State of Connecticut
REGULATION
of

Department of Developmental Services

Concerning

Early Intervention Services for Infants and Toddlers and Their Families

Sec. 17a-248-1. Definitions

As used in section 17a-248-1 to section 17a-248-10, inclusive, of the Regulations of Connecticut State Agencies:
(1) ‘‘Administrative proceeding’’ means a formal procedure before an impartial decision maker appointed to hear evidence and render a decision final and binding on the parties unless reversed or modified on appeal.
(2) ‘‘Birth to Three System’’ means the statewide, comprehensive, coordinated, multidisciplinary, interagency system that provides early intervention services for infants and toddlers with disabilities and their families.
(3) ‘‘Days’’ means calendar days.
(4) ‘‘Diagnosed condition expected to lead to a developmental delay’’ means those conditions, diagnosed by a physician, audiologist or speech pathologist, that are designated by the lead agency as having a high probability of resulting in a developmental delay.
(5) ‘‘Director’’ means the person designated by the commissioner of the lead agency as the person responsible for all statewide aspects of the Birth to Three System.
(6) ‘‘Impartial decision maker’’ means the person duly designated for the purpose of conducting an administrative proceeding pursuant to [34 CFR 303.421 to 303.425, inclusive.] 34 CFR 303.430 to 303.432, inclusive.
(7) ‘‘Individualized Family Service Plan’’ or ‘‘IFSP’’ means a written plan for providing early intervention services to an eligible child and the child’s family.
(8) ‘‘Interim IFSP’’ means a temporary plan developed with parental consent for a child with a known developmental delay or disability who has apparent immediate needs for early intervention service delivery between initial identification of the child’s needs and the completion of the multidisciplinary evaluation and assessment. The interim IFSP shall include the name of the service coordinator and the early intervention services that have been determined to be needed immediately.
(9) ‘‘Lead agency’’ means the Department of Developmental Services, the public agency responsible for the administration of the birth-to-three system in collaboration with the participating agencies.
(10) ‘‘Mediation’’ means a voluntary, non-adversarial process by which a parent of a child and an early intervention program are assisted by a trained mediator [that] who has been designated by the lead agency to provide mediation services to reach agreement regarding eligibility, the provision of early intervention services, or the failure of an early intervention program to act within a period required by 34 CFR 303.423.
(11) ‘‘Parent’’ has the same meaning as provided in section 17a-248 of the Connecticut General Statutes.
(12) ‘‘Personally identifiable’’ means information which includes, but is not limited to, (A) the name of the child, the parent, or other family member; (B) the address of the child, the [parent] parent, or other family member; (C) a personal identifier, such as the social security number of the child, parent, or other family member; (D) a list or description of personal or physical characteristics or other

information that would make it possible to identify the child, the [parent] parent, or other family member with reasonable certainty.
(13) ‘‘Program’’ means an agency providing comprehensive, early intervention services to eligible children operated by, under contract with, or through an interagency agreement with the lead agency.
(14) ‘‘Record’’ means any information recorded in any way, maintained by a Birth to Three state-operated program, Birth to Three contractor or lead agency personnel. A record shall include any information recorded in any way including, but not limited to, handwriting, print, electronic, tape, film, microfilm, or microfiche.
(15) ‘‘Service coordination’’ means activities that assist and enable an eligible child and the child’s parent to understand a child’s rights and the procedural safeguards afforded by the Birth to Three System and to receive services that are authorized by the Birth to Three System.
(16) ‘‘Significant developmental delay’’ means the child’s scores on an appropriate norm-referenced standardized diagnostic instrument are (A) two standard deviations below the mean in one area of development; or (B) one and one-half standard deviations below the mean in at least two areas of development. When the use of the standardized diagnostic instrument is not appropriate due to a child’s age or when a child requires significant adaptation to perform on a standardized instrument, the evaluator may substitute another procedure.
(17) ‘‘Surrogate parent’’ means a person appointed or designated to act as a parent for the child for the Birth to Three System, when a child’s parents are unknown or unavailable.

Sec. 17a-248-2. Referrals

(a) All referrals shall be made through a single point of referral designated by the lead agency.
(b) Referrals made by an agency or by a person other than a child’s parent shall include sufficient information to contact the child’s parent. A child’s parent shall give verbal consent before a referral can be made to the Birth to Three System.

