NEBRASKA DEPARTMENT OF EDUCATION

# **RULE 52**

REGULATIONS AND STANDARDS FOR THE PROVISION OF EARLY INTERVENTION SERVICES

TITLE 92, NEBRASKA ADMINISTRATIVE CODE, CHAPTER 52

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State of Nebraska Department of Education 301 Centennial Mall South Lincoln, Nebraska 68509 TITLE 92 - NEBRASKA DEPARTMENT OF EDUCATION CHAPTER 52 – REGULATIONS AND STANDARDS FOR THE PROVISION OF EARLY INTERVENTION SERVICES

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## 001 Declaration of Responsibility

<u>Neb. Rev. Stat.</u> §43-2507 requires planning for FAPE early intervention services shall be the responsibility of each collaborating agency. The planning shall address a statewide FAPE early intervention services program (EISP) of comprehensive, coordinated, family-centered, community based, and culturally competent FAPE early intervention services to all eligible infants or toddlers with disabilities and their families in Nebraska.

# 002 Statutory Authority

This Chapter is adopted pursuant to the statutory authority vested in the Nebraska Department of Education in <u>Neb. Rev. Stat.</u> §§43-2516, 43-2507.02, 79-1160, 79-318, and 79-319.

#### 003 Definition of Terms

- <u>003.01</u> **Approved Cooperative** means two or more school districts or an Educational Service Unit (ESU) approved by the Nebraska Department of Education pursuant to 92 NAC 51-004.07 to jointly perform special education functions, including receipt of special education payments.
- <u>003.02</u> **Child** means an individual under the age of six and may include an infant or toddler with a disability as defined in 92 NAC 52-003.15.
- <u>003.03</u> **Co-Lead Agencies** means the Department of Health and Human Services and the State Department of Education.
- **Consent** means that the parent has been fully informed of all information relevant to the activity for which consent is sought, in the parent's native language as defined in 92 NAC 52-003.17; the parent understands and agrees in writing to the carrying out of the activity for which the parent's consent is sought, and the consent form describes that activity and lists the early intervention records (if any) that will be released and to whom they will be released; and the parent understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time. If a parent revokes consent, that revocation is not retroactive (i.e., it does not apply to an action that occurred before the consent was revoked).
- <u>003.05</u> **Day** means calendar day, unless otherwise indicated.

#### 003.06 Early Intervention Services

- 003.06A Early intervention services means developmental services that --
  - <u>003.06A1</u> Are provided under public supervision;
  - <u>003.06A2</u> Are selected in collaboration with parents;
  - <u>003.06A3</u> Are provided at no cost, except subject to 34 CFR 303.520 and 303.521, where Federal or State law provides for a system of payments by families, including a schedule of sliding fees;
  - <u>003.06A4</u> Are designed to meet the developmental needs of an infant or toddler with a disability and the needs of the family to assist appropriately in the infant's or toddler's development, as identified by the IFSP Team, in any one or more of the following areas, including --
    - <u>003.06A4a</u> Physical development;
    - <u>003.06A4b</u> Cognitive development;
    - <u>003.06A4c</u> Communication development;
    - <u>003.06A4d</u> Social or emotional development; or
    - <u>003.06A4e</u> Adaptive development;
  - <u>003.06A5</u> Meet the standards of the State in which the early intervention services are provided, including the requirements of Part C of the IDEA;
  - <u>003.06A6</u> Include services identified under 003.06B;
  - <u>003.06A7</u> Are provided by qualified personnel as that term is defined in 92 NAC 52-003.22, including the types of personnel listed in 003.06B;

- 003.06A8 To the maximum extent appropriate, are provided in natural environments as defined in 92 NAC 52-003.18 and consistent with 92 NAC 52-007.06; and
- <u>003.06A9</u> Are provided in conformity with an IFSP adopted in accordance with 92 NAC 52-007.
- <u>003.06B</u> Subject to 92 NAC 52-003.06D, early intervention services include the following services defined in this paragraph:
  - <u>003.06B1</u> **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 an infant or toddler with a disability. The term does not include a medical device that is surgically implanted, including a cochlear implant, or the optimization (e.g. mapping), maintenance, or replacement of that device.
  - <u>003.06B2</u> **Assistive technology service** means any service that directly assists an infant or toddler with a disability in the selection, acquisition, or use of an assistive technology device. The term includes;
    - <u>003.06B2a</u> The evaluation of the needs of an infant or toddler with a disability, including a functional evaluation of the infant or toddler with a disability in the child's customary environment;
    - <u>003.06B2b</u> Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by infants or toddlers with disabilities;
    - <u>003.06B3c</u> Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
    - <u>003.06Bd</u> Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
    - <u>003.06Be</u> Training or technical assistance for an infant or toddler with a disability or, if appropriate, that child's family; and
    - <u>003.06Bf</u> Training or technical assistance for professionals (including individuals providing education or rehabilitation services) or other individuals who provide services to, or are otherwise substantially involved in the major life functions of, infants and toddlers with disabilities.
  - <u>003.06B3</u> *Audiology services* include:
    - <u>003.06B3a</u> Identification of children with auditory impairments, using at-risk criteria and appropriate audiological screening techniques;
    - <u>003.06B3b</u> Determination of the range, nature, and degree of hearing loss and communication functions, by use of audiological evaluation procedures;
    - <u>003.06B3c</u> Referral for medical and other services necessary for the habilitation or rehabilitation of an infant or toddler with a disability who has an auditory impairment;

- <u>003.06B3d</u> Provision of auditory training, aural rehabilitation, speech reading and listening devices, orientation and training, and other services;
- 003.06B3e Provision of services for prevention of hearing loss; and
- <u>003.06B3f</u> Determination of the child's individual amplification, including selecting, fitting, and dispensing appropriate listing and vibrotactile devices, and evaluating the effectiveness of those devices.
- <u>003.06B4</u> *Family training; counseling; and home visits* means services provided, as appropriate, by social workers, psychologists, and other qualified personnel to assist the family of an infant or toddler with a disability in understanding the special needs of the child and enhancing the special needs of the child and enhancing the child's development.
- <u>003.06B5</u> **Health services** means services necessary to enable an otherwise eligible child to benefit from the other early intervention services during the time that the child is eligible to receive early intervention services.
  - <u>003.06B5a</u> The term includes such services as clean intermittent catherization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and consultation by physicians with other service providers concerning the special health care needs of infants and toddlers with disabilities that will need to be addressed in the course of providing other early intervention services.
  - 003.06B5b The term does not include:
    - <u>003.06B5b1</u> Services that are surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus); purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drugs for any purpose); or related to the implementation, optimization (e.g., mapping), maintenance, or replacement of a medical device that is surgically implanted, including a cochlear implant.
      - <u>003.06B5b1(a)</u> Nothing in this Chapter limits the right of an infant or toddler with a disability with a surgically implanted device (e.g., cochlear implant) to receive the early intervention services that are identified in the child's IFSP as being needed to meet the child's developmental outcomes.
      - <u>003.06B5b1(b)</u> Nothing in this Chapter prevents the early intervention service provider from routinely checking that either the hearing aid or the external components of a surgically implanted device (e.g., cochlear implant) of an infant or toddler with a disability are functioning properly;
    - <u>003.06B5b2</u> Devices (such as heart monitors, respirators and oxygen, and gastrointestinal feeding tubes and pumps) necessary to control or treat a medical condition; and

- <u>003.06B5b3</u> Medical-health services (such as immunizations and regular "well-baby" care) that are routinely recommended for all children.
- <u>003.06B6</u> **Medical services** means services provided by a licensed physician for diagnostic or evaluation purposes to determine a child's developmental status and need for early intervention services.
- <u>003.06B7</u> **Nursing services** include 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; the provision of nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development; and the administration of medications, treatments, and regimens prescribed by a licensed physician.
- 003.06B8 *Nutrition services* include:
  - <u>003.06B8a</u> Conducting individual assessments in nutritional history and dietary intake; in anthropometric, biochemical and clinical variables; in feeding skills and feeding problems; and in food habits and food preferences;
  - <u>003.06B8b</u> Developing and monitoring appropriate plans to address the nutritional needs of children eligible under 92 NAC 52, based on the findings of the individual assessments in 92 NAC 52-003.06B8a; and
    - <u>003.06B8b1</u> Making referrals to appropriate community resources to carry out nutrition goals.
- <u>003.06B9</u> Occupational therapy includes services to address the functional needs of an infant or toddler with a disability 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: identification, assessment, and intervention; 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 prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability.
- <u>003.06B10</u> **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 adaptation. These services include:
  - <u>003.06B10a</u> Screening, evaluation, and assessment of children to identify movement dysfunction;
  - <u>003.06B10b</u> Obtaining, interpreting and integrating information appropriate to program planning to prevent, alleviate, or compensate for movement dysfunction and related functional problems; and
  - <u>003.06B10c</u> Providing individual and group services or treatment to prevent, alleviate, or compensate for, movement dysfunction and related functional problems.

- 003.06B11 **Psychological services** include:
  - <u>003.06B11a</u> Administering psychological and developmental tests and other assessment procedures;
  - 003.06B11b Interpreting assessment results;
  - <u>003.06B11c</u> Obtaining, integrating and interpreting information about child behavior and child and child family conditions related to learning, mental health, and development; and
  - <u>003.06B11d</u> 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.
- <u>003.06B12</u> **Services coordination services** means services provided by a services coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the services and rights, including procedural safeguards.
- <u>003.06B13</u> **Sign language and cued language services** include teaching sign language, cued language, and auditory/oral language, providing oral transliteration services (such as amplification), and providing sign and cued language interpretation.
- <u>003.06B14</u> Social work services include:
  - <u>003.06B14a</u> Making home visits to evaluate a child's living conditions and patterns of parent-child interaction;
  - <u>003.06B14b</u> Preparing a social or emotional developmental assessment of the infant or toddler within the family context;
  - <u>003.06B14c</u> Providing individual and family-group counseling with parents and other family members, and appropriate social skill-building activities with the infant or toddler with a disability and parents;
  - <u>003.06B14d</u> Working with those problems in the living situation (home, community, and any center where early intervention services are provided) of an infant or toddler with a disability and the family of that child that affect the child's maximum utilization of early intervention services; and
  - <u>003.06B14e</u> Identifying, mobilizing and coordinating community resources and services to enable the infant or toddler with a disability and the family to receive maximum benefit from early intervention services.
- <u>003.06B15</u> **Special Instruction** include:
  - <u>003. 06B15a</u> The design of learning environments and activities that promote the infant's or toddler's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction;
  - <u>003. 06B15b</u> Curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the IFSP for the infant or toddler with a disability;

- <u>003.06B15c</u> Providing families with information, skills, and support related to enhancing the skill development of the child; and
- <u>003.06B15d</u> Working with the infant or toddler with a disability to enhance the child's development.

