

ABCD II EARLY IDENTIFICATION SYSTEM STANDARDS

BOARD APPROVED RECOMMENDATIONS FOR IMPLEMENTATION IN THE DEMONSTRATION SITES

January 5, 2005

FOR USE IN PROJECT DEMONSTRATION SITES

- 1) Iowa should move toward the establishment of a three-level system for the identification of children birth to three years who are at risk for developmental, social-emotional, and/or behavioral problems. Such a tiered system would screen and identify children in three areas: a) general development, b) social-emotional and behavioral problems including autism, and d) parenting stress and family risk factors.
- 2) At the first level in the proposed system, minimum standards should require that all children birth to three years receive periodic reviews of a their development as an integrated part of a well-child examination to include a review of developmental milestones, behavior, family risk factors, and parent concerns.
- 3) Minimum standards must require that any child who does not meet age-appropriate developmental milestones, has significant family risk factors, or for whom the practitioner or the parent has concerns, is referred for level two screening or more comprehensive level three assessment using standardized tools.
- 4) Any child who does not pass a second level screening or in the opinion of the practitioner requires a comprehensive assessment for the diagnosis and treatment of a suspected developmental, social-emotional or behavioral problem should be referred for level three assessment.
- 5) The validity and reliability of the Iowa Health Maintenance Clinical Notes with regard to developmental and social-emotional screening should be evaluated in comparison to the ASQ and ASQ-SE as part of the ABCD II demonstration project sites.
- 6) Practitioners must use the level two screening tools recommended in the attached standards document when performing level two screening.
- 7) Medicaid should reimburse approved providers for conducting level two screening when using the recommended screening tools as currently provided from by Iowa Medicaid policy.
- 8) Practitioners should be required to apply the recommended identification standards to all children in their practice, not just those on Medicaid.

ADDITIONAL RECOMMENDATIONS TO BE CONSIDERED IN LOOKING AT THE EVENTUAL DEVELOPMENT OF A STATEWIDE SYSTEM (CURRENTLY PARKED)

- 1) A panel of clinical experts should be empanelled to review the standards document annually and advise Medicaid about recommended changes.
- 2) Practitioners who prefer using alternative screening tools or methods, should be allowed to petition Medicaid for an exception to policy. A panel of clinical experts should review these requests for exception to policy and advise Medicaid on whether or not to accept the request.
- 3) Level two screenings can be performed by certain social service and mental health providers as well as health care providers. Consideration should be given to expanding the Medicaid provider base to reimburse qualified social service and mental health professionals for providing level two services.
- 4) Iowa needs to find a mechanism to reimburse qualified providers for screening, assessment and treatment of parents when parental risk factors place the covered child at high risk for developmental, social-emotional, and/or behavioral problems.