Sec. 17a-248-3. Eligibility

A child shall be eligible for the Birth to Three System, if the child is:
(1) experiencing a significant developmental delay in one or more of the following areas:
(A) cognitive development;
(B) physical development, including vision or hearing;
(C) communication development;
(D) social or emotional development;
(E) adaptive skills; or
(2) diagnosed as having a physical or mental condition that has a high probability of resulting in a significant developmental delay.

Sec. 17a-248-4. Surrogate parents

(a) The program shall protect the right of a parent to make decisions about the child’s early intervention services, unless (1) the child is committed to the care of the Commissioner of Children and Families; (2) no parent can be identified; or (3) the Department of Children and Families cannot, after reasonable efforts, discover the whereabouts of a parent of the child.
(b) The director or the director’s designee shall determine whether a child requires a surrogate parent.
(c) The director or the director’s designee shall select a surrogate parent who is willing to serve in such capacity and who:
(1) has no personal or professional interest that conflicts with the interests of the child;
(2) has knowledge and skills that ensure adequate representation of the child;

(3) is not an employee of any state agency;
(4) is not a person or employee of a person providing early intervention services to the child or to any family member of the child; or
(5) is not an employee of an agency caring for the child.
(d) A person who is paid to serve as a surrogate parent shall not be deemed to be an employee of a state agency.
(e) The program shall afford a surrogate parent the same rights and responsibilities as accorded to a parent by the Birth to Three System and shall represent a child in all matters related to:
(1) evaluation of the child;
(2) development and implementation of the Individualized Family Service [Plan,] Plan (IFSP), including annual evaluations and periodic reviews;
(3) the ongoing provision of early intervention services;
(4) the right to request mediation or an administrative proceeding in the event of a dispute; and
(5) any other rights established in the Birth to Three System.
(f) A surrogate parent shall maintain the confidentiality of all information regarding the child, including written records in accordance with 34 CFR 99.2 to 99.37, inclusive.
(g) The lead agency shall develop a procedure for recruitment of qualified persons to serve as surrogate parents including, but not limited to, the recruitment of parents of children with disabilities to serve as surrogate parents.
(h) The lead agency, in collaboration with interested organizations, shall ensure that qualified persons receive training in the developmental needs, service options and rights of a child eligible for early intervention services and shall maintain a list of [individuals] persons who have received such training.
(i) The director or the director's designee shall terminate the appointment of a surrogate parent in the event that:
(1) the surrogate parent is no longer willing or available to participate in that capacity;
(2) the child is no longer in the custody of the Commissioner of Children and Families;
(3) a parent becomes available; [or,] or
(4) the surrogate parent fails to fulfill a surrogate parent's duties.
(j) When a termination of an appointment as a surrogate parent is due to the failure to fulfill a surrogate parent's duties, the surrogate parent may request in writing, a review of the termination, not later than ten (10) days after the date of receipt of the notice of termination of appointment. Not later than twenty (20) days after the date of receipt of the surrogate parent's request for review of the termination of appointment, the director or the director's designee shall send the [individual] surrogate parent written notice that [the] his or her surrogate parent appointment has been reinstated or that the termination of the appointment has been upheld.
(k) In the event that the surrogate parent's appointment is terminated and the child continues to require the assistance of a surrogate parent, the director or the director's designee shall appoint a surrogate parent.
(l) Upon review of a child's [Individualized Family Service Plan (IFSP),] IFSP and, at a minimum, upon annual review, the program shall determine whether any change in circumstances warrants review of the appointment of the child's surrogate parent. If the program determines that circumstances warrant the termination of the appointment of a child's surrogate parent and the appointment of a new surrogate parent for the child, the program shall make a request to the director or the director's designee, who shall take action to make the change in consultation with the Commissioner of Children and Families or other state agency, when appropriate.
(m) When a child enrolled in the Birth to Three System is turning three years of age and may be eligible for preschool special education services, the surrogate parent may give consent for the referral to the school district responsible for the child's education and for the child's initial evaluation

by that school district. The local school district shall then request the appointment of a surrogate parent for the child from the State Department of Education (SDE).

Sec. 17a-248-5. Notice of parental rights

(a) Upon the first contact with the single point of referral for Birth to Three services, the lead agency's contractor shall provide the parent notice of the rights and entitlements afforded to parents and legal guardians under the Birth to Three System. The notice shall include an explanation of a parent's right to consent to or decline any early intervention service without jeopardizing any other early intervention service available under the law.
(b) Prior to the initial [Individualized Family Service Plan (IFSP)] IFSP meeting and not less than annually thereafter, the program shall give the parent information that summarizes a parent's rights under the Birth to Three System.