#### <u>003.06B16</u> **Speech-language pathology services** include:

- <u>003.06B16a</u> Identification of children with communication or language disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in those skills;
- <u>003.06B16b</u> Referral for medical or other professional services necessary for the habilitation or rehabilitation of children with communication or language disorders and delays in development of communication skills; and
- <u>003.06B16c</u> Provision of services for the habilitation, rehabilitation, or prevention of communication or language disorders and delays in development of communication skills.
- <u>003.06B17</u> **Transportation and related costs** include the cost of travel and other costs that are necessary to enable an infant or toddler with a disability and the child's family to receive early intervention services.
- 003.06B18 Vision Services mean:
  - <u>003.06B18a</u> Evaluation and assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays and abilities that affect early childhood development;
  - <u>003.06B18b</u> Referral for medical or other professional services necessary for the habilitation or rehabilitation of visual functioning disorders or both; and
  - <u>003.06B18c</u> Communication skills training, orientation and mobility training for all environments, visual training, and additional training necessary to activate visual motor abilities.
- <u>003.06C</u> The following are types of qualified personnel who provide early intervention services under Part C of the IDEA:
  - <u>003.06C1</u> Audiologists;
  - 003.06C2 Family therapists;
  - <u>003.06C3</u> Nurses;
  - <u>003.06C4</u> Occupational therapists;
  - <u>003.06C5</u> Orientation and mobility therapists;
  - <u>003.06C6</u> Pediatricians and other physicians for diagnostic and evaluation purposes;
  - <u>003.06C7</u> Physical therapists;
  - 003.06C8 Psychologists;
  - 003.06C9 Registered dieticians;

- 003.06C10 Social Workers;
- <u>003.06C11</u> Special educators, including teachers of children with hearing impairments (including deafness) and teachers of children with visual impairments (including blindness);
- <u>003.06C12</u> Speech and language pathologists; and
- <u>003.06C13</u> Vision specialists, including ophthalmologists and optometrists.
- <u>003.06D</u> The services and personnel identified in 003.06B and 003.06C do not comprise exhaustive lists of the types of service that may constitute early intervention services or the types of qualified personnel that may provide early intervention services. Nothing in this section prohibits the identification in the IFSP of another type of services as an early intervention service provided that the service meets the criteria identified in 003.06A or of another type of personnel that may provide early intervention services in accordance with this Chapter, provided such personnel meet the requirements of 92 NAC 52-003.22.
- <u>003.07</u> **Evaluation** means the procedures used by qualified personnel to determine a child's initial and continuing eligibility under this Chapter consistent with the definition of infant or toddler with a disability in 92 NAC 52-003.15.
- 003.08 **FAPE early intervention services** means those early intervention services that are part of a free appropriate public education for a child under 92 NAC 51. Such services must meet the requirements of both 92 NAC 51 and 92 NAC 52.
- <u>003.09</u> **Free appropriate public education or FAPE**, means special education and related services that are provided at public expense, under public supervision and direction, and without charge; meet the requirements of 92 NAC 51 and the requirements of Part B of IDEA; include an appropriate preschool, elementary school or secondary school education in the state; and are provided in conformity with an individualized education program that meets the requirements of 92 NAC 51-007.
- <u>003.10</u> **Homeless children** means children who meet the definition given to homeless children and youth in Section 725 (42 U.S.C. 11434a) of the McKinney-Vento Assistance Act as amended in 42 USC 11431 *et seq.*
- <u>003.11</u> *Include or Including* means that the items are not all of the possible items that are covered, whether like or unlike the ones named.
- <u>003.12</u> *Indian* includes an individual who is a member of an Indian tribe.
- <u>003.13</u> **Indian tribe** means any Federal or State Indian tribe, band, rancheria, pueblo, colony, or community including any Alaska Native village or regional village corporation (as defined in or established under the Alaska Native Claims Settlement Act, 43 U.S.C. 1601 *et seq.*).
- <u>003.14</u> Individualized Family Service Plan or IFSP means a written plan for providing early intervention services to an infant or toddler with a disability under this Chapter and the infant's or toddler's family that is based on the evaluation and assessment described in 92 NAC 52-006.05 through 006.07; that includes the content specified in 92 NAC 52-007; that is implemented as soon as possible once parental consent for the early intervention services in the IFSP is obtained and that is developed in accordance with the IFSP procedures in 92 NAC 52-007.
- <u>003.15</u> **Infant or toddler with a disability** means an individual under three years of age who needs early intervention services because the individual --

- <u>003.15A</u> Is experiencing a developmental delay, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas:
  - <u>003.15A1</u> Cognitive development,
  - <u>003.15A2</u> Physical development, including vision and hearing,
  - 003.15A3 Communication development,
  - 003.15A4 Social or emotional development,
  - <u>003.15A5</u> Adaptive development; or
- <u>003.15B</u> Has a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay; and includes conditions such as chromosomal abnormalities, genetic or congenital disorders, sensory impairments, inborn errors of metabolism, disorders reflecting disturbance of the development of the nervous system, congenital infections, severe attachment orders, and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome; or
- <u>003.15C</u> Is experiencing any of the other disabilities described in 92 NAC 51-006.04.
- <u>003.15D</u> Toddlers with disabilities who reach age three during the school year shall remain eligible throughout that school year.
- <u>003.16</u> **Multidisciplinary** means the involvement of two or more separate disciplines or professions and with respect to:
  - <u>003.16A</u> The evaluation of the child and assessments of the child and family, may include one individual who is qualified in more than one discipline or profession; and
  - <u>003.16B</u> Pursuant to 480 NAC 10, the IFSP team must include the involvement of the parent and two or more individuals from separate disciplines or professions and one of these individuals must be the services coordinator.

#### 003.17 Native language:

- <u>003.17A</u> When used with respect to an individual who is limited English proficient or LEP (as that term is defined in section 602(18) of the IDEA) native language means the language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child except for evaluations and assessments conducted pursuant to 92 NAC 52-006.05D, the language normally used by the child, if determined developmentally appropriate for the child by qualified personnel conducting the evaluation or assessment.
- <u>003.17B</u> When used with respect to an individual who is deaf or hard of hearing, blind or visually impaired, or for an individual with no written language, includes the mode of communication that is normally used by the individual (such as sign language, braille, or oral communication).
- <u>003.18</u> **Natural environments** means settings that are natural or typical for a same-aged infant or toddler without a disability, may include the home or community settings, and must be consistent with the provisions of 92 NAC 52-007.06.

- <u>003.19</u> **Notice** means prior written notice that must be provided to parents a reasonable time before the school district or approved cooperative proposes or refuses to initiate or change the identification, evaluation, or placement of the infant or toddler, or the provision of early intervention services to the infant or toddler with a disability and their family.
- 003.20 **Parent** means:
  - <u>003.20A</u> A biological or adoptive parent of a child;
  - <u>003.20B</u> A guardian generally authorized to act as the child's parent, or authorized to make early intervention, educational, health or developmental decisions for the child (but not the State if the child is a ward of the State);
  - <u>003.20C</u> An individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare; or
  - <u>003.20D</u> A surrogate parent who has been appointed in accordance with 92 NAC 52-009.04.
  - <u>003.20E</u> Except as provided in 92 NAC 52-003.20E1 the biological or adoptive parent, when attempting to act as the parent under 92 NAC 52 and when more than one party is qualified under 92 NAC 52-003.20 to act as a parent, must be presumed to be the parent for purposes of this section unless the biological or adoptive parent does not have legal authority to make educational or early intervention service decisions for the child.
    - <u>003.20E1</u> If a judicial decree or order identifies a specific person or persons under 92 NAC 52-003.20A through 003.20D to act as the "parent" of a child to make educational or early intervention service decisions on behalf of a child, then the person or persons must be determined to be the "parent" for purposes of this Chapter, except that if an early intervention service provider or a public agency provides any services to a child or any family member of that child, that early intervention service provider or public agency may not act as the parent for that child.
- <u>003.21</u> **Public agency** as used in this Chapter includes the Nebraska Department of Education and any other agency or political subdivision of the State.
- 003.22 **Qualified personnel** means personnel who have met State approved or recognized certification, licensing, registration, or other comparable requirements that apply to the areas in which the individuals are conducting evaluations or assessments or providing early intervention services.
- <u>003.23</u> **Screening Procedures** means activities that are carried out under 92 NAC 52-006.03 by the school district or approved cooperative to identify, at the earliest possible age, infants and toddlers suspected of having a disability and in need of early intervention services; and includes the administration of appropriate instruments by personnel trained to administer those instruments. Screening is an optional procedure.
- <u>003.24</u> **School year** for an infant or toddler with a disability shall be September 1 through August 31.
- <u>003.25</u> **Scientifically based research** has the meaning given the term in section 9101(37) of the Elementary and Secondary Education Act of 1965, as amended (ESEA). In applying the ESEA to the regulations in this Chapter any reference to "education activities and programs" refers to "early intervention services".

