Children Enrolled in Early Intervention

DEFINITION

Children enrolled in Early Intervention is the number and percentage of children under age three who have an active Individual Family Service Plan through a Rhode Island Early Intervention provider.

SIGNIFICANCE

During the first few years of life, children develop the basic brain architecture that serves as a foundation for all future development and learning. Early and effective intervention for vulnerable young children yields improved long-term outcomes.¹

In 1986, Congress established Early Intervention (EI) services for infants and toddlers under the *Individuals with Disabilities Education Act (IDEA)*. Part C of *IDEA* requires states to identify and provide appropriate EI services to children under age three who are developmentally delayed or have a diagnosed condition that is associated with a developmental delay. States may also choose to serve children who are at risk of experiencing a delay if early intervention services are not provided.²

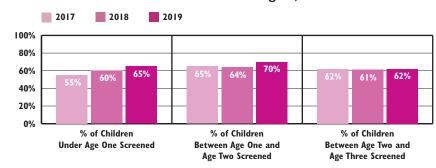
In Rhode Island, children are eligible for EI if they have a diagnosed medical disorder bearing relatively well-known expectancy for developmental delay (single established condition) or if they have a developmental delay in one or more areas of development (cognitive, physical, communication, socialemotional, and adaptive). Current eligibility criteria allow children with significant circumstances (e.g., significant trauma/losses, history of abuse/neglect, family lacking basic resources, parental substance abuse, significant parental health/mental health issues, and intellectual disability of caretaker, among others) to qualify through informed clinical opinion if the circumstances impact child or family functioning.³

Approximately 17% of U.S. children ages three to 17 have developmental disabilities, with higher prevalence among children from low-income families and among boys. The percentage of children recognized with developmental disabilities has been increasing in recent years due to increased survival rates among preterm infants and children with birth defects/genetic disorders and improved awareness and diagnosis of many conditions.⁴

The American Academy of Pediatrics recommends that physicians use a standardized developmental screening tool during well-child visits in order to improve detection of developmental delays.⁵ Early childhood developmental screenings are required and covered for all children with Rite Care coverage through the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) mandate.⁶

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Developmental Screenings Completed, RIte Care Members Under Age 3, 2017-2019



Source: Rhode Island Executive Office of Health and Human Services. Performance Years 2017-2019.

- ♦ As of June 30, 2019, there were 2,358 infants and toddlers receiving Early Intervention (EI) services, 7% of the population under age three. Of these, 56% percent were eligible due to a measured significant developmental delay, 24% due to significant circumstances impacting child or family functioning, and 20% due to a single established condition category (such as Down Syndrome). Of the 2,358 children receiving EI services on June 30, 2019, 41% began receiving services before age one, 39% began at age one, and 21% began at age two.⁷
- ♦ In Calendar Year 2019 in Rhode Island, 4,601 children received EI services, up from, 4,389 in 2018. In 2019, 1,091 children were discharged from EI upon reaching age three. Of these, 63% were found eligible and 17% were found not eligible for preschool special education. Thirteen percent were in the process of eligibility determination, and 7% left the program for other reasons.^{8,9}
- ♦ In Rhode Island, Early Intervention services are financed through private and public health insurance, with some supplemental funding through an *IDEA* Part C state grant. As of June 30, 2019 in Rhode Island, 1,425 children (60%) received services through public insurance (RIte Care and Medicaid), 865 children (37%) received services through a private health insurance provider, and 68 children (3%) were uninsured with services covered by Part C funding.^{10,11}

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Table 33. Infants and Toddlers Enrolled in Early Intervention (EI) by Eligibility Type, Rhode Island, 2019