Sec. 17a-248-6. Records

(a) Personally identifiable information shall be confidential and shall not be disclosed by any employee or contractor of the lead agency or early intervention program except in accordance with the provisions of 34 CFR 99.2 to 99.37, inclusive.
(b) If a child's parent and a child's program cannot agree on a request to amend the record of an eligible child, the child's program shall (1) inform the parent in writing of the program's decision, (2) inform the parent of a parent's right to place a statement in the record reflecting their views about its contents, and (3) inform the parent of the right to request, in writing, an administrative proceeding in accordance with section 17a-248-9 of the Regulations of Connecticut State Agencies.

Sec. 17a-248-7. Written notice

(a) The agency shall provide written notice to a parent of a child who is eligible or who may be eligible to receive early intervention services not later than five (5) days prior to the agency proposing or refusing [to;] to (1) initiate or change the identification, [evaluation] evaluation, or placement of the [child] child, or (2) provide appropriate early intervention services to the child and the child's family.
(b) The written notice shall inform the parent about:
(1) the action that is being proposed,
(2) the reasons for taking the action, and
(3) all procedural safeguards that are available pursuant to sections 17a-248-9 to 17a-248-10, inclusive, of the Regulations of Connecticut State Agencies.
(c) The notice shall be written in language understandable to the general public and provided in the native language of the parent or other mode of communication used by the parent, unless it clearly is not feasible to do so. If the native language of the parent is not a written language, the agency shall ensure that:
(1) the notice is translated orally or by other means to the parent in the parent's native language,
(2) the parent understands the notice, and
(3) there is written documentation that the requirements of this section have been met.
(d) For [an individual] a person with deafness or blindness, or for [an individual] a person with no written language, the term native language means the mode of communication that normally is used by the [individual,] person, such as sign language, Braille or oral communication.

Sec. 17a-248-8. Mediation procedures to resolve individual child complaints

(a) A statewide mediation system shall be available to ensure parents and programs may voluntarily access a non-adversarial process for the resolution of complaints regarding the provision of early intervention services.
(b) The decision of the parent not to participate in mediation proceedings shall not prevent or delay the parent from pursuing an administrative proceeding as provided by section 17a-248-9 of the Regulations of Connecticut State Agencies.
(c) The lead agency shall appoint a qualified, impartial mediator upon written request from either a parent or a program. An impartial mediator shall not be an employee of any public agency, private agency or program involved in the provision of early intervention services or care of the child for whom the mediation has been requested. An impartial mediator shall not have a personal or professional interest that conflicts with his or her objectivity in the mediation proceedings.
(d) Any parent requesting mediation has the right to:
(1) withdraw at any time from mediation;
(2) withdraw at any time from mediation and request an administrative proceeding;
(3) have the mediation conducted at a neutral, reasonably convenient site and at a reasonably convenient time; and
(4) interpreter services or alternative communication services, if any are needed.
(e) When mediation results in successful negotiation of a partial or full agreement on areas in dispute between a parent and a program, the mediator shall:
(1) document the terms of the negotiated agreement in writing and obtain the signatures of the parent and the program representative on the written agreement;
(2) if applicable, list the unresolved issues and state only that no agreement was reached on these issues;
(3) whenever practicable, provide the written agreement in the dominant language of the parent or in an alternative mode of communication;
(4) ensure that the parent and program representative receive a copy of the written agreement; and
(5) inform the director of the disposition of the mediation.
(f) The service coordinator from the early intervention program shall ensure that the terms of the written agreement are incorporated into the [Individualized Family Service Plan (IFSP)] IFSP not later than five (5) working days after the date of receipt of the written document.
(g) Except as required by state and federal law, all statements made during a mediation and all documents prepared for a mediation shall remain confidential unless both parties agree to release that information. No such information shall be used in any subsequent due process proceeding without the consent of both parties.

