44
Illinois	4.31
Tennessee	3.93
Puerto Rico	3.79
Utah	3.69
Ohio	3.46
South Dakota	3.37
Nebraska	3.24
Minnesota	3.14
North Carolina	2.92
Mississippi	1.61

— = Birth Mandate

— = At risk

Category C Eligibility (16)

New Jersey	5.61
Connecticut	4.94
South Carolina	4.91
Missouri	3.94
Louisiana	3.49
Idaho	3.48
Maine	3.48
Oregon	3.38
Nevada	3.20
Alaska	3.12
Kentucky	3.12
Florida	2.69
Arizona	2.35
Georgia	2.33
Montana	2.00
Oklahoma	1.78

53% of Category A states meet/exceed the national average
53% of Category B states meet/exceed the national average

19% of Category C states meet/exceed the national average

Category A: At Risk, Any Delay, Atypical Development, one standard deviation in one domain, 20% delay in two or more domains, 22% in two or more domains, 25% delay in one or more domains.

Category B: 25% in two or more domains, 30% delay in one or more domains, 1.3 standard deviations in two domains, 1.5 standard deviations in any domain, 33% delay in one domain.

Category C: 33% delay in two or more domains, 40% delay in one domain, 50% delay in one domain, 1.5 standard deviations in 2 or more domains, 1.75 standard deviations in one domain, 2 standard deviations in one domain, 2 standard deviations in two or more domains.

Notes:

- The percentages reflect the total count including at-risk.
- States self declare the category that most closely aligns with their eligibility criteria.
- Eligibility categories were established by the ITCA Data Committee as of 2010.

Sources: U.S. Department of Education, EDFacts Metadata and Process System (EMAPS); "IDEA Part C Child Count and Settings Survey," 2022. Data extracted as of August 30, 2023. U.S. Bureau of the Census, "2022 State Population Estimates by Age, Sex, Race, and Hispanic Origin". Data accessed August 30, 2023 from <http://www.census.gov/popest>

Prepared by ITCA November 2023

As one of the more historically restrictive states regarding Part C Eligibility, Maine has traditionally served a below-average percentage of all children under the age of three receiving services, for example serving 3.48% in 2022 compared to the national average of 4.01%, seen above. Recent data trends tell a promising story of improvement. In 2023, 3.77% of Maine's population birth to three had an Individual Family Service Plan (IFSP), demonstrating an increased percentage of children served in this age group.

Improvement can also be seen when considering Maine's youngest children. The percentage of the population of Maine's infants from birth to their first birthday has increased each year since 2020. In 2020, Maine fell well below the national average at that time of 1.14%, with just 0.54% of Maine infants enrolled in early intervention. In contrast, 1.24% of Maine's infants had an IFSP on October 1st, 2023, which falls just below the most recently available national average of 1.26%. Even without structural changes, Maine has made significant improvement in meeting the needs of its youngest children, closing the gap with the national average.

	% of all Children with IFSP Birth-3 rd Birthday (All Part C)		% of all Children with IFSP Birth – 1 st Birthday (Infants Only)	
Year	Maine	National Avg.	Maine	National Avg.
2023	3.77%	*	1.24%	*
2022	3.48%	4.01%	0.98%	1.26%
2021	2.84%	3.66%	0.87%	1.25%
2020	2.35%	3.20%	0.54%	1.14%
2019	2.72%	3.70%	0.64%	1.37%
2018	2.46%	3.48%	0.60%	1.25%

Source: ITCA Child Count Charts

*data is not available

In addition to requiring states to establish a threshold for eligibility based on developmental delay, IDEA also requires states to provide services to children who have an “established condition of risk.” An established condition of risk is a diagnosed physical or mental condition which has a high probability of resulting in a developmental delay, which automatically qualifies a child for Part C services. Some of the most common conditions in Maine include, but are not limited to:

- Diagnosed developmental disabilities such as autism spectrum disorder
- Genetic, hereditary, chromosomal (such as Down syndrome), or congenital conditions
- Premature birth and/or low birthweight
- Injuries that occur during the birth process
- Substance exposure during pregnancy (including alcohol)
- Substantial hearing or vision differences.

Early Intervention for ME

Maine’s Part C services are coordinated by Child Development Services, and is widely known as “Early Intervention for ME.” Early Intervention for ME provides family-focused intervention services for children with a developmental disability or who is diagnosed with one of the established conditions of risk, and is a true two-generation approach that provides children with necessary therapies and interventions, and provides parents with the tools and resources to support their child. In this model, Early Intervention for ME’s specialists work with caregivers to show them how to weave early developmental strategies, unique to a child’s needs, into everyday activities supporting healthy early learning.