## 004 Responsibility for Early Intervention

- 004.01 General Responsibility
  - <u>004.01A</u> Early identification of infants and toddlers with disabilities is provided by the Co-Lead Agencies through a public awareness campaign and a central directory.
  - <u>004.01B</u> School districts and approved cooperatives shall provide early identification of infants and toddlers with disabilities through the child find activities described in Section 006.01 through 006.01C of this Chapter.
  - <u>004.01C</u> School districts and approved cooperatives shall provide, at no cost to families, evaluations and assessments of infants and toddlers who are referred because of possible disabilities in order to determine eligibility for early intervention services.
  - <u>004.01D</u> Services coordination services and the development of the IFSPs are provided to infants and toddlers with disabilities at no cost to families by the Department of Health and Human Services pursuant to 480 NAC 10.
  - <u>004.01E</u> School districts and approved cooperatives shall provide FAPE early intervention services (those early intervention services that are part of FAPE under 92 NAC 51) to eligible infants and toddlers with disabilities at no cost to families.
  - <u>004.01F</u> For other early intervention services not mandated by the Special Education Act (early intervention services that are not part of FAPE under 92 NAC 51) and not paid for through any other source, including, but not limited to, insurance, Medicaid, or third-party payor, payment for such services shall be the responsibility of the parent, guardian, or other person responsible for the eligible infant or toddler.
  - <u>004.01G</u> Each school district or approved cooperative that has a direct role in the provision of FAPE early intervention services is responsible for making a good faith effort to assist each eligible child in achieving the outcomes in the child's IFSP. However, 92 NAC 52 does not require that any school district or approved cooperative be held accountable if an eligible child does not achieve the growth projected in the child's IFSP.
- 004.02 Monitoring and Enforcement
  - <u>004.02A</u> All school districts and approved cooperatives must comply with the requirements of this Chapter concerning the provision of FAPE early intervention services to infants and toddlers with disabilities and will be monitored for compliance with such regulations at least once every three years.
  - <u>004.02B</u> Failure to comply with the provisions of state and federal statute and administrative rules concerning FAPE early intervention services for infants and toddlers with disabilities shall result in notification to the school district or approved cooperative of specific program deficiencies by the NDE Office of Special Education.
  - <u>004.02C</u> School districts or approved cooperatives providing FAPE early intervention services shall be afforded 45 calendar days to respond to the initial notification with a report of the resolution of deficiencies or a plan for resolution.

- <u>004.02D</u> School districts or approved cooperatives failing to respond as set forth in 92 NAC 52-004.02C shall be afforded an additional 30 calendar days following contact from the Administrator of the NDE Office of Special Education or the designee of the Administrator to submit a plan for resolution of deficiencies.
  - <u>004.02E</u> Deficiencies must be corrected as soon as possible, and in no case later than one year after the school district or approved cooperative has been notified of the non-compliance. Deficiencies not corrected according to the timelines set forth in 92 NAC 52-004.02 shall be subject to the procedures outlined in 92 NAC 51-004.09.
  - <u>004.02F</u> School districts or approved cooperatives not meeting the requirements of this Chapter concerning the provision of FAPE early intervention services to infants and toddlers shall be in violation of the law. No state or federal funds shall be paid as long as such violation exists, but no deduction shall be made from any funds required by the Constitution of the State of Nebraska to be paid to such program.
- 004.03 Reporting of Information Regarding Infants and Toddlers with Disabilities
  - <u>004.03A</u> Individual child information shall be reported electronically via the NDE Portal. Each school district or approved cooperative shall maintain and report the following information for infants and toddlers with disabilities receiving services according to an Individual Family Service Plan (IFSP).
    - <u>004.03A1</u> Name (or identifier approved by the Nebraska Department of Education) and birthdate;
    - <u>004.03A2</u> County and district of legal residence;
    - 004.03A3 Program setting;
    - <u>004.03A4</u> Type of disability;
    - 004.03A5 Race/ethnicity and gender;
    - <u>004.03A6</u> Type(s) of service received;
    - <u>004.03A7</u> Date and reason for exiting FAPE early intervention services;
    - <u>004.03A8</u> State Ward Status and indication of appointment of surrogate, if required; and
    - <u>004.03A9</u> Initial verification date and disability pursuant to 92 NAC 52-006.
  - <u>004.03B</u> This data shall be updated at least annually to reflect change(s) in the information in 92 NAC 52-004.03C and 004.03D.
  - <u>004.03C</u> School districts, approved cooperatives and state operated schools shall prepare an accurate and unduplicated child count as of October 1 of each year. The October 1 child count must be approved and submitted by the district administrator or designee via the portal on or before October 31 of each year.
  - <u>004.03D</u> School districts, approved cooperatives and state operated schools shall prepare an accurate and unduplicated year-end child count as of June 30 of each year. The June 30 year-end child count must be approved and submitted by the district administrator or designee via the portal on or before June 30 of each year.

# 005 Early Childhood Interagency Planning Region Teams

- <u>005.01</u> Each school district shall demonstrate participation in a plan of services for children with disabilities who are less than five years of age. Such plans shall be prepared by each planning region established pursuant to <u>Neb. Rev. Stat.</u> §79-1135 and be updated annually and shall address:
  - <u>005.01A</u> Gaps and barriers in service delivery;
  - 005.01B Child Find;
  - <u>005.01C</u> Training and technical assistance;
  - 005.01D Parent involvement; and
  - 005.01E Resources.
- 005.02 Annual Meetings
  - <u>005.04A</u> The annual meeting must be conducted prior to July 1 of each year.
  - <u>005.04B</u> The date and place of the annual meeting shall be disseminated within the region so that all school districts, approved cooperatives, service providers, parents, and non-public agencies serving children below age five have access to the information.
  - <u>005.04C</u> A written report of the annual meeting shall be prepared, which includes a list of participants and identified gaps and barriers. The written report shall be submitted to the Nebraska Department of Education.

## 006 Identification, Referral and Eligibility Determination of Infants and Toddlers with Disabilities

- <u>006.01</u> School districts and approved cooperatives, as part of the child find system, must ensure that all infants and toddlers with disabilities within the district or approved cooperative who are eligible for early intervention services are identified, located and evaluated, including:
  - <u>006.01A</u> Indian infants and toddlers with disabilities residing on a reservation geographically located in the State (including coordination, as necessary, with tribes, tribal organization, and consortia);
  - <u>006.01B</u> Infants and toddlers with disabilities who are homeless, in foster care and wards of the State; and
  - <u>006.01C</u> Infants and toddlers with disabilities who are the subjects of substantiated cases of child abuse or neglect, or are identified as directly affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.
  - 006.01D Referral Procedures
    - <u>006.01D1</u> School districts and approved cooperatives shall refer a child under the age of three to the agency responsible for providing services coordination in the Planning Region as soon as possible but in no case later than seven (7) days after becoming aware that the child may be eligible for early intervention services.
    - <u>006.01D2</u> A child under the age of three who is the subject of a substantiated case of child abuse or neglect; or is identified as directly affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure must be referred to the Early Intervention Program (the agency responsible for providing services coordination in the Planning Region).
  - 006.02 Post-Referral (45 Days) Timeline
    - <u>006.02A</u> Except as provided in 92 NAC 52-006.02B, school districts and approved cooperatives shall complete any screening under 92 NAC 52-006.03 (if the parent consents); the initial evaluation and the initial assessments of the child and the family under 92 NAC 52-006.05; and shall participate in the initial Individualized Family Service Plan (IFSP) meeting under 92 NAC 52-007.03 within 45 calendar days from the date of referral.
    - <u>006.02B</u> Subject to 92 NAC 52-006.02C, the 45 calendar day timeline described in 92 NAC 52-006.02A does not apply for any period when:
      - <u>006.02B1</u> The child or parent is unavailable to participate in the screening (if applicable), the initial evaluation, the initial assessments of the child and family, or the initial IFSP meeting due to exceptional family circumstances that are documented in the child's early intervention records; or
      - <u>006.02B2</u> The parent has not provided consent for the screening (if applicable), the initial evaluation, or the initial assessment of the child, despite documented, repeated attempts by the services coordinator to obtain parental consent.
    - <u>006.02C</u> In the event the circumstances described in 92 NAC 52-006.02B1 or 006.02B2 exist:

- <u>006.02C1</u> The services coordinator will document in the child's early intervention records the exceptional family circumstances or repeated attempts by the early intervention service provider to obtain parental consent pursuant to 480 NAC 10.
- <u>006.02C2</u> The school district or approved cooperative must complete the screening (if applicable), the initial evaluation, the initial assessments (of the child), and participate in the initial IFSP meeting as soon as possible after the documented exceptional family circumstances described in 92 NAC 52-006.02B no longer exist or parental consent is obtained for the screening (if applicable), the initial evaluation, and the initial assessment of the child; and
- <u>006.02C3</u> The services coordinator will develop and implement an interim IFSP, to the extent appropriate pursuant to 480 NAC 10.

# 006.03 Screening

- <u>006.03A</u> The school district or approved cooperative may adopt procedures consistent with requirements of 92 NAC 52-006.03, to screen children under the age of three who have been referred to the agency responsible for services coordination in the Planning Region to determine whether they are suspected of having a disability. If the school district or approved cooperative proposes to screen a child it must notify the services coordinator who will:
  - <u>006.03A1</u> Provide the parent notice pursuant to 480 NAC 10 of the school district's or approved cooperative's intent to screen the child to identify whether the child is suspected of having a disability and include in that notice a description of the parent's right to request an evaluation under 92 NAC 52-006 at any time during the screening process; and
  - <u>006.03A2</u> Obtain parental consent pursuant to 480 NAC 10 before the school district or approved cooperative conducts the screening procedures.
- <u>006.03B</u> If the parent consents to the screening and the screening or other available information indicates that the child is:
  - <u>006.03B1</u> Suspected of having a disability, the services coordinator pursuant to 480 NAC 10 will provide notice and obtain parental consent at which time an evaluation and assessment of the child shall be conducted by the school district or approved cooperative.
  - <u>006.03B2</u> Not suspected of having a disability, the school district or approved cooperative shall ensure that notice of that determination is provided to the parent under 92 NAC 52-009.03B, and that the notice describes the parent's right to request an evaluation.
- <u>006.03C</u> If the parent of the child requests and consents to an evaluation at any time during the screening process, evaluation of the child shall be conducted under 92 NAC 52-006, even if the school district or approved cooperative has determined under 92 NAC 52-006.03B2 that the child is not suspected of having a disability.
- <u>006.03D</u> For every child under the age of three who is referred for early intervention services or screened in accordance with 92 NAC 52-006.03A, the school district or approved cooperative is not required to:

- <u>006.03D1</u> Provide an evaluation of the child under 92 NAC 52-006 unless the child is suspected of having a disability or the parent requests an evaluation under 92 NAC 52-006.03C; or
- <u>006.03D2</u> Make FAPE early intervention services available under 92 NAC 52 to the child unless a determination is made that the child meets the definition of infant or toddler with a disability under 92 NAC 52-003.15.
- <u>006.03E</u> The screening must be conducted utilizing appropriate instruments by individuals with training to administer those instruments.
- <u>006.04</u> Eligibility for FAPE early intervention services is established when the school district or approved cooperative determines that the infant or toddler is experiencing a developmental delay as described in 92 NAC 52-006.04A or any of the other disabilities described in 92 NAC 51-006.04.
  - <u>006.04A</u> To qualify for early intervention services in the category of developmental delay, the child shall have either:
    - <u>006.04A1</u> A diagnosed physical or mental condition that has a high probability of resulting in a substantial developmental delay in the areas described in 92 NAC 52-006.04A2; and includes conditions such as chromosomal abnormalities; genetic or congenital disorders, sensory impairments; inborn errors of metabolism; disorders reflecting disturbances of the development of the nervous system; congenital infections; severe attachment disorders; and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome; or
    - <u>006.04A2</u> A significant developmental delay as defined in 92 NAC 52-006.04B and as measured by appropriate diagnostic instruments and procedures, in function in one or more of the following areas and by reason thereof, needs early intervention services:
      - <u>006.04A2a</u> Cognitive development;
      - <u>006.04A2b</u> Physical development, including vision and hearing;
      - <u>006.04A2c</u> Communication development;
      - <u>006.04A2d</u> Social or emotional development; or
      - <u>006.04A2e</u> Adaptive development.
  - <u>006.04B</u> Significant delay is defined as:
    - <u>006.04B1</u> At least 2.0 standard deviations below the mean in one area of development contained in 92 NAC 52-006.04A2a through 006.04A2e; or
    - <u>006.04B2</u> At least 1.3 standard deviations below the mean in two areas of development contained in 92 NAC 52-006.04A2a through 006.04A2e.
- <u>006.05</u> Evaluation of the Child and Assessment of the Child
  - <u>006.05A</u> The school district or approved cooperative must ensure that, subject to obtaining parental consent, each child under the age of three who is referred for evaluation or early intervention services and suspected of having a disability, receives:

- <u>006.05A1</u> A timely, comprehensive, multidisciplinary evaluation of the child in accordance with 92 NAC 52-006.06 unless eligibility is established under 92 NAC 52-006.05B; and
- <u>006.05A2</u> If the child is determined eligible as an infant or toddler with a disability as defined in 92 NAC 52-003.15, a multidisciplinary assessment of the unique strengths and needs of that infant or toddler and the identification of services appropriate to meet those needs.
- <u>006.05B</u> A child's medical and other records may be used to establish eligibility (without conducting an evaluation of the child) under 92 NAC 52 if those records indicate that the child's level of functioning in one or more of the developmental areas identified in 92 NAC 52-003.15 constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a disability under 92 NAC 52-003.15 and 92 NAC 52-006.04.
  - <u>006.05B1</u> If the child's eligibility is established under 92 NAC 52-006.05B, the school district or approved cooperative must conduct an assessment of the child in accordance with 92 NAC 52-006.07.
  - <u>006.05B2</u> Qualified personnel must use informed clinical opinion when conducting an evaluation and assessment of the child. In addition, the school district or approved cooperative shall ensure that informed clinical opinion may be used as an independent basis to establish a child's eligibility even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments used to establish eligibility under 92 NAC 52-006.06.
- <u>006.05C</u> All evaluations and assessments of the child shall be conducted by qualified personnel, in a nondiscriminatory manner, and selected and administered so as not to be racially or culturally discriminatory.
- <u>006.05D</u> Unless clearly not feasible to do so, school districts or approved cooperatives must conduct all evaluations and assessments of the child in the native language of the child, in accordance with the definition of native language in 92 NAC 52-003.17.
- 006.06 Procedures for Evaluation of the Child to Determine Eligibility
  - <u>006.06A</u> In conducting an evaluation, no single procedure may be used as the sole criterion for determining a child's eligibility. Procedures must include:
    - 006.06A1 Administering an evaluation instrument;
    - <u>006.06A2</u> Taking the child's history (including interviewing the parent);
    - <u>006.06A3</u> Identifying the child's level of functioning in each of the developmental areas in 92 NAC 52-003.15 and 92 NAC 52-006.04.
    - <u>006.06A4</u> Gathering information from other sources such as family members, other caregivers, medical providers, social workers, and educators, if necessary, to understand the full scope of the child's unique strengths and needs; and
    - <u>006.06A5</u> Reviewing medical, educational, or other records.

- 006.07 Procedures for Assessment of the Child
  - <u>006.07A</u> An assessment of each infant or toddler with a disability must be conducted by qualified personnel in order to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs. The assessment of the child must include the following:
    - <u>006.07A1</u> A review of the results of the evaluation conducted under 92 NAC 51-006.06;
    - <u>006.07A2</u> Personal observations of the child; and
    - <u>006.07A3</u> The identification of the child's needs in each of the developmental areas in 92 NAC 52-003.15 and 92 NAC 52-006.04.
- 006.08 If, based on the evaluation conducted under 92 NAC 52-006, the school district or approved cooperative determines that a child is not eligible, the school district or approved cooperative must provide the parent with prior written notice required in 92 NAC 52-009.03B and include in the notice information about the parent's right to dispute the eligibility determination through dispute resolution mechanisms under 92 NAC 52-009.05 through 009.08, such as requesting a due process hearing or mediation or filing a State complaint.
- 006.09 Multidisciplinary Team Written Report
  - <u>006.09A</u> The team shall prepare a written report of the results of the child's evaluation and assessment.
    - 006.09A1 The report shall include a statement of:
      - <u>006.09A1a</u> Whether the child qualifies as an infant or toddler with a disability based on the criteria and definitions contained in 92 NAC 52-006 or 92 NAC 51-006.04;
      - <u>006.09A1b</u> The basis for making the determination including the results of the evaluation; and
      - <u>006.09A1c</u> The child's unique strengths and needs in each of the developmental areas: cognitive development; physical development; communication development; social and emotional development and adaptive development;
      - <u>006.09A1d</u> A listing of the team members that must include the parent and individuals representing two or more separate disciplines pursuant to 92 NAC 52-003.20 and 92 NAC 52-003.16B.
    - <u>006.09A2</u> Each team member shall certify in writing whether the report reflects his or her conclusion. If the report does not reflect his or her conclusion, the team member shall submit a separate statement presenting his or her conclusion.
- <u>006.10</u> A copy of the multidisciplinary team report shall be given to the parent and services coordinator at no cost consistent with 92 NAC 52-009.02F3.

## 007 Individual Family Service Plan (IFSP)

- 007.01 For each infant or toddler with a disability, the school district or approved cooperative shall participate in the development, review, and implementation of an Individualized Family Service Plan (IFSP) developed by a multidisciplinary team, which includes the parent.
- 007.02 Procedure for IFSP development, review and evaluation
  - <u>007.02A</u> For a child referred for early intervention services and determined to be eligible as an infant or toddler with a disability, the school district or approved cooperative shall participate in a meeting to develop the initial IFSP within the 45 calendar day time period described in 92 NAC 52-006.02.
  - <u>007.02B</u> The school district or approved cooperative shall participate in a review of the IFSP for a child and the child's family every six months, or more frequently if conditions warrant, or if the family requests such a review. The purpose of the periodic review is to determine: the degree to which progress toward achieving the results or outcomes identified in the IFSP is being made; and whether modification or revision of the results, outcomes, or early intervention services identified in the IFSP is necessary.
  - <u>007.02C</u> The school district or approved cooperative shall participate on at least an annual basis in the meeting to evaluate and revise, as appropriate, the IFSP for a child and the child's family. The results of any current evaluations and other information available from the assessments of the child and family conducted under 92 NAC 52-006 shall be used by the school district or approved cooperative in determining the FAPE early intervention services that are appropriate and will be provided.
  - <u>007.02D</u> The school district or approved cooperative shall ensure that all IFSP meetings and reviews are conducted in the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so.
  - <u>007.02E</u> The school district or approved cooperative shall provide each FAPE early intervention service as soon as possible but in no case later than 30 days after the parent provides consent for that service. The school district or approved cooperative is not responsible for providing early intervention services that are not FAPE early intervention services.
- 007.03 Initial and Annual IFSP Team Meetings
  - <u>007.03A</u> The district or approved cooperative shall ensure that the following individuals participate in each initial IFSP meeting and each annual IFSP Team meeting.
    - <u>007.03A1</u> A person or persons directly involved in conducting the evaluations and assessments in 92 NAC 52-006;
    - <u>007.03A2</u> As appropriate, persons who will be providing FAPE early intervention services under this Chapter to the child or family; and
    - <u>007.03A3</u> A representative of the school district or approved cooperative who has the authority to commit resources.
  - <u>007.03B</u> If a person listed in 92 NAC 52-007.03A1 is unable to attend a meeting, arrangements must be made for the person's involvement through other means, including one of the following:

- 007.03B1 Participating in a telephone conference call;
- <u>007.03B2</u> Having a knowledgeable authorized representative attend the meeting; or
- 007.03B3 Making pertinent records available at the meeting.
- <u>007.04</u> The school district or approved cooperative shall provide information to assist in the development of an IFSP. Title 480 NAC 10 requires that the IFSP contains the following components:
  - <u>007.04A</u> A statement of the infant or toddler with a disability's present levels of physical development (including vision, hearing, and health status), cognitive development, communication development, social or emotional development, and adaptive development based on the information from that child's evaluation and assessments conducted under 92 NAC 52-006.05.
  - <u>007.04B</u> A statement of the measurable results or measurable outcomes expected to be achieved for the child (including pre-literacy and language skills, as developmentally appropriate for the child) and family and the criteria, procedures, and timelines used to determine:
    - <u>007.04B1</u> The degree to which progress toward achieving the results or outcomes identified in the IFSP is being made; and
    - <u>007.04B2</u> Whether modifications or revisions of the expected results or outcomes, or early intervention services identified in the IFSP are necessary.
  - <u>007.04C</u> A statement of the specific early intervention services, based on peer reviewed research (to the extent practicable), that are necessary to meet the unique needs of the child and the family to achieve the results or outcomes identified in 92 NAC 52-007.04B including:
    - <u>007.04C1</u> The length, duration, frequency, intensity, and method of delivering the early intervention services;
      - <u>007.04C1a</u> Frequency and intensity mean the number of days or sessions that a service will be provided, and whether the service is provided on an individual or group basis;
      - <u>007.04C1b</u> Method means how a service is provided (such as individually or in a group);
      - <u>007.04C1c</u> Length means the length of time the service is provided during each session of that service (such as an hour or other specified time period);
      - <u>007.04C1d</u> Duration means projecting when a given service will no longer be provided (such as when the child is expected to achieve the results or outcomes of his or her IFSP).
    - <u>007.04C2</u> A statement that each early intervention service is provided in the natural environment for that child or service to the maximum extent appropriate, consistent with 92 NAC 52-003.06, 003.18, and 007.06 or subject to 007.04C3, a justification as to why an early intervention service will not be provided in the natural environment.

