Infant & Toddler Connection of Virginia Practice Manual

Date	Chapter	Change Description
7/21	7	Clarified how sign language, cued speech and listening and spoken language services should be listed on the Individualized Family Service Plan (IFSP)
	11	Eliminated the reference to specific dollar figures for the fixed allowable amounts on the fee appeal form. Since these amounts will change over time, the specific dollar amounts are detailed on the Fee Appeal Form, which has been revised to reflect updated costs.
	12	Clarified what disciplines can provide sign language, cued speech and listening and spoken language services. Streamlined the requirements associated with ongoing professional development for certified early intervention practitioners, including eliminating requirement to maintain a Professional Development Plan and reducing the minimum length of a professional development activity. The Early Intervention Training Record form has been revised accordingly and to reduce the amount of information practitioners must document regarding each professional development activity they complete
9/18	3	Clarified the late referral timeline that allows the local early intervention system to refer the child directly to the local school division – Reprint pages 6 - 7
	6	Specified expectations associated with required use of the Decision Tree - Reprint pages 7 - 14
	7	Moved details regarding transition activities to Chapter 8 - Reprint pages 37 to the end. Please note: Due to the extensive re-work involved in combining and attempting to clarify language in Chapters 7 and 8 related to transition, no track changes version was created
	8	Combined transition information from Chapters 7 and 8; Specified expectations associated with required use of the Decision Tree at exit ; Added the timelines to follow if a child's EI benefit is dropped in the Medicaid VaMMIS system - Reprint pages 26 to the end. Please note: Due to the extensive re-work involved in combining and attempting to clarify language in Chapters 7 and 8 related to transition, no track changes were used in that section
	11	Added the timelines to follow if a child's El benefit is dropped in the Medicaid VaMMIS system – Reprint pages 8 - 14, 30 - 33
9/17	7	Clarified requirements related to the timing of transition notification/referral and where those discussions and decisions need to be documented; clarified requirements related to transition conferences for children not potentially eligible for Part B – Reprint pages 36 to end of chapter
	8	Clarified requirements related to the timing of transition notification/referral and where those discussions and decisions

		need to be documented; clarified requirements related to transition
		conferences for children not potentially eligible for Part B – Reprint pages 27 – end of chapter
	11	Revised release of information requirements related to CCC-Plus – Reprint pages 15 -19 and 23 – 27
6/17	12	Added fidelity assessment requirements; updated names of El Certification courses, timeline for Kaleidoscope – Reprint all pages
5/17	11	Updated Medicaid procedure code for Nursing – Reprint pages 35 and 38
4/17	3	Clarified that IFSP Review not needed in order for services to start in new local system when child transfers - Reprint page 4
	8	Revised instructions regarding discharge reasons when the parent feels their child has reached age level; revised language to be consistent with coaching – Reprint pages 2, 12-19
	9	Contact note checklist revised to clarify that "Title" means provider discipline and credentials, consistent with information on page 5 of the chapter – Reprint page 9
10/16	4	Corrected instruction for what to enter in ITOTS when the family states more than one race for their child – Reprint page 5
	9	Revised Contact Note Checklist – Reprint page 9
	11	Corrected the reference to quarterly revenue reports and clarified language about Medicaid reimbursement for eligibility determination – Reprint 6-19
4/1/16	3	Changed <i>child indicators</i> to <i>child outcomes</i> – Optional to reprint (pages 3 and 9) since change is not substantive
	4	Changed <i>child indicators</i> to <i>child outcomes</i> – Optional to reprint (pages 7-10) since change is not substantive
	5	Changed <i>child indicators</i> to <i>child outcomes</i> ; clarified eligibility in relation to articulation – Optional to reprint (pages 4 and 12-15) since changes are not substantive
	6	Changed <i>child indicators</i> to <i>child outcomes</i> – Optional to reprint (all pages) since change is not substantive
	7	Changed <i>child indicators</i> to <i>child outcomes</i> ; change in practice related to planning service frequency – Must reprint at least pages 30-35; optional to reprint changes in terminology (pages 1-4, 9, 13-14, 16, 18-26, 28, 41, 45, 47, 49, 51-52, Index) since change is not substantive
	8	Changed <i>child indicators</i> to <i>child outcomes</i> ; revised information about exit ratings – Must reprint pages 32-end; optional to reprint changes in terminology (pages 1-2, 7, 9-14, 17, 20, 22-23, 26) since change is not substantive
	9	Change in practice related to planning and documenting service frequency – Reprint pages 4 – end of chapter
	11	Clarified references to EIPs, EIS, others in reimbursement tables – Optional to reprint (pages 35-37) since change is not substantive