This approach is empowering and collaborative for families and is unlike most other approaches in public education. It necessitates one-to-one interactions in the child’s natural setting, either a childcare facility, public facility such as a library or, most often, the child’s home. It also necessitates the coordination between various service providers, depending on the child’s unique needs and goals. Unlike in a classroom setting where an educator can be working with small and large groups of children at a time towards educational goals, in this setting there is one educator working with one family at one time. Furthermore, in a model that requires home visits, Early Intervention for ME staff also must navigate the myriad needs that many of Maine’s

families face, including mental health disorders, substance use disorders, and the impacts of poverty.

The systematic challenge that Early Intervention for ME faces is the fact that implementing these strategies is both labor- and time-intensive. Each primary service provider at Early Intervention for ME works with individual children and their families in the child's natural setting, which necessitates sometimes extensive travel in Maine's rural areas. Additionally, effectively serving each child goes beyond that face-to-face time with children and families, and also includes the planning, documentation, coordination with other contracted clinical providers, and travel to the child's natural setting. This creates capacity and workforce pressures when considering increasing eligibility criteria.

For more information on Early Intervention for ME and its impact on families, visit Early Intervention for ME's website: <https://www.earlyinterventionforme.org/stories/>.

Actions

Planning and preparation for this work group began in summer 2024. A full list of participants is included in the appendix of this report.

Work Group meetings occurred on October 15, October 29, November 12, November 19, and December 3, 2024. These meetings were led by Ariana Whiting, Part C Coordinator for CDS, and facilitated by Jennifer Belanger, Legislative and Constituent Services Specialist in the Office of the Commissioner for the DOE. In these five meetings, participants examined and discussed Maine's eligibility criteria for Part C, established conditions of risk, as well as internal practices for determining eligibility. The group was joined by experts in the field of trauma-based attachment disorders and audiology.

At the conclusion of the five work group meetings in fall 2024, recommendations were discussed by the group within the context of Maine's early childhood landscape and workforce realities. The group reconvened on January 14, 2025 to review and refine its recommendations.

Recommendations

Given current fiscal and human resource realities in Maine, no changes to Part C eligibility criteria are recommended at this time. Great progress has been made in Maine catching up to the national averages for children served under Part C, and Part C leaders are encouraged to continue utilizing strategies to maintain or increase referrals. Part C practitioners are encouraged to utilize Informed Clinical Opinion when appropriate to serve children who need services but for whom rigid standardized testing fails to appropriately measure.

Given the increased numbers of children identified, which has brought Maine's rate of identification of Part C children, and the current fiscal and human resource realities in Maine, no changes to Part C eligibility criteria are recommended at this time. As budgetary and human

resources realities change, Maine’s Part C system can begin to further consider expansion of eligibility criteria, as discussed and favored among Work Group participants.

References

Early Childhood Technical Assistance Center. *State and Jurisdictional Eligibility Definitions for Infants and Toddlers with Disabilities Under IDEA Part C*.

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IDEA Infant and Toddler Coordinators Association. (2023). *Child Count Data Charts*.

<https://ideainfanttoddler.org/association-reports.php>

Maine Department of Education. Rule Chapter 101: Maine Unified Special Education Regulation Birth to Age Twenty

United States Department of Education. *Part C Administrator Implementation Technical Assistance Guide: Eligibility criteria*. <https://sites.ed.gov/idea/files/Early-Learning-Eligibility-Criteria-English-508.pdf>

Contact:

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Appendix

Work Group Participants:

<u>Members</u>	<u>Organization</u>	<u>Role</u>
Amy Spencer	MECDHH	Early Intervention and Family Services Coordinator
Marnie Morneault	CCIDS	Parent Advocate / Educator
Dara Fruchter	Early Intervention for ME	Strategic Initiatives & Special Projects Manager
Lauren Lantagne	Early Intervention for ME	Early Intervention Program Manager

Cheryl Hillicoss	Early Intervention for ME	Early Intervention Program Manager
Shawna Gurney	Early Intervention for ME	Early Intervention Program Manager
Brooke Smith	Early Intervention for ME	Early Intervention Program Manager
Samantha Jackson	Early Intervention for ME	Early Intervention Program Manager
Jennifer Cloutier	Early Intervention for ME	Early Intervention Program Manager
Kellie Irving	Portland Public Schools	SAU Preschool Representative
Paige Galloway	Maine Families - Greater Portland	Former CDS Employee; MaineFamilies Program Manager, LEND Trainee
Ivory Mills	Maine Children's Trust	Maine Families Training & Technical Assistance Coordinator
Jess Berry	SAU Partner	Special Education Director
Joanne Butters	Early Intervention for ME	Team Leader
Amber Morrison	Early Intervention for ME	Team Leader
Sarah Groom	DHHS OCFS	Child Welfare Project Manager
Jessica Wood	DHHS OCFS	Help Me Grow Program Manager
Adrienne Bogardus	Early Intervention for ME	Primary Service Provider