- <u>007.04C3</u> The determination of the appropriate setting for providing early intervention services to an infant or toddler with a disability, including any justification for not providing a particular early intervention service in the natural environment for that infant or toddler with a disability and service that must be:
  - <u>007.04C3a</u> Made by the IFSP Team (which includes the parent and other team members);
  - 007.04C3b Consistent with the provisions in 92 NAC 52-003.14 and 92 NAC 52-007.06; and
  - 007.04C3c Based on the child's outcomes that are identified by the IFSP Team in 92 NAC 52-007.04B.
- <u>007.04C4</u> The location of the early intervention services;
- <u>007.04C5</u> For children who are at least three years of age, an educational component that promotes school readiness and incorporates preliteracy, language, and numeracy skills.
- <u>007.04D</u> The projected date for the initiation of each early intervention service in 92 NAC 52-007.04C, which date must be as soon as possible after the parent consents to the service, but not later than 30 days of receipt of parental consent, as required in 92 NAC 52-007.02E.

#### 007.05 Interim IFSPs

A school district or approved cooperative may commence FAPE early intervention services for an eligible child and the child's family before the completion of the evaluation and assessments in 92 NAC 52-006.05 through 006.07, if the following conditions are met:

- <u>007.05A1</u> Parental consent is obtained by the services coordinator.
- <u>007.05A2</u> An interim IFSP is developed that includes:
  - <u>007.05A2a</u> The name of the services coordinator who will be responsible for implementing the interim IFSP and coordinating with other agencies and persons;
  - <u>007.05A2b</u> The name of the school district or approved cooperative representative who has the authority to commit district resources; and
  - <u>007.05A2c</u> The FAPE early intervention services that have been determined to be needed immediately by the child and the child's family.
- <u>007.05A3</u> Evaluations and assessments are completed within the 45 calendar day timeline in 92 NAC 52-006.02.

## 007.06 Natural Environments

<u>007.06A</u> To the maximum extent appropriate, FAPE early intervention services provided by the school district or approved cooperative shall be provided in natural environments including home and community settings in which children without disabilities participate.

- <u>007.06B</u> The provision of FAPE early intervention services for any infant or toddler may occur in a setting other than a natural environment only when FAPE early intervention cannot be achieved satisfactorily in a natural environment, as determined by the parent and the IFSP Team.
- 007.07 Year Round Continuous Services
  - <u>007.07A</u> FAPE early intervention services provided by the school district or approved cooperative may not be interrupted or modified or otherwise changed for reasons unrelated to the child's needs such as service provider availability or scheduling.

# 008 Transition to Preschool and Other Programs for Infants and Toddlers Below Age Three

- 008.01 Transition Planning
  - <u>008.01A</u> Pursuant to 480 NAC 10, if a toddler with a disability may be eligible for preschool services under 92 NAC 51, the services coordinator, with the approval of the family of the toddler, convenes a conference, among the family, and the school district or approved cooperative not fewer than 90 days, and, at the discretion of all parties, not more than 9 months, before the toddler's third birthday to discuss any services the toddlers may receive under 92 NAC 51; and
  - <u>008.01B</u> If the school district or approved cooperative determines that a toddler with a disability is not potentially eligible for services under Part B of IDEA, the services coordinator, pursuant to 480 NAC 10 with the approval of the family of that toddler, makes reasonable efforts to convene a conference among the family, and providers of other appropriate services for the toddler to discuss appropriate services that the toddler may receive.
- <u>008.02</u> Any child served pursuant to 92 NAC 52 has the right, at any time, to receive FAPE, if qualified, (as that term is defined at 92 NAC 52-003.09) under 92 NAC 51 instead of FAPE early intervention services under 92 NAC 52.
- <u>008.03</u> School districts and approved cooperatives shall continue to provide all FAPE early intervention services identified in the toddler with a disability's IFSP under 92 NAC 52-007 (and consented to by the parent under 92 NAC 52-007.02E) beyond age three until that toddler begins receiving services under 92 NAC 51. This provision does not apply if the school district or approved cooperative has requested parental consent for an evaluation under 92 NAC 51-009.08 and the parent has not provided that consent.
- <u>008.04</u> For toddlers with disabilities age three and older, the school district or approved cooperative shall ensure a smooth transition to preschool by:
  - <u>008.04A</u> Participating in a transition conference, between the parents and the school district or approved cooperative, not fewer than 90 days and, at the discretion of all parties, not more than 9 months before the child will no longer be eligible to receive, or no longer receives, FAPE early intervention services under this section, to discuss any services that the child may receive under 92 NAC 51; and
  - <u>008.04B</u> Establishing a transition plan in the IFSP not fewer than 90 days and, at the discretion of all parties, not more than 9 months before the child will no longer be eligible to receive, or no longer receives FAPE early intervention services under this section.

- 009 Procedural Safeguards
  - 009.01 Confidentiality and Notice to Parents
    - <u>009.01A</u> The school district or approved cooperative must ensure that the parents of a child referred for early intervention services are afforded the right to confidentiality of personally identifiable information, including the right to written notice of, and written consent to, the exchange of that information among agencies, consistent with Federal and State laws.
    - <u>009.01B</u> The parents of infants or toddlers who are referred to, or receive early intervention services, are afforded the opportunity to inspect and review all early intervention records about the child and the child's family that are collected, maintained, or used under 92 NAC 52, including records related to evaluations and assessments, screening, eligibility determinations, development and implementation of IFSPs, provision of FAPE early intervention services, individual complaints involving the child, or any part of the child's early intervention record under 92 NAC 52.
      - <u>009.01B1</u> The confidentiality procedures described in 92 NAC 52-009.01B apply to the personally identifiable information of a child and the child's family that:
        - <u>009.01B1a</u> Is contained in early intervention records collected, used, or maintained by the school district or approved cooperative; and
        - <u>009.01B1b</u> Applies from the point in time when the child is referred for early intervention services under 92 NAC 52 until the later of when the participating agency is no longer required to maintain or no longer maintains that information under applicable Federal and State laws.

#### 009.02 Records

- <u>009.02A</u> The following definitions apply to 92 NAC 52-009.01 through 009.02M2:
  - <u>009.02A1</u> Destruction means physical destruction of the record or ensuring that personal identifiers are removed from a record so that the record is no longer personally identifiable under 92 NAC 52-009.02A4.
  - <u>009.02A2</u> Early intervention records mean all records regarding a child that are required to be collected, maintained, or used under 92 NAC 52.
  - <u>009.02A3</u> Participating agency means any school district or approved cooperative that collects, maintains, or uses personally identifiable information to implement the requirements in 92 NAC 52.
  - <u>009.02A4</u> Personally identifiable information means personally identifiable information as defined in 34 CFR 99.3, as amended, except that the term "student" in the definition of personally identifiable information in 34 CFR 99.3 means "child" as used in 92 NAC 52 and any reference to "school" means school district or approved cooperative as used in 92 NAC 52.

#### 009.02B Access Rights

<u>009.02B1</u> Each participating agency must permit parents to inspect and review any early intervention records relating to their children that are collected, maintained, or used by the agency under 92 NAC 52. The agency must comply with a parent's request to inspect and review records without unnecessary delay and before any meeting regarding an IFSP, or any hearing pursuant to 92 NAC 55, and in no case more than 10 days after the request has been made.

- <u>009.02B2</u> The right to inspect and review early intervention records under this section includes:
  - <u>009.02B2a</u> The right to a response from the participating agency to reasonable requests for explanations and interpretations of the early intervention records.
  - <u>009.02B2b</u> The right to request that the participating agency provide copies of the early intervention records containing the information if failure to provide those copies would effectively prevent the parent from exercising the right to inspect and review the records; and
  - <u>009.02B2c</u> The right to have a representative of the parent inspect and review the early intervention records.
- <u>009.02B3</u> An agency may presume that the parent has authority to inspect and review records relating to his or her child unless the agency has been provided documentation that the parent does not have the authority under applicable State laws governing such matters as custody, foster care, guardianship, separation, and divorce.

## 009.02C Record of access

- <u>009.02C1</u> Each participating agency must keep a record of parties obtaining access to early intervention records collected, maintained, or used under 92 NAC 52 (except access by parents and authorized representatives and employees of the participating agency), including the name of the party, the date access was given, and the purpose for which the party is authorized to use the early intervention records.
- 009.02D Records on more than one child
  - <u>009.02D1</u> If any early intervention record includes information on more than one child, the parents of those children have the right to inspect and review only the information relating to their child or to be informed of that specific information.
- <u>009.02E</u> List of types and locations of information
  - <u>009.02E1</u> Each participating agency must provide parents, on request, a list of the types and locations of early intervention records collected, maintained, or used by the agency.
- 009.02F Fees for records
  - <u>009.02F1</u> Each participating agency may charge a fee for copies of records that are made for parents if the fee does not effectively prevent the parents from exercising their right to inspect and review those records, except as provided in 92 NAC 52-009.02F3.
    - <u>009.02F2</u> A participating agency may not charge a fee to search for or to retrieve information under this Chapter.

