Part C of the Individuals with Disabilities Education Act (IDEA) Early Intervention is a system of services that helps babies and toddlers with developmental delays or disabilities by helping eligible children learn the basic and brand-new skills that typically develop during the first three years of life such as:

- Physical (reaching, rolling, crawling and walking)
- Cognitive (thinking, learning, solving problems)
- Communication (talking, listening, understanding)
- Social/emotional (playing, feeling secure and happy)
- Self-help (eating, dressing)

Part C Early Intervention is available in every Montana county and has no waitlist. If a child has a disability or developmental delay in one or more of these areas, the child will likely be eligible for early intervention services. Those services will be tailored to meet the child’s individual needs and may include:

- Assistive technology (devices a child might need)
- Audiology or hearing services
- Speech and language services
- Counseling and training for a family
- Medical services
- Nursing services
- Nutrition services
- Occupational therapy
- Physical therapy
- Psychological services

Eligibility for Part C is determined by evaluating the child (with parent’s consent) to see if the little one does, in fact, have a delay in development or a disability. All information is provided in the family’s native language. Eligible children can receive early intervention services from birth through the third birthday. Sometimes it is known from the moment a child is born that early intervention services will be essential in helping the child grown and develop. Often this is so for children who are diagnosed at birth with a specific condition or who experience significant prematurity, very low birth weight, illness, or surgery soon after being born. Even before heading home from the hospital, this child’s parents may be given a referral to their local early intervention office. Montana names this Type I eligibility – established condition.

Some children have a relatively routine entry into the world, but may develop more slowly than others, experience set-backs, or develop in ways that seem very different from other children. For these children, a visit with a developmental pediatrician and a thorough evaluation may lead to an early intervention referral. Montana names this Type II eligibility – measured delay. This means the child is delayed in some areas of development: cognitive, physical (including hearing and vision), communication, social or emotional, or adaptive. Montana defines measured delay as a singular delay of 50% in one developmental areas or two or more developmental areas with at least a 25% delay.

Evaluation and assessment are free of charge, won’t hurt the child, and looks at his or her basic skills. There are several ways to connect with the Early Intervention program in your community:

- A doctor or health care professional will provide a referral to the local early intervention system in the family’s area or
- A family may contact the Early Intervention program in the community directly.
If the child is eligible and the family is interested in obtaining early intervention services, the team, including the family members, sits down to write an individualized plan of action for the child and family. This plan is called the Individualized Family Service Plan or IFSP. The IFSP is a written document that outlines the early intervention services that the child and family will receive.

The child’s IFSP must include:

- The child’s present physical, cognitive, communication, social/emotional, and adaptive development levels and needs;
- Family information (with the family’s agreement) including the resources, priorities, and concerns of the parents and other family members closely involved with the child;
- The major results or outcomes expected to be achieved for the child and family;
- The specific early intervention services the child will receive;
- Where in the home or community the services will be provided;
- When and where the child will receive services;
- The number of days or sessions the child will receive each service and how long each session will last;
- Who will pay for the services;
- The name of the service coordinator overseeing the implementation of the IFSP;
- The steps to be taken to support the child’s transition out of early intervention and into another program when the time comes.

When the Early Intervention system receives a referral about a child with a suspected disability or developmental delay, a time clock starts running. Within 45 days, the Early Intervention system must complete critical steps:

- Screening, if the family chooses;
- Initial evaluation of the child;
- Initial assessments of the child and family; and
- Writing the IFSP if the child is found eligible.

A written copy of Montana’s System of Payments is provided to all families explaining that the following services are provided free of charge:

- Child find services;
- Evaluations and assessments;
- The development and review of the IFSP; and
- Service coordination.

The System of Payments also describes how Montana’s Early Intervention system will access public insurance (such as Medicaid, Healthy Montana Kids or CHiP) or private insurance (with the family’s consent) first to pay for early intervention services. If a family has a co-pay or deductible, the Early Intervention system pays for those costs. Every effort is made to provide services to all babies and toddlers who need help, regardless of family income. Services cannot be denied to a child just because his or her family is not able to pay for them.

Approximately six months before the child turns 3 years old, the family and IFSP team develop a transition plan for the child when he or she exits Part C of the IDEA. Families must be fully informed about the process and afforded their rights, responsibilities, and options as they move their child from Part C early intervention services to Part B preschool special education services or other early learning programs.
Montana Milestones Part C of the IDEA Early Intervention Program
and
Family Education and Support Program