Sec. 17a-248-9. Administrative proceeding to resolve individual child complaints

(a) The lead agency shall establish, implement and maintain an administrative proceeding process for the resolution of individual complaints regarding: (1) the evaluation, assessment and eligibility determination of a child; (2) the development, review and implementation of the Individualized Family Service Plan (IFSP); and (3) the parent's procedural rights and safeguards.
(b) A parent of a child who is eligible or who may be eligible for early intervention services may request, in writing, of the lead agency an administrative proceeding to review: (1) the evaluation, assessment and eligibility determination of a child; (2) the development, review and implementation of the [IFSP] IFSP; and (3) the parent's procedural rights and safeguards.
(c) The lead agency, upon receipt of a written request for an administrative proceeding in accordance with subsection (b) of this section, shall appoint an impartial decision maker, knowledgeable about the provisions of sections 17a-248 to 17a-248g, inclusive, of the Connecticut General [Statutes,] Statutes; sections 17a-248-1 to 17a-248-14, inclusive, of the Regulations of Connecticut State [Agencies,] Agencies; 20 USC 1431 to 1444, inclusive, and 34 CFR 303. The impartial decision

maker shall schedule the administrative proceeding at a time and in a location reasonably convenient to the [parents.] parent.
(d) An impartial decision maker shall not be an employee of any public or private agency or program involved in the provision of early intervention services or care of the child for whom the proceeding has been requested. An impartial decision maker shall not have a personal or professional interest that conflicts with his or her objectivity in the administrative proceeding. A person who is paid to serve as an impartial decision maker is not deemed to be an employee of a state agency.
(e) The impartial decision maker shall listen to the presentation of relevant viewpoints concerning the matter under review, examine all information relevant to the issues and seek to reach a timely resolution of the matter. The findings of fact, conclusions of law and decision shall be written without personally identifiable information concerning the child or the child's family. The impartial decision maker shall make a record of the proceedings.
(f) The record of the administrative proceeding shall be kept by the lead agency and shall include all notices, pleadings, and motions; evidence presented during the administrative proceeding; questions and offers of proof, objections thereto, and rulings thereon; any statements of matters officially noticed by the impartial decision maker; and any findings of fact, conclusions of law, decision, determination, opinion, order or report made by the impartial decision maker.
(g) Any parent requesting an administrative proceeding has the right to:
(1) be accompanied and advised by counsel and by [individuals] persons with special knowledge or training with respect to early intervention services for eligible children;
(2) present evidence and confront, cross-examine and compel the attendance of witnesses;
(3) prohibit the introduction of any evidence at the administrative proceeding, which has not been disclosed to the parent at least five (5) days before the proceeding;
(4) obtain a written or electronic verbatim transcription of the proceedings;
(5) obtain written findings of fact, conclusions of law and decisions;
(6) have his or her child present at the proceeding; and
(7) open the proceeding to the public.
(h) During the pendency of an administrative proceeding, (1) unless the parties otherwise agree, the eligible child shall continue to receive early intervention services currently being [provided] provided, and (2) if the proceeding involves an initial [Individualized Family Service Plan (IFSP),] IFSP, the child shall receive those early intervention services that are not in dispute.

Sec. 17a-248-10. System complaint resolution

(a) Any [individual] person or organization may file a written, signed complaint with the lead agency alleging a violation of one or more requirements of the federal Early Intervention Program for Infants and Toddlers with Disabilities or sections 17a-248-1 to 17a-248-14, inclusive, of the Regulations of Connecticut State Agencies by (1) any agency that receives funds, by contract or otherwise, pursuant to the Infants and Toddlers with Disabilities part of the federal Individuals with Disabilities Education Act, or (2) other agencies that are involved in the early intervention system. The complaint shall state the facts on which the complaint is based.
(b) Not later than [60] sixty (60) days after the date of receipt of the complaint, the lead agency shall:
(1) conduct an independent on-site investigation, if it is determined by the lead agency that an on-site investigation is necessary;
(2) give the complainant the opportunity to submit additional information, either orally or in writing, regarding the allegations in the complaint;
(3) review all relevant information and make an independent determination as to whether the agency is violating a requirement of the federal Early Intervention Program for Infants and Toddlers with Disabilities or of sections 17a-248-1 to 17a-248-14, inclusive, of the Regulations of Connecticut State Agencies; and

(4) issue a written decision to the complainant that addresses each allegation in the complaint and contains:
(A) findings of fact and conclusions; and
(B) the reasons for the final decision.
(c) An extension of the 60-day time limit under subsection (b) of this section shall be granted in the event exceptional circumstances exist with respect to a particular complaint as determined by the lead agency.
(d) Procedures for effective implementation of the lead agency's final decision, if needed, shall include technical assistance activities, negotiations, and corrective actions to achieve compliance.