- <u>009.02F3</u> A participating agency must provide at no cost to parents, a copy of each evaluation, assessment of the child, family assessment, and IFSP as soon as possible but in no case more than seven days after each IFSP meeting.
- 009.02G Amendment of records at a parent's request
  - <u>009.02G1</u> A parent who believes that information in the early intervention records collected, maintained, or used is inaccurate, misleading, or violates the privacy or other rights of the child or parent may request that the participating agency that maintains the information amend the information.
  - <u>009.02G2</u> The participating agency must decide whether to amend the information in accordance with the request within a reasonable period of time of receipt of the request.
  - <u>009.02G3</u> If the participating agency refuses to amend the information in accordance with the request, it must inform the parent of the refusal and advise the parent of the right to a hearing under 92 NAC 52-009.02H.
- <u>009.02H</u> Opportunity for a hearing
  - <u>009.02H1</u> The participating agency must, on request, provide parents with the opportunity for a hearing to challenge information in their child's early intervention records to ensure that it is not inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child or parents. A parent may request a hearing under the participating agencies' procedures that are consistent with the FERPA hearing requirements in 34 CFR 99.22).

# 009.021 Result of hearing

- <u>009.0211</u> If, as a result of the hearing, the participating agency decides that the information is inaccurate, misleading or in violation of the privacy or other rights of the child or parent, it must amend the information accordingly and so inform the parent in writing.
- <u>009.0212</u> If, as a result of the hearing, the agency decides that the information is not inaccurate, misleading, or in violation of the privacy or other rights of the child or parent, it must inform the parent of the right to place in the early intervention records it maintains on the child a statement commenting on the information or setting forth any reasons for disagreeing with the decision of the agency.
- <u>009.0213</u> Any explanation placed in the early intervention records of the child under this section must:
  - <u>009.02I3a</u> Be maintained by the agency as part of the early intervention records of the child as long as the record or contested portion is maintained by the agency; and
  - <u>009.0213b</u> If the early intervention records of the child or the contested portion are disclosed by the agency to any party, the explanation must also be disclosed to the party.

- <u>009.02J</u> Hearing procedures
  - <u>009.02J1</u> A hearing held under 92 NAC 52-009.02H must be conducted according to the procedures under 34 CFR 99.22.
- 009.02K Consent prior to disclosure or use
  - <u>009.02K1</u> Except as provided in 92 NAC 52-009.02K2, prior parental consent must be obtained before personally identifiable information is:
    - <u>009.02K1a</u> Disclosed to anyone other than authorized representatives, officials, or employees of participating agencies collecting, maintaining, or using the information under 92 NAC 52, subject to 92 NAC 52-009.02K2; or
    - <u>009.02K1b</u> Used for any purpose other than meeting a requirement of this Chapter.
  - <u>009.02K2</u> A participating agency may not disclose personally identifiable information, as defined in 92 NAC 52-009.02A4, to any party except participating agencies (including the co-lead agencies and early intervention service providers) that are part of the State's early intervention system without parental consent unless authorized to do so pursuant to 34 CFR 303.414(b).
  - <u>009.02K3</u> The school district or approved cooperative must provide policies and procedures to be used when a parent refuses to provide consent under 92 NAC 52 (such as a meeting to explain to the parents how their failure to consent affects the ability of their child to receive services under this Chapter) provided that those procedures do not override a parent's right to refuse consent under 92 NAC 52-009.03A.
- 009.02L Safeguards
  - <u>009.02L1</u> Each participating agency must protect the confidentiality of personally identifiable information at the collection, maintenance, use, storage, disclosure, and destruction stages.
  - <u>009.02L2</u> One official at each participating agency must assume responsibility for ensuring the confidentiality of any personally identifiable information.
  - <u>009.02L3</u> All persons collecting or using personally identifiable information must receive training or instruction regarding the State's policies and procedures under 92 NAC 52-009.01 through 009.02M and 34 CFR Part 99.
  - <u>009.02L4</u> Each participating agency must maintain, for public inspection, a current listing of the names and positions of those employees within the agency who may have access to personally identifiable information.
- <u>009.02M</u> Destruction of information
  - <u>009.02M1</u> The participating agency must inform parents when personally identifiable information collected, maintained, or used under 92 NAC 52 is no longer needed to provide services to the child under Part C of the IDEA, the GEPA provisions in 20 U.S.C. 1232f, and EDGAR, 34 CFR parts 76 and 80.

<u>009.02M2</u> Subject to 92 NAC 52-009.02M1, the information must be destroyed at the request of the parents. However, a permanent record of a child's name, date of birth, parent contact information (including address and phone number), names of services coordinator(s) and early intervention service provider(s), and exit data (including year and age upon exit, and any programs entered into upon exiting) may be maintained without time limitation.

#### 009.03 Parental Consent and Notice

- <u>009.03A</u> Parental consent and ability to decline services
  - <u>009.03A1</u> Pursuant to 480 NAC 10, the services coordinator must ensure parental consent is obtained before:
    - <u>009.03A1a</u> Administering screening procedures under 92 NAC 52-006.03 that are used to determine whether a child is suspected of having a disability;
    - <u>009.03A1b</u> Initial evaluation and assessments of the child are conducted under 92 NAC 52-006.04 through 006.07; and
    - <u>009.03A1c</u> FAPE early intervention services are provided to the child under 92 NAC 52.
  - <u>009.03A2</u> School districts or approved cooperatives shall ensure parental consent is obtained before:
    - <u>009.03A2a</u> All evaluation and assessments of the child are conducted pursuant to 92 NAC 52-006.04 through 006.07 except those provided in 009.03A1b;
    - <u>009.03A2b</u> Public benefits or private insurance is used to pay for FAPE early intervention services if such consent is required under 92 NAC 52-011.03C and 011.04A; and
    - <u>009.03A2c</u> Disclosure of personally identifiable information by the school district or approved cooperative consistent with 92 NAC 52-009.02K.
  - <u>009.03A3</u> If a parent does not give consent under 92 NAC 52-009.03A2a the school district or approved cooperative must make reasonable efforts to ensure that the parent:
    - <u>009.03A3a</u> Is fully aware of the nature of the evaluation and assessment of the child or FAPE early intervention services that would be available; and
    - <u>009.03A3b</u> Understands that the child will not be able to receive the evaluation, assessment, or early intervention service unless consent is given.
  - <u>009.03A4</u> The school district or approved cooperative may not use the due process hearing procedures under 92 NAC 55 to challenge a parent's refusal to provide any consent that is required under 92 NAC 52-009.03A2.
  - <u>009.03A5</u> The parents of an infant or toddler with a disability -

- <u>009.03A5a</u> Determine whether they, their infant or toddler with a disability, or other family members will accept or decline any early intervention service at any time, in accordance with State law; and
- <u>009.03A5b</u> May decline a service after first accepting it, without jeopardizing other FAPE early intervention services under 92 NAC 52.
- <u>009.03B</u> Prior written notice and procedural safeguards notice
  - <u>009.03B1</u> Except for initial evaluation and assessment, prior written notice must be provided by the school district or approved cooperative to parents a reasonable time before the school district or approved cooperative proposes or refuses, to initiate or change the identification, evaluation, or placement of their infant or toddler, or the provision of FAPE early intervention services to the infant or toddler with a disability and that infant's or toddler's family.
  - <u>009.03B2</u> The notice must be in sufficient detail to inform parents about:
    - <u>009.03B2a</u> The action that is being proposed or refused;
    - 009.03B2b The reasons for taking the action; and
    - <u>009.03B2c</u> All procedural safeguards that are available under 92 NAC 52-009, including a description of mediation in 92 NAC 52-009.05, how to file a State complaint in 92 NAC 52-009.06 and a due process complaint in the provisions adopted under 92 NAC 55, and any timelines under those procedures.
  - <u>009.03B3</u> The notice must be written in language understandable to the general public; and provided in the native language, as defined in 92 NAC 52-003.17, of the parent or other mode of communication used by the parent, unless it is clearly not feasible to do so.
    - <u>009.03B3a</u> If the native language or other mode of communication of the parent is not a written language, the school district or approved cooperative must take steps to ensure that:
      - <u>009.03B3a(1)</u> The notice is translated orally or by other means to the parent in the parent's native language or other mode of communication;
      - <u>009.03B3a(2)</u> The parent understands the notice; and
      - <u>009.03B3a(3)</u> There is written evidence that the requirements of 92 NAC 52-009.03B3a have been met.

# 009.04 Surrogate Parents

- <u>009.04A</u> The school districts or approved cooperatives must ensure that the rights of a child under 92 NAC 52 are protected when no parent (as defined in 92 NAC 52-003.20) can be identified); the school district or approved cooperative, after reasonable efforts, cannot locate a parent; or the child is a ward of the State under the laws of Nebraska.
- <u>009.04B</u> The duty of the school district or approved cooperative under 92 NAC 52-009.04A, includes the assignment of an individual to act as a surrogate for the parent. This assignment process must include a method for determining whether a child needs a surrogate parent; and assigning a surrogate parent to the child.

- <u>009.04B1</u> In implementing the provisions under this section for children who are wards of the State or placed in foster care, the school district or approved cooperative must consult with the public agency that has been assigned care of the child.
- <u>009.04C</u> In the case of a child who is a ward of the State, the surrogate parent, instead of being appointed by the school district or approved cooperative under 92 NAC 52-009.04B may be appointed by the judge overseeing the infant or toddler's case provided that the surrogate parent meets the requirements in 92 NAC 52-009.04D1 and 009.04E.
- <u>009.04D</u> The school district or approved cooperative may select a surrogate parent in any way permitted under State law.
  - <u>009.04D1</u> School districts or approved cooperatives must ensure that a person selected as a surrogate parent:
    - <u>009.04D1a</u> Is not an employee of the co-lead agencies or any other public agency or early intervention service provider that provides early intervention services, education, care, or other services to the child or any family member of the child;
    - <u>009.04D1b</u> Has no personal or professional interest that conflicts with the interest of the child he or she represents; and
    - <u>009.04D1c</u> Has knowledge and skills that ensure adequate representation of the child.
- <u>009.04E</u> A person who is otherwise qualified to be a surrogate parent under 92 NAC 52-009.04D1 is not an employee of the school district or approved cooperative solely because he or she is paid by the school district or approved cooperative to serve as a surrogate parent.
- <u>009.04F</u> The surrogate parent has the same rights as a parent for all purposes under 92 NAC 52.
- <u>009.04G</u> The school district or approved cooperative must make reasonable efforts to ensure the assignment of a surrogate parent not more than 30 days after the school district or approved cooperative determines that the child needs a surrogate parent.

