



**LIST OF EARLY INTERVENTION SERVICES**

(From: Public Health Law Section 2559-b, Part 69-4.1 of Chapter II of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York [November 30, 2016])

1. Assistive technology device
2. Assistive technology service
3. Applied Behavior Analysis (ABA)
4. Audiology
5. Family training, counseling, home visits, and parent support groups
6. Medical services (for diagnostic or evaluation only)
7. Nursing services
8. Nutrition services
9. Occupational therapy
10. Physical therapy
11. Psychological services
12. Service coordination
13. Social work services
14. Special instruction
15. Speech-language pathology
16. Vision services
17. Health services
18. Transportation
19. Respite services



## **DEFINITIONS of EARLY INTERVENTION SERVICES**

1. **Assistive technology device** means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of children with disabilities.
2. **Assistive technology service** means a service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device. Assistive technology services include:
  - a. the evaluation of the needs of a child with a disability, including a functional evaluation of the child in the child's customary environment;
  - b. purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by children with disabilities;
  - c. selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
  - d. coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
  - e. training or technical assistance for a child with disabilities or, if appropriate, that child's family; and,
  - f. training or technical assistance for professionals, (including individuals providing early intervention services) or other individuals who provide services to, or are otherwise substantially involved in, the major life functions of individuals with disabilities.
3. **Applied Behavior Analysis (ABA)** means the design, implementation, and evaluation of systematic environmental changes to produce socially significant change in human behavior through skill acquisition and the reduction of problematic behavior. ABA includes direct observation and measurement of behavior and the identification of functional relations between behavior and the environment. These include contextual factors such as establishing operations, antecedent stimuli, positive reinforcers, and other consequences that are used to produce the desired behavior change.
4. **Audiology**, including:
  - a. identification of children with auditory impairment using at risk criteria and appropriate audiologic screening techniques;
  - b. determination of the range, nature, and degree of hearing loss and communication functions,



by use of audiological evaluation procedures;

- c. referral for medical and other services necessary for the habilitation or rehabilitation of children with auditory impairment;
  - d. provision of auditory training, aural rehabilitation, speech reading and listening device orientation and training, and other services;
  - e. provision of services for prevention of hearing loss; and
  - f. determination of the child's need for individual amplification, including selecting, fitting and dispensing appropriate listening and vibrotactile devices, and evaluating the effectiveness of those devices.
5. **Family training, counseling, home visits and parent support groups**, including services provided, as appropriate, by social workers, psychologists, family therapists and other qualified personnel to assist the family of a child eligible under this part in understanding the special needs of the child and enhancing the child's development.
6. **Medical services only for diagnostic or evaluation purposes** means services provided by a licensed physician to determine a child's developmental status and need for early intervention services subject to reasonable prior approval requirements for exceptionally expensive services as prescribed by the Commissioner.
7. **Nursing services**, including:
- a. the assessment of health status for the purpose of providing nursing care, including the identification of patterns of human response to actual or potential health problems;
  - b. provision of nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development; and
  - c. administration of medications, treatments, and regimens prescribed by a licensed physician.
8. **Nutrition services**, including:
- a. conducting individual assessments in nutritional history and dietary intake; anthropometric, biochemical, and clinical variables; feeding skills and feeding problems; and, food habits and food preferences;
  - b. developing and monitoring appropriate plans to address the nutritional needs of eligible children; and