CALENDAR YEAR

CITY/TOWN	# OF CHILDREN UNDER AGE 3	2019 ENROLLMENT		JUNE 30, 2019 ENROLLMENT BY ELIGIBILITY				
		# OF CHILDREN ENROLLED IN EI	% OF CHILDREN UNDER AGE 3 ENROLLED IN EI	SINGLE ESTAB- LISHED CONDITION	MEASURED DEVELOP- MENTAL DELAY	CIRCUMSTANCES SIGNIFICANTLY IMPACTING CHILD/FAMILY FUNCTION*	# OF CHILDREN UNDER AGE 3 ENROLLED IN EI	% OF CHILDREN UNDER AGE 3 ENROLLED IN EI
Barrington	366	60	16%	9	12	8	29	8%
Bristol	507	53	10%	5	15	4	24	5%
Burrillville	460	67	15%	7	21	15	43	9%
Central Falls	1,028	162	16%	10	68	7	85	8%
Charlestown	186	25	13%	2	4	5	11	6%
Coventry	940	121	13%	14	22	22	58	6%
Cranston	2,318	303	13%	20	82	48	150	6%
Cumberland	970	172	18%	17	55	16	88	9%
East Greenwich	299	42	14%	4	8	8	20	7%
East Providence	1,560	165	11%	18	43	21	82	5%
Exeter	166	20	12%	5	3	4	12	7%
Foster	113	8	7%	2	4	1	7	6%
Glocester	247	21	9%	4	7	2	13	5%
Hopkinton	258	25	10%	2	4	6	12	5%
Jamestown	85	6	7%	0	0	1	1	1%
Johnston	816	116	14%	14	31	18	63	8%
Lincoln	587	91	16%	5	26	8	39	7%
Little Compton	68	4	6%	0	2	0	2	3%
Middletown	502	56	11%	8	12	9	29	6%
Narragansett	271	16	6%	1	4	3	8	3%
New Shoreham	21	2	10%	0	1	0	1	5%
Newport	820	80	10%	9	20	8	37	5%
North Kingstown	728	108	15%	12	23	20	55	8%
North Providence	851	134	16%	11	47	13	71	8%
North Smithfield	290	47	16%	5	14	8	27	9%
Pawtucket	2,959	384	13%	34	135	34	203	7%
Portsmouth	429	63	15%	3	19	11	33	8%
Providence	7,609	1,111	15%	158	320	107	585	8%
Richmond	235	15	6%	1	2	2	5	2%
Scituate	193	48	25%	8	8	4	20	10%
Smithfield	402	70	17%	7	22	16	45	11%
South Kingstown	640	71	11%	8	13	17	38	6%
Tiverton	398	46	12%	6	7	9	22	6%
Warren	296	35	12%	4	10	5	19	6%
Warwick	2,322	299	13%	20	76	46	142	6%
West Greenwich	178	15	8%	2	0	4	6	3%
West Warwick	1,044	110	11%	9	34	13	56	5%
Westerly	726	91	13%	11	13	17	41	6%
Woonsocket	1,900	339	18%	24	122	30	176	9%
Four Core Cities	13,496	1,996	15%	226	645	178	1,049	8%
Remainder of State	20,292	2,605	13%	253	664	392	1,309	6%
Rhode Island	33,788	4,601	14%	479	1,309	570	2,358	7%

Source of Data for Table/Methodology

- Rhode Island Executive Office of Health and Human Services, Center for Child and Family Health, Early Intervention enrollment, Calendar Year 2019 and June 30, 2019 enrollment (point-in-time).
- The denominator is the number of children under age three, according to Census 2010, Summary File 1.
- Core cities are Central Falls, Pawtucket, Providence, and Woonsocket.

References

- ¹ Lurie-Hurvitz, E. (2009). Early experiences matter: Making the case for a comprehensive infant and toddler policy agenda. Retrieved February 27, 2020, from www.zerotothree.org
- ² Jones, Lynn. (2009). Making hope a reality: Early Intervention for infants and toddlers with disabilities. Retrieved February 27, 2020, from www.zerotothree.org
- ³ Rhode Island Early Intervention certification standards policies and procedures: IV. Eligibility determination. (2018). Cranston, RI: Rhode Island Executive Office of Health and Human Services.
- ⁴ Zablotsky, B. & Black, L. I., (2019). Prevalence and Trends of Developmental Disabilities among Children in the United States: 2009– 2017. *Pediatrics*, 144(4)
- Ouncil on Children with Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee and Medical Home Initiatives for Children with Special Needs Project Advisory Committee. (2006). Identifying infants and young children with developmental disorders in the medical home: An algorithm for developmental surveillance and screening. Pediatrics, 118(1), 405-420.
- ⁶ Birth to 5: Watch me thrive! CMS efforts to ensure children receive developmental and behavioral screening. (n.d.). Retrieved February 27, 2020, from www.medicaid.gov
- 7.8.11 Rhode Island Executive Office of Health and Human Services, 2019.
- 9 Rhode Island Executive Office of Health and Human Services, 2018.

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