Sec. 17a-248-11. Financial liability definitions

As used in sections 17a-248-11 to 17a-248-14, inclusive, of the Regulations of Connecticut State Agencies:
(1) ''Adjusted gross income'' means the total of adjusted earned and unearned income as shown on the parent's most recent state income tax return or, in lieu of a state income tax return, a federal income tax return. In lieu of either a state or federal income tax return, the lead agency may approve an alternative means of reporting income.
(2) ''Contribution'' means an amount of money determined to be due and payable from a parent.
(3) ''Family'', for purposes of determining family size, means a group of two or more persons related by birth, marriage, or adoption who live together.
(4) ''IFSP early intervention services'' means the early intervention services described in an IFSP as defined in subsection (7) of section 17a-248-1 of the Regulations of Connecticut State Agencies excluding any services which are to be carried out at public expense. Services, which are to be carried out at public expense, are described in 34 CFR 303.521 and include, but are not limited to, evaluation, assessment, IFSP development and review, and service coordination.
(5) ''Insurance'' means third party coverage for the costs of health care services.
(6) "Insurance co-payment" means an amount of money due and payable from a parent who has insurance but does not assign to the lead agency the right of recovery, used to defray the costs of early intervention services otherwise covered by a parent's insurance policy.
[(6)] (7) ''Medicaid'' means the program operated by the Department of Social Services pursuant to section 17b-260 of the Connecticut General Statutes and authorized by Title XIX of the Social Security Act.
[(7)] (8) ''Program'' means an agency providing comprehensive early intervention services to an eligible child operated by, under contract with, or through an interagency agreement with the lead agency.
[(8)] (9) ''Uninsured parent'' means a parent who does not have insurance coverage for his or her child.

Sec. 17a-248-12. Insurance

(a) Programs shall be responsible for billing insurance.
(b) A parent shall be responsible for the reimbursement of costs for early intervention services included in an eligible child's [Individualized Family Service Plan (IFSP)] IFSP from insurance and through parent contributions established in the schedule of contributions in [subsections (a) and (b)] subsection (a) of section 17a-248-13 of the Regulations of Connecticut State Agencies.
(c) No right of recovery shall be sought from a parent whose insurance policy is required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes.

[(c) A parent who has insurance may assign to the lead agency the right of recovery or indemnification which the parent has against the parent's insurer for the cost of IFSP early intervention services for which the parent is liable. In addition, the parent shall make a contribution to the lead agency based on the schedule of contributions in subsection (a) of section 17a-248-13 of the Regulations of Connecticut State Agencies.] (d) A parent who has an insurance policy that is not required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes may assign to the lead agency the right of recovery which the parent has against the parent's insurer for the cost of IFSP early intervention services for which the parent is liable. If a parent who has an insurance policy that is not required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes does not assign to the lead agency the right of recovery, the parent shall be charged a monthly insurance co-payment based on the schedule of insurance co-payments in subsection (b) of section 17a-248-13 of the Regulations of Connecticut State Agencies in addition to any contribution that applies to a parent whose insurance policy is required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes, an uninsured parent, or a parent who assigns to the lead agency the right of recovery.

The total reimbursement from insurance and parent contributions shall not exceed the actual cost for IFSP early intervention services.

[(d)] (e) An uninsured parent shall make a contribution to the lead agency based on the schedule of contributions in subsection (a) of section 17a-248-13 of the Regulations of Connecticut State Agencies.

[(e) A parent who has insurance and elects not to assign such right of recovery or indemnification to the lead agency shall make a contribution to the lead agency based on the schedule of contributions in subsection (b) of section 17a-248-13 of the Regulations of Connecticut State Agencies.] (f) A parent who has an insurance policy and does not assign to the lead agency the right of recovery shall be charged a monthly insurance co-payment based on the schedule of insurance co-payments in subsection (b) of section 17a-248-13 of the Regulations of Connecticut State Agencies in addition to any contribution that applies to a parent whose insurance policy is required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes, an uninsured parent, or a parent who assigns to the lead agency the right of recovery.

[(f)] (g) A parent of a child, who is eligible for Medicaid, shall not be required to make any contribution.