- c. making referrals to appropriate community resources to carry out nutritional goals.
9. **Occupational therapy** includes services to address the functional needs of a child related to adaptive development, adaptive behavior and play, and sensory, motor and postural development. These services are designed to improve the child's functional ability to perform tasks in home, school, and community settings, and include:
- a. identification, assessment and intervention;
  - b. adaptation of the environment, and selection, design and fabrication of assistive and orthotic devices to facilitate development and promote the acquisition of functional skills; and
  - c. prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability.
10. **Physical therapy** includes services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status and effective environmental adaption. These services include:
- a. screening, evaluation, and assessment of infants and toddlers to identify movement dysfunction;
  - b. obtaining, interpreting, and integrating information appropriate to program planning to prevent, alleviate, or compensate for movement dysfunction and related functional problems; and
  - c. providing individual and group services or treatment to prevent, alleviate, or compensate for movement dysfunction and related functional problems.
11. **Psychological services**, including:
- a. administering psychological and developmental tests and other assessment procedures;
  - b. interpreting assessment results;
  - c. obtaining, integrating, and interpreting information about child behavior and child and family conditions related to learning, mental health, and development; and
  - d. planning and managing a program of psychological services, including psychological counseling for children and parents, family counseling, consultation on child development, parent training, and education programs.



12. **Service Coordination**, including assistance and services provided by a service coordinator to enable an eligible child and the child's family to receive the rights, procedural safeguards and services that are authorized to be provided under the Early Intervention Program.
  
13. **Social work services**, including:
  - a. making home visits to evaluate a child's living conditions and patterns of parent-child interaction;
  - b. preparing a social/emotional developmental assessment of the child within the family context;
  - c. providing individual and family-group counseling with parents and other family members, and appropriate social skill building activities with the child and parents;
  - d. working with those problems in a child's and family's living situation (home, community, and any center where early intervention services are provided) that affect the child's maximum utilization of early intervention services; and
  - e. identifying, mobilizing, and coordinating community resources and services to enable the child and family to receive maximum benefit from early intervention services.
  
14. **Special instruction**, including:
  - a. the design of learning environments and activities that promote the child's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction;
  - b. curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the child's individualized family service plan;
  - c. providing families and any primary caregivers (e.g., child care providers) with information, skills and support related to enhancing the skill development of the child; and
  - d. working with the child to enhance the child's development.
  
15. **Speech-language pathology**, including:
  - a. identification of children with communicative or oropharyngeal disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in these skills;
  - b. referral for medical or other professional services necessary for the habilitation or



rehabilitation of children with communicative or oropharyngeal disorders and delays in development of communication skills; and

- c. provision of services for the habilitation, rehabilitation, or prevention of communicative or oropharyngeal disorders and delays in development of communication skills.

16. **Vision Services**, including:

- a. evaluation and assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays, and abilities;
- b. referral for medical or other professional services necessary for the habilitation or rehabilitation of visual functioning disorders, or both; and
- c. communication skills training, orientation and mobility training for all environments, visual training, independent living skills training, and additional training necessary to activate visual motor abilities.

17. **Health Services** means services necessary to enable a child to benefit from the other early intervention services during the time that the child is receiving other early intervention services. The term includes:

- a. such services as clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and
- b. consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.
- c. The term health services does not include the following;
  - 1) services that are surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus); or
  - 2) services that are purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drugs for any purpose);
  - 3) devices necessary to control or treat a medical condition;
  - 4) medical-health services (such as immunizations and regular "well-baby" care) that are routinely recommended for all children.



18. **Transportation and related costs** includes the cost of travel (e.g., mileage or travel by taxi, common carrier, or other means) and other costs (e.g., tolls and parking expenses) that are necessary to enable an eligible child and the child's family to receive early intervention services.
19. **Respite services** may be determined for an eligible child and family within the context of IFSP development, based on the individual needs of the child and family, and with consideration given to the following criteria:
- a. severity of child's disability and needs;
  - b. potential risk of out-of-home placement for the child if respite services are not provided;
  - c. lack of access to informal support systems (e.g., extended family, supportive friends, community supports, etc.);
  - d. lack of access to other sources of respite (e.g., Family Support Services under the auspices of the Office for People with Developmental Disabilities and respite provided through other State early intervention service agencies), due to barriers such as waiting lists, remote/inaccessible location of services, etc.;
  - e. presence of factors known to increase family stress (e.g., family size, presence of another child or family member with a disability, etc.); and
  - f. the perceived and expressed level of need for respite services by parent.