	Glossary	Updated definitions to reflect change from <i>child indicators</i> to <i>child outcomes</i> – Reprint pages 2-6
7/15/15	3	Clarified parent consent requirement for transfer between local systems - Reprint pages 6-10
	4	Revised wording related to Indicator 3c to ensure consistency – Reprint pages 7-10
	5	Revised wording related to Indicator 3c to ensure consistency; clarified requirements and definitions in several sections – Reprint pages 2-11, 13-19, 23
	6	Revised wording related to Indicator 3c to ensure consistency – Reprint pages 1-9
	7	Revised wording related to Indicator 3c to ensure consistency; clarified requirements regarding physician certification and sharing IFSP with providers – Reprint pages 1-2, 7– end of chapter to keep page numbering correct and catch all changes
	8	Revised wording related to Indicator 3c to ensure consistency; clarified requirements regarding physician certification and determining continued eligibility – Reprint pages 8-19, 22-23, 33 – end of chapter
	12	Revised requirement for minimum hours per training activity; revised practitioner requirements table to be consistent with state regulations for Part C and current DOE licensure names – Reprint pages 6-8, 10-14
	Glossary	Revised definitions as needed to match those in the state regulations for Part C – Reprint all pages
10/29/14	3	Added information on referrals received through VISITS – Reprint pages 1-10, 13-14
	5	Revised to clarify requirements for Eligibility Determination Form – Reprint pages 6-9
	7	Revised requirements associated with parent choice of provider and transition notification, as required by OSEP – Reprint pages 11 to the end; reprint page 1 if you want an updated table of contents for the chapter
	8	Revised requirements associated with transition notification, as required by OSEP – Reprint pages 28 to the end
	11	Revised information about program income, as required by OSEP, and clarified information in billing table – Reprint pages 2-19 and last page before index; reprint page 1 if you want an updated table of contents for the chapter
	12	Deleted notice to practitioner after certification expires since this function is not working in ITOTS – Reprint page 4
2/28/14	1	Replaced principles with mission, purpose and 7 key principles (see Track Changes) - Reprint
	3	Added information on parental rights for same-sex couples; added chapter index at end of chapter (see Track Changes) – Reprint pages 7-10 for content; reprint page 1 if you want an updated table of contents for the chapter; print index if desired
	4	Revised to address use of texting as method of contact for EI TCM; clarified use of records for determining eligibility; added chapter index at end of chapter (see Track Changes) – Reprint

		pages 4-10 for content; reprint page 1 if you want an updated table of contents for the chapter; print index if desired
	5	Added chapter index at end of chapter – Print index if desired
	6	Added chapter index at end of chapter – Print index if desired
	7	Revised to clarify a number of issues that have been discussed
		since the 2013 manual revision; added chapter index at end of
		chapter (see Track Changes) – Reprint pages 7, 19-24, 29-38, 43,
		46, 49 for content; reprint page 1 if you want an updated table of
		contents for the chapter; print index if desired
	8	Revised to address changes related to texting, inactive status, exit
	-	indicators, and other clarifications; added chapter index at end of
		chapter (see Track Changes) - Reprint pages 3-16, 26-37 for
		content; reprint page 1 if you want an updated table of contents for
		the chapter; print index if desired
	9	Revised to address change related to texting and to clarify
	U	documentation requirements when service delivered differs from
		that listed on IFSP; added chapter index at end of chapter (see
		Track Changes) - Reprint pages 4-7 for content; reprint page 1 if
		you want an updated table of contents for the chapter; print index
		if desired
	10	Revised to address changes related to inactive status; added
	10	chapter index at end of chapter (see Track Changes) - Reprint
		pages 2-5 for content; print index if desired
	11	Revised to clarify child not required at IFSP review meeting and to
	11	address issues identified through QMR; changes related to
		texting, TPL for service coordination, inactive status; added
		chapter index at end of chapter (see Track Changes) - Reprint
		pages 1-21, 23-32, 34-39 for content; reprint page 1 if you want an
		updated table of contents for the chapter; print index if desired
	12	Added chapter index at end of chapter – Print index if desired
4/29/13	12	Changed "Part C" to "early intervention" (see Track Changes) –
4/29/13	I	Reprint page 1
	2	Changed "Part C" to "early intervention" (see Track Changes) –
		Reprint page 1
	3	Revised to integrate child indicators; changed "Part C" to "early
		intervention" (see Track Changes) – Reprint pages 3-9, 11-12
	4	Revised to integrate child indicators; updated EI TCM
		documentation requirements; changed "Part C" to "early
		intervention" (see Track Changes) – Reprint all pages except page
		1
	5	Revised to integrate child indicators; changed "Part C" to "early
	-	intervention" or "ITC" (see Track Changes) – Reprint pages 1, 6-7,
		10-11, 15-16, 18
	6	Revised to integrate child indicators; changed "Part C" to "early
	-	intervention" or "ITC" (see Track Changes) – Reprint entire
		chapter
	7	Revised to integrate child indicators; revised IFSP instructions;
	•	revised requirements for assessments after the initial; changed
		"Part C" to "early intervention" or "ITC" (see Track Changes) –
		Reprint all pages <i>except</i> pages 2-3, 7-8, 10