# 009.05 Mediation

- <u>009.05A</u> Parties to disputes involving any matter under 92 NAC 52, including matters arising prior to the filing of a due process complaint, may resolve disputes through a mediation process at any time.
- <u>009.05B</u> The mediation process:
  - <u>009.05B1</u> Is voluntary on the part of the parties;
  - <u>009.05B2</u> Is not be used to deny or delay a parent's right to a due process hearing, or to deny any other rights afforded under 92 NAC 52; and
  - <u>009.05B3</u> Is conducted by a qualified and impartial mediator who is trained in effective mediation techniques.

- 009.05C Mediation Process Requirements
  - <u>009.05C1</u> The Nebraska Department of Education maintains a list of individuals who are qualified mediators and are knowledgeable in laws and regulations relating to the provision of FAPE early intervention services.
  - <u>009.05C2</u> The Nebraska Department of Education assigns mediators on a random, rotational or other impartial basis.
  - <u>009.05C3</u> The Nebraska Department of Education bears the cost of the mediation process including the costs of meetings described in 92 NAC 52-009.05E.
  - <u>009.05C4</u> Each session in the mediation process must be scheduled in a timely manner and must be held at a location that is convenient to the parties in the dispute.
  - <u>009.05C5</u> If the parties resolve a dispute through the mediation process, the parties must execute a legally binding agreement that sets forth that resolution and that:
    - <u>009.05C5a</u> States that all discussions that occurred during the mediation process will remain confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding; and
    - <u>009.05C5b</u> Is signed by both the parent and a representative of the school district or approved cooperative who has the authority to bind such school district or approved cooperative.
  - <u>009.05C6</u> A written signed mediation agreement under 92 NAC 52-009.05C5 is enforceable in any State court of competent jurisdiction or in a district court of the United States.
  - <u>009.05C7</u> Discussions that occur during the mediation process must be confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding of any Federal court or State court of Nebraska.
  - <u>009.05D</u> An individual who serves as a mediator under 92 NAC 52:
    - <u>009.05D1</u> May not be an employee of the co-lead agencies or an early intervention provider that is involved in the provision of early intervention services or other services to the child; and
      - <u>009.05D1a</u> A person who otherwise qualifies as a mediator is not an employee of the co-lead agencies or an early intervention provider solely because he or she is paid by the co-lead agencies or provider to serve as a mediator.
    - <u>009.05D2</u> Must not have a personal or professional interest that conflicts with the person's objectivity.
  - <u>009.05E</u> School districts and approved cooperatives may offer to parents that choose not to use the mediation process an opportunity to meet, at a time and location convenient to the parents, with a disinterested party:

- <u>009.05E1</u> Who is under contract with an appropriate alternative dispute resolution entity, or a parent training and information center or community parent resource center established under section 671 or 672 of the IDEA; and
- <u>009.05E2</u> Who would explain the benefits of, and encourage the use of, the mediation process to the parents.

#### 009.06 Complaints

- <u>009.06A</u> An organization or individual may file a signed written complaint under the procedures described in 92 NAC 52-009.06.
- <u>009.06B</u> The complaint must include:
  - <u>009.06B1</u> A statement that a public agency has violated a requirement of 92 NAC 52;
  - <u>009.06B2</u> The facts on which the statement is based;
  - <u>009.06B3</u> The signature and contact information for the complainant; and
  - <u>009.06B4</u> If alleging violations with respect to a specific child:
    - <u>009.06B4a</u> The name and address of the residence of the child;
    - <u>009.06B4b</u> The name of the school district or approved cooperative serving the child;
    - <u>009.06B4c</u> A description of the nature of the problem of the child, including facts relating to the problem; and
    - <u>009.06B4d</u> A proposed resolution of the problem to the extent known and available to the party at the time the complaint is filed.
  - <u>009.06B5</u> The complaint must allege a violation that occurred not more than one year prior to the date that the complaint is received.
  - <u>009.06B6</u> The party filing the complaint must forward a copy of the complaint to the public agency serving the child at the same time the party files the complaint with the Nebraska Department of Education.
- <u>009.06C</u> Within 60 days of receipt of a complaint meeting the requirements of 92 NAC 52-009.06B the Nebraska Department of Education will:
  - <u>009.06C1</u> Carry out an independent on-site investigation, if the Nebraska Department of Education determines that an investigation is necessary;
  - <u>009.06C2</u> Give the complainant the opportunity to submit additional information, either orally or in writing, about the allegations in the complaint;
  - <u>009.06C3</u> Provide the public agency with an opportunity to respond to the complaint, including, at a minimum:
    - <u>009.06C3a</u> At the discretion of the Nebraska Department of Education, a proposal to resolve the complaint; and

- <u>009.06C3b</u> An opportunity for a parent who has filed a complaint and the public agency to voluntarily engage in mediation, consistent with 92 NAC 52-009.05;
- <u>009.06C4</u> Review all relevant information and make an independent determination as to whether the public agency is violating a requirement of 92 NAC 52; and
- <u>009.06C5</u> Issue a written decision to the complainant that addresses each allegation in the complaint and contains:
  - 009.06C5a Findings of fact and conclusions; and
  - <u>009.06C5b</u> The reasons for the Nebraska Department of Education's final decision.
  - <u>009.06C5c</u> If the Nebraska Department of Education finds a failure to provide appropriate services the final decision must include corrective actions appropriate to address the needs of the infant or toddler with a disability who is the subject of the complaint and the infant's or toddler's family including technical assistance activities, negotiations, and corrective actions to achieve compliance.
- <u>009.06D</u> The Nebraska Department of Education will permit an extension of the time limit under 92 NAC 52-009.06C only if:
  - <u>009.06D1</u> Exceptional circumstances exist with respect to a particular complaint; or
  - <u>009.06D2</u> The parent or individual and the public agency involved agree to extend the time to engage in mediation pursuant to 92 NAC 52-009.06C3b.
- <u>009.06E</u> Complaints which are also the subject of a due process hearing
  - <u>009.06E1</u> If a written complaint is received that is also the subject of a due process hearing under 92 NAC 55, or contains multiple issues of which one or more are part of that hearing, the Nebraska Department of Education shall set aside any part of the complaint that is being addressed in the due process hearing until the conclusion of the hearing. However, any issue in the complaint that is not a part of the due process hearing must be resolved using the time limit and procedures described in 92 NAC 52-009.06C and D.
  - <u>009.06E2</u> If an issue raised in a complaint filed under 92 NAC 52-009.06 has previously been decided in a due process hearing involving the same parties the due process hearing decision is binding on that issue and the Nebraska Department of Education must inform the complainant to that effect.
  - <u>009.06E3</u> A complaint alleging a public agency's failure to implement a due process hearing decision must be resolved by the Nebraska Department of Education.

- 009.07 Due Process Complaint
  - <u>009.07A</u> A parent, school district, approved cooperative, or Co-Lead agency may file a due process complaint under 92 NAC 55 relating to the proposal or refusal of a school district or approved cooperative to initiate or change the identification, evaluation, or placement of an infant or toddler under 92 NAC 52 or the provision of FAPE early intervention services to the infant or toddler with a disability and that infant's or toddler's family under 92 NAC 52.
  - <u>009.07B</u> The due process complaint must allege a violation of 92 NAC 52 that occurred not more than two years before the date the parent or school district or approved cooperative knew, or should have known, about the alleged action that forms the basis of the due process complaint.
    - <u>009.07B1</u> The time limitation in 92 NAC 52-009.07B does not apply to a parent if the parent was prevented from filing a due process complaint due to the following:
      - <u>009.07B1a</u> Specific misrepresentations by a Co-Lead agency or school district or approved cooperative that it had resolved the problem forming the basis of the due process complaint; or
      - <u>009.07B1b</u> A Co-Lead agency's, school district's, or approved cooperative's failure to provide the parent information that was required under 92 NAC 52 to be provided to the parent.
  - <u>009.07C</u> The school district or approved cooperative shall inform the parent of any free or low-cost legal or other relevant services available in the area if the parent requests the information or if the parent or school district or approved cooperative files a due process complaint under this subsection.
  - <u>009.07D</u> Whenever a due process complaint is received the parents or the early intervention service provider involved in the dispute have the opportunity for an impartial due process hearing, consistent with the procedures in 92 NAC 55.
  - <u>009.07E</u> During the pendency of any proceeding involving a due process complaint under 92 NAC 55, unless the school district or approved cooperative and parents of an infant or toddler with a disability otherwise agree, the child must continue to receive the appropriate FAPE early intervention services in the setting identified in the IFSP that was consented to by the parents.
  - <u>009.07F</u> If the due process complaint under 92 NAC 55 involves an application for initial services under 92 NAC 52, the child must receive those services that are not in dispute.