Sec. 17a-248-13. Schedule of contributions and insurance co-payments

(a) The schedule of contributions based on a sliding scale for [uninsured parents or parents who assign] a parent whose insurance policy is required to provide coverage for early intervention services pursuant to sections 38a-490a and 38a-516a of the Connecticut General Statutes, an uninsured parent, or a parent who assigns to the lead agency the right of [insurance] recovery shall be as follows:

Adjusted Gross Family Income	**Monthly Contribution by Family Size**			
	3 or Fewer	4	5	6 or More
Less than $45,000	$0	$0	$0	$0
$45,000 - $55,000	$24	$16	$8	$8
$55,001 - $ $65,000	$32	$24	$16	$8
$65,001 - $75,000	$40	$32	$24	$16
$75,001 - $85,000	$56	$48	$40	$32

$85,001 - $95,000	$104	$96	$88	$80
$95,001 - $105,000	$120	$112	$104	$96
$105,001 - $125,000	$152	$144	$136	$128
$125,001 - $150,000	$192	$184	$176	$168
$150,001 - $175,000	$232	$224	$216	$208
$175,001 - and above	$272	$264	$256	$248

[(b) The schedule of contributions based on a sliding scale for parents who have insurance and do not assign to the lead agency the right of insurance recovery shall be as follows:

Adjusted Gross Family Income	**Monthly Contribution by Family Size**			
	3 or Fewer	4	5	6 or More
Less than $45,000	$0	$0	$0	$0
$45,001 - $55,000	$48	$32	$16	$16
$55,001 - $65,000	$64	$48	$32	$16
$65,001 - $75,000	$80	$64	$48	$32
$75,001 - $85,000	$112	$96	$80	$64
$85,001 - $95,000	$208	$192	$176	$160
$95,001 - $105,000	$240	$224	$208	$192
$105,001 - $125,000	$304	$288	$272	$256
$125,001 - $150,000	$384	$368	$352	$336
$150,001 - $175,000	$464	$448	$432	$416
$175,001 - and above	$544	$528	$512	$496]

(b) The schedule of insurance co-payments based on a sliding scale for a parent who has an insurance policy and does not assign to the lead agency the right of recovery shall be as follows:

Adjusted Gross Family Income	**Monthly Insurance Co-payment**
Less than $45,000	$ 0
$45,000 - $55,000	$ 8
$55,001 - $65,000	$ 8
$65,001 - $75,000	$16
$75,001 - $85,000	$32
$85,001 - $95,000	$75
$95,001 - $105,000	$75
$105,001 - $125,000	$75
$125,001 - $150,000	$75
$150,001 - $175,000	$75
$175,001 - and above	$75

(c) The monthly contribution and, if applicable, insurance co-payment from a parent, in accordance with the schedules established in this regulation, shall begin with the first full calendar month of a child's enrollment after IFSP early intervention services begin.
(d) A parent shall be liable for the monthly [contributions] contribution and, if applicable, insurance co-payment for each full calendar month that their child is enrolled in the Birth to Three System after

IFSP early intervention services begin and until the child exits the system. [Additional contributions] An additional monthly contribution and, if applicable, insurance co-payment shall not be required if the parent has more than one child enrolled in the Birth to Three System at the same time.
(e) The aggregate contributions made by a parent and a parent's insurance shall not exceed the aggregate state cost of IFSP early intervention services received by their child and family.
(f) The State Interagency Birth to Three Coordinating Council shall review the schedule of contributions and insurance co-payments at least once every three (3) years and shall make recommendations to the lead agency regarding the schedule of [contributions.] contributions and insurance co-payments.
(g) The lead agency or its designee shall be responsible for billing. When the amount owed by the parent is equal to or more than three (3) months of unpaid [bills,] contributions and, if applicable, insurance co-payments, the lead agency shall notify the parent that IFSP early intervention services shall be suspended until such time as payment is made in full. A parent shall be notified in writing not later than ten (10) days prior to the suspension of services. At the time that IFSP early intervention services are suspended, the parent may elect to continue to receive only those services that the Individuals with Disabilities Education Act Part C requires to be provided at no cost to parents or the parent may withdraw from the Birth to Three System. Records of unpaid [bills] contributions and, if applicable, insurance co-payments shall be maintained by the lead agency or its designee and shall be due at any time that a child who has been withdrawn is re-enrolled or a child's sibling is enrolled. The parent shall not be required to make a contribution and, if applicable, insurance co-payment for any month in which no IFSP early intervention services are delivered. Services that are not cancelled by the family at least 24-hours prior to their scheduled time are considered to have been delivered.
(h) The lead agency or its designee shall conduct a reassessment of a parent's financial circumstances, not less than annually, or when the lead agency determines that a reassessment is warranted. The lead agency may adjust a parent's contribution and, if applicable, insurance co-payment for early intervention services based upon the reassessment.
(i) A parent has the right to have a reassessment at any time if there are significant changes affecting the determination of the parent's [contribution.] contribution and, if applicable, insurance co-payment. Such request for reassessment shall be made in writing.