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	8	Revised to integrate child indicators; revised requirements for
		assessments after the initial; updated EI TCM requirements;
		changed "Part C" to "early intervention" or "ITC" (see Track
		Changes) – Reprint all pages except page 5
	9	Updated and clarified EI Record and contact note requirements;
		changed "Part C" to "early intervention" or "ITC" (see Track
		Changes) – Reprint pages 1-3, 5-8
	10	Changed "Part C" to "early intervention" (see Track Changes) –
		Reprint page 1
	11	Changed "Part C" to "early intervention" or "ITC;" updated some
		Medicaid requirements (see Track Changes) – Reprint pages 1-2,
		5-7, 14, 22-25, 27-30, 32
	12	Changed "Part C" to "early intervention" or "ITC;" clarified
		supervision requirements (see Track Changes) – Reprint all pages
		except page 4.
10/10/12	4	Revised to require use of screening tool in all areas of
		development for eligibility determination (see Track Changes) -
		Reprint page 6 to end of chapter
	5	Revised to require that eligibility determination must include
	•	identifying level of functioning in all areas (see Track Changes) –
		Reprint pages 3-4, 6-7
	8	Deleted requirement for multidisciplinary team at IFSP Review
	U	(see Track Changes) – Reprint pages 12-14
	9	Updated TCM documentation requirements (see Track Changes) -
	0	Reprint pages 6, 10
	10	Updated Notice of Action requirements (see Track Changes) -
	10	Reprint page 1
	11	Eliminated requirement for child to be present in order to get
		Medicaid reimbursement for IFSP meetings; updated TCM
		documentation requirements (see Track Changes) – Reprint
		pages 5, 23-25.
	12	Revised requirement to submit training record (see Track
	12	Changes) – Reprint page 6
6/29/12	3	Multiple changes to address new federal Part C regulations (see
0/23/12	5	Track Changes)
	4	Multiple changes to address new federal Part C regulations (see
	4	Track Changes)
	5	Multiple changes to address new federal Part C regulations (see
	5	Track Changes)
	6	
	0	Multiple changes to address new federal Part C regulations (see
	7	Track Changes)
	1	Multiple changes to address new federal Part C regulations (see
	0	Track Changes)
	8	Multiple changes to address new federal Part C regulations (see
		Track Changes)
	9	Multiple changes to address new federal Part C regulations (see
		Track Changes)
	10	Multiple changes to address new federal Part C regulations (see
		Track Changes)
	11	Multiple changes to address new federal Part C regulations and

		Medicaid updates (see Track Changes)
	Glossary	Multiple changes to address new federal Part C regulations (see Track Changes)
8/17/11	3	Updates in ITOTS Data Entry section (see Track Changes)
	4	Multiple changes related to EI TCM (see Track Changes)
	5	Few changes in ITOTS Data Entry and Local Monitoring and Supervision sections related to EI TCM and other updates (see Track Changes)
	6	Multiple changes related to EI TCM and clarifications from Q&As (see Track Changes)
	7	Multiple changes related to EI TCM and clarifications from Q&As (see Track Changes)
	8	Multiple changes related to EI TCM and clarifications from Q&As (see Track Changes)
	9	Multiple changes related to EI TCM and clarifications from Q&As (see Track Changes)
	10	Clarification on pages 1-2 related to Medicaid Notice of Action letter (see Track Changes)
	11	Multiple changes related to EI TCM and clarifications from Q&As (see Track Changes)
	12	Multiple changes related to EI TCM, other updates and clarification (see Track Changes)