### 009.08 Resolution Process

- <u>009.08A</u> The Resolution Meeting
  - <u>009.08A1</u> Within 15 days of receiving notice of the parent's due process complaint, and prior to the initiation of a due process hearing, the school district or approved cooperative must convene a meeting with the parent and the relevant member or members of the IFSP Team who have specific knowledge of the facts identified in the due process complaint that:

- <u>009.08A1a</u> Includes a representative of the school district or approved cooperative who has decision-making authority on behalf of that agency; and
- <u>009.08A1b</u> May not include an attorney of the school district or approved cooperative unless the parent is accompanied by an attorney.
- <u>009.08A2</u> The purpose of the resolution meeting is for the parent of the child to discuss the due process complaint, and the facts that form the basis of the due process complaint so that the school district or approved cooperative has the opportunity to resolve the dispute that is the basis for the due process complaint.
- 009.08A3 The meeting described in 92 NAC 52-009.08A1 and 009.08A2 need not be held if:
  - <u>009.08A3a</u> The parent and school district or approved cooperative agree in writing to waive the meeting; or
  - <u>009.08A3b</u> The parent and school district or approved cooperative agree to use the mediation process described in 92 NAC 52-009.05.
- <u>009.08A4</u> The parent and the school district or approved cooperative must determine the relevant members of the IFSP Team to attend the meeting.
- 009.08B Resolution Period
  - <u>009.08B1</u> If the school district or approved cooperative has not resolved the due process complaint to the satisfaction of the parties within 30 days of the receipt of the due process complaint, the due process hearing may occur.
  - <u>009.08B2</u> Except as provided in 92 NAC 52-009.08C, the timeline for issuing a final decision under 92 NAC 55 begins at the expiration of the 30-day period in 92 NAC 52-009.08B1.
  - <u>009.08B3</u> Except where the parties have jointly agreed to waive the resolution process or to use mediation, notwithstanding 92 NAC 52-009.08B1 and 009.08B2, the failure of the parent filing a due process complaint to participate in the resolution meeting will delay the timelines for the resolution process and due process hearing until the meeting is held.
  - <u>009.08B4</u> If the school district or approved cooperative is unable to obtain the participation of the parent in the resolution meeting after reasonable efforts have been made, including documenting its efforts, the school district or approved cooperative may, at the conclusion of the 30-day period, request that the hearing officer dismiss the parent's due process complaint.
  - <u>009.08B5</u> If the school district or approved cooperative fails to hold the resolution meeting specified in 92 NAC 52-009.08A within 15 days of receiving notice of a parent's due process complaint or fails to participate in the resolution meeting, the parent may seek the intervention of a hearing officer to begin the due process hearing timeline.

- <u>009.08C</u> The 45-day timeline for the due process hearing described in 92 NAC 55 starts the day after one of the following events:
  - <u>009.08C1</u> Both parties agree in writing to waive the resolution meeting;
  - <u>009.08C2</u> After either the mediation or resolution meeting starts but before the end of the 30-day period, the parties agree in writing that no agreement is possible; or
  - <u>009.08C3</u> If both parties agree in writing to continue the mediation at the end of the 30-day resolution period, but later, the parent or school district or approved cooperative withdraws from the mediation process.
- 009.08D If a resolution to the dispute is reached at the meeting described in 92 NAC 52-009.08A1 and 009.08A2, the parties must execute a legally binding agreement that is:
  - <u>009.08D1</u> Signed by both the parent and a representative of the school district or approved cooperative who has the authority to bind the agency; and
  - <u>009.08D2</u> Enforceable in any State court of competent jurisdiction or in a district court of the United States.
- <u>009.08E</u> If the parties execute an agreement pursuant to 92 NAC 52-009.08D, a party may void the agreement within three business days of the agreement's execution.

# 010 Qualifications of Early Intervention Personnel for Program Approval and Reimbursement

<u>010.01</u> School districts and approved cooperatives that provide FAPE early intervention services shall ensure that all personnel necessary to carry out the school district's or approved cooperative's responsibilities under 92 NAC 52 are appropriately and adequately prepared and trained as required by 92 NAC 51-010, including those personnel that have content knowledge and skills to serve infants and toddlers with disabilities.

- 011 Use of Funds for FAPE early intervention services
  - 011.01 General Information
    - <u>011.01A</u> Pursuant to the provision of 92 NAC 51-011, IDEA Part B funds are available to provide FAPE services to infants and toddlers with verified disabilities from date of diagnosis until August 31 following their third birthday.
  - 011.02 General Limitation in Budget Development
    - <u>011.02A</u> Except as provided in 92 NAC 52-007.05, only infants and toddlers with a verified disability shall receive FAPE early intervention services. This shall include the initial evaluation of an infant or toddler with a suspected disability regardless of the outcome of the verification decision.
    - <u>011.02B</u> Pursuant to <u>Neb. Rev. Stat.</u> §79-1126, an infant or toddler with a disability under the age of three (or any subset of infants and toddlers with disabilities under the age of three), the school district or approved cooperative may not charge the parents of the infant or toddler with a disability for any services that are part of FAPE for that infant or toddler and the child's family, and those FAPE services must meet the requirements of both Parts B and C of the Individuals with Disabilities Education Act (IDEA).
    - <u>011.02C</u> Special Education Assurances and the IDEA Consolidated Application of a school district for providing services to infants and toddlers with disabilities shall be submitted annually via the NDE website to the Office of Special Education. Any amendment to the Assurances or the IDEA Consolidated Application shall be subject to the same review as the initial assurances and funding application.
      - <u>011.02C1</u> The fiscal year for FAPE early intervention services shall be September 1 to August 31.
    - <u>011.02D</u> The allowable and reimbursable costs for FAPE early intervention services as budgeted within the IDEA Consolidated Application are restricted to the items specified in 92 NAC 51-011.01B, which shall be documented and are subject to audit.
  - 011.03 Use of Public Benefits or Public Insurance to Pay for FAPE early intervention services
    - <u>011.03A</u> A school district or approved cooperative may not use the public benefits or insurance of a child or parent to pay for FAPE early intervention services unless the school district or approved cooperative provides written notification, consistent with 92 NAC 52-011.03C, to the child's parents, and the school district or approved cooperative meets the no-cost protections identified in 92 NAC 52-011.03B.
    - <u>011.03B</u> With regard to using the public benefits or insurance of a child or parent to pay for FAPE early intervention services, the school district or approved cooperative:
      - <u>011.03B1</u> May not require a parent to sign up for or enroll in public benefits or insurance programs as a condition of receiving FAPE early intervention services and must obtain consent prior to using the public benefits or insurance of a child or parent if that child or parent is not already enrolled in such a program;
      - <u>011.03B2</u> Must obtain consent, consistent with 92 NAC 52-003.04 and 92 NAC 52-009.03A2b to use a child's or parent's public benefits or insurance to pay for FAPE early intervention services if that use would:

- <u>011.03B2a</u> Decrease available lifetime coverage or any other insured benefit for that child or parent under that program;
- <u>011.03B3b</u> Result in the child's parents paying for services that would otherwise be covered by the public benefits or insurance program;
- <u>011.03B3c</u> Results in any increase in premiums or discontinuation of public benefits or insurance for that child or that child's parents; or
- <u>011.03B3d</u> Risk loss of eligibility for the child or that child's parents for home and community-based waivers based on aggregate health-related expenditures.
- <u>011.03B3</u> If the parent does not provide consent under 92 NAC 52-011.03B1 or 011.03B2, the school district or approved cooperative must still make available those FAPE early intervention services on the IFSP to which the parent has provided consent.
- <u>011.03C</u> Prior to using a child's or parent's public benefits or insurance to pay for FAPE early intervention services, the school district or approved cooperative must provide written notification to the child's parents that includes:
  - <u>011.03C1</u> A statement that parental consent must be obtained under 92 NAC 52-009.02K, if that provisions applies, before the school district, approved cooperative, or EIS provider discloses, for billing purposes, a child's personally identifiable information to the Department of Health and Human Services that is responsible for the administration of the public benefits or insurance program (e.g., Medicaid);
  - <u>011.03C2</u> A statement of the no-cost protection provisions in 92 NAC 52-011.03B and that if the parent does not provide the consent under 92 NAC 52-011.03B, the school district or approved cooperative must still make available those FAPE early intervention services on the IFSP for which the parent has provided consent;
  - <u>011.03C3</u> A statement that the parents have the right under 92 NAC 52-009.02K, if that provision applies, to withdraw their consent to disclosure of personally identifiable information to DHHS, the agency that is responsible for the administration of the public benefits or insurance program (e.g., Medcaid), at any time; and
  - <u>011.03C4</u> A statement of the general categories of costs that the parent would incur as a result of participating in a public benefits or insurance program (such as co-payments or deductibles, or the required use of private insurance as the primary insurance).
- <u>011.04</u> Use of private insurance to pay for Part C services
  - <u>011.04A</u> The school district or approved cooperative may not use the private insurance of a parent or toddler with a disability to pay for FAPE early intervention services unless the parent provides parental consent, consistent with 92 NAC 52-003.04 and 92 NAC 52-009.03A2b, to use private insurance to pay for FAPE early intervention services for his or her child.
    - 011.04A1 Parental consent must be obtained:
      - <u>011.04A1a</u> When the school district or approved cooperative or EIS provider seeks to use the parent's private insurance or benefits to pay for the initial provision of an early intervention service in the IFSP; and

<u>011.04A1b</u> Each time consent for services is required under 92 NAC 52-009.03A1c due to an increase (in frequency, length, duration, or intensity) in the provision of services in the child's IFSP.

## 012 Transportation for Infants and Toddlers with Disabilities and Families

- 012.01 Responsibility for Transportation
  - <u>012.01A</u> The school district shall provide transportation and related costs that are necessary to enable an infant or toddler with a disability to receive FAPE early intervention services pursuant to <u>Neb. Rev. Stat.</u> §79-1129 by:
    - <u>012.01A1</u> Paying a parent for transporting his or her infant and toddler for actual miles traveled and claimed; or
    - <u>012.01A2</u> Operating vehicles for the purpose of transporting infants and toddlers with disabilities; and
    - <u>012.01A3</u> Contracting for transportation services for infants and toddlers with disabilities; or
    - 012.01A4 Purchasing services from a common carrier; or
    - <u>012.01A5</u> Arranging for such other transportation as is proper and necessary to transport infants and toddlers with disabilities.
  - <u>012.01B</u> The school district shall select an efficient and effective means of transportation for the infant or toddler with a disability at a reasonable cost.
  - <u>012.01C</u> The school district shall not be relieved of the obligation to provide transportation for an eligible infant or toddler with a disability because of the inability or unwillingness of the parents to provide transportation. No eligible infant or toddler may be denied or have limitations placed on the infant's or toddler's receipt of FAPE early intervention services required by an IFSP as a result of the inability or unwillingness of the parents to provide transportation.
- 012.02 Allowable Expenses
  - <u>012.02A</u> The school district shall provide for expenses equal to the statutory amount under <u>Neb. Rev. Stat.</u> §81-1176 for each mile or fraction thereof traveled between the place of residence and the location of the FAPE early intervention service when a parent transports his or her infant or toddler with a disability.
  - <u>012.02B</u> The school district shall provide for the transportation expenses of infants and toddlers with disabilities transported by the parents of such infants and toddlers, upon receipt of claims submitted to the school district by the parents. Such claims shall be documented and subject to audit pursuant to 92 NAC 51-014.03.