The Individuals with Disabilities Education Improvement Act (IDEA), Part C, is a federal law that provides financial assistance to states for the purpose of providing Early Intervention services to infants and toddlers (age birth through two) with disabilities. The purpose of these services is to enhance the development of infants and toddlers with disabilities and to minimize the potential for developmental delay. The services are provided through a coordinated network of providers, driven by the needs of the family and documented through an Individualized Family Service Plan (IFSP). Not all services available through Early Intervention are free to families.

What Early Intervention services are available at no cost?

The following routine services are available at no cost to families in the Early Intervention program:

- **Child Find**: A coordinated set of activities designed to locate children who may need Early Intervention services
- **Developmental screening**: A simple evaluation designed to determine whether a full evaluation needs to be completed
- **Developmental evaluation**: A comprehensive evaluation of whether a child needs services
- **Ongoing assessment**: An assessment that determines continued need for services
- **Family assessment**: An assessment that determines services the family may need
- Development, review and evaluation of the IFSP
- **Service coordination**: Assistance through the Early Intervention program.
- **Transition services**: Services that help move from one service to another or from Early Intervention to preschool
- **Family support**: Support services, such as access to parent support groups and workshops
What Early Intervention services may be subject to a system of payment?
The following specialized services may be subject to a system of payment, fees or use of private insurance:

- Family training, counseling and home visits
- Nursing
- Nutrition
- Special instruction
- Speech-language pathology, audiology
- Occupational therapy
- Physical therapy
- Medical services only for diagnostic or evaluation purposes
- Health services necessary to enable your child to benefit from other Early Intervention services
- Vision services, including orientation and mobility training
- Assistive technology devices and services, such as augmentative communication devices and special equipment
- Transportation
- Other services your child needs, such as respite care and environmental adaptations

Who pays for the specialized Early Intervention services my child needs?
You may be asked to pay for specialized services provided to your child through the IFSP. If payment is requested from your family, your income must be considered and charges should be calculated on a sliding fee scale in accordance with the ability of your family to pay. Other sources of funding can be used to pay for services, such as family health insurance, Medicaid or other health benefits.

Do I have to pay for my child’s evaluation for services?
No. The screening and evaluation to determine whether your child is eligible for Early Intervention services and the recommendations for services must be provided to you free of charge. You may be asked to use your private insurance to pay for your child’s evaluation. You may choose whether or not to use your insurance for Early Intervention services that should be at no cost. In making this choice, you should consider if there would be a cost to you, such as an insurance co-pay or an impact on your lifetime maximum insurance coverage.

What if I cannot afford to pay for specialized services my child needs?
If funds are available, specialized services can be paid for through the Early Intervention program, if your team is in full agreement regarding the services, the services best support your family and its needs, there are no alternative sources of payment available, and the services will be performed in your child’s natural environment. Natural environment is the place where your child would be cared for if
he or she did not have a disability or delay (e.g., home, daycare center, playgroups or other everyday routine settings).

Before Early Intervention funds are considered, other available sources of funding should be used. Other sources of funding include: Private insurance or CHIP (e.g. EPSDT), Medicaid, Title V/Maternal Child Health (e.g., CFHS, Specialty clinics), Title V/Children with Special Health Care Needs (e.g., BCMH), Temporary Assistance to Needy Families (TANF), Title IV-E (family support/family stability funding through Children’s Services), Other fund sources - State and Local (e.g., United Way, local tax levies), and State Funds (GRF).

Can Early Intervention funds pay for my child’s routine health care?

No. Early Intervention funds cannot pay for medical health services that are routinely recommended for all children (e.g. immunizations and “well baby” care), medical services that are surgical in nature (e.g., hospitalizations or the prescription of medications), and devices necessary to control or treat a medical conditions.

What can I do to resolve complaints about funding for Early Intervention Services?

There are several ways to resolve Early Intervention complaints, including filing a complaint with your county Family and Children First Council (FCFC), and/or the Ohio Department of Health (ODH); and/or requesting mediation and/or an administrative hearing with ODH. For more information on Early Intervention services and resolving complaints see ODH/Bureau of Early Intervention Services Ohio Procedural Safeguards (helpmegrow.ohio.gov), or call 1-800-755-GROW.