Sec. 17a-248-14. Adjustment to parent [fees] contributions and insurance co-payments

(a) A parent may request in writing an adjustment of the family's adjusted gross income if there are one or more extraordinary expenditures that should be taken into account when calculating the [contribution.] contribution and, if applicable, insurance co-payment. Adjustments may be requested through the director or the director's designee as prescribed in this section. If such an adjustment is denied, the parent may request an administrative proceeding pursuant to section 17a-248-9 of the Regulations of Connecticut State Agencies.
(b) The lead agency may reduce a family's adjusted gross income from which the contribution and, if applicable, insurance co-payment is calculated, upon the written request of the parent and with the submission of appropriate documentation.
(c) The lead agency shall review requests submitted and, upon determination, a parent shall be notified of the decision.
(d) A parent who is aggrieved by such a decision may request in writing through the director or the director's designee an administrative proceeding not later than thirty (30) days after the date of receipt of the notice of the lead agency's decision.
(e) The lead agency shall hold such proceeding not later than thirty (30) days after the date of receipt of a request for an administrative proceeding. The lead agency shall mail a notice, giving the time and

place of the proceeding to the aggrieved parent, not later than ten (10) days prior to the date of the proceeding. A period of continuance, not to exceed twenty (20) days, may be granted.
(f) The aggrieved parent shall appear personally at the administrative proceeding and may have representation.
(g) A record shall be made of each administrative proceeding, but shall only be transcribed upon request.
(h) The administrative proceeding shall be conducted by the commissioner of the lead agency or the commissioner's designee.
(i) The lead agency shall render a final decision not later than ninety (90) days after the close of the administrative proceeding. Written notice of the final decision shall be sent to the aggrieved parent by the lead agency by certified mail.
(j) A parent shall continue to be billed at the original contribution and, if applicable, insurance co-payment amount until a request for adjustment of [contributions] the contribution and, if applicable, insurance co-payment amount is approved either by the director or the director's designee or through the administrative proceeding.
(k) The lead agency, upon approval of an adjustment of [contribution,] the contribution and, if applicable, insurance co-payment amount, shall adjust a parent's [contributions] contribution and, if applicable, insurance co-payment to reflect any overpayment or underpayment of contributions and, if applicable, insurance co-payments during the approval process and the administrative proceeding.

Statement of Purpose

These Early Intervention Services for Infants and Toddlers and their Families regulations concerning the Department of Developmental Services' Birth to Three System are being amended to: (1) include new language that states no right of recovery shall be sought from a parent with a health insurance plan required to comply with Connecticut's insurance mandate (Section 38a-490a); (2) allow a parent to sign a right of recovery when their insurance does not comply with Connecticut insurance mandates; (3) add a schedule of monthly insurance co-payments for a parent who has insurance and does not assign to the Birth to Three System the right of insurance recovery required in addition to any fees that apply to all parents; and (4) remove the schedule of contributions under 17a-248-13(b) charged to parents who have insurance and do not assign to the lead agency the right of insurance recovery.

Section 17a-248-1 makes a technical change to conform to the October 2011 revised federal IDEA Part C Regulations. Section 17a-248-11 adds the definition of "insurance co-payment". Section 17a-248-12 make changes that (1) no right of recovery shall be sought by the lead agency from a parent whose insurance is already required to cover early intervention services; (2) allow a parent whose insurance is not required to cover early intervention services to assign the right of recovery to the lead agency; and (3) require a parent who has insurance but does not assign the right of recovery to the lead agency to pay an insurance co-payment in addition to any contribution that applies to all parents. Section 17a-248-13 makes changes that (1) clarify which parents are subject to the schedule of contributions for Birth to Three services; (2) eliminates a separate schedule of contributions for parents who have insurance but do not assign a right of recovery to the lead agency; and (3) adds an insurance co-payment schedule for parents who have insurance but do not assign a right of recovery to the lead agency. The insurance co-payment would be in addition to any contribution that applies to all parents. Section 17a-248-14 adds the insurance co-payment to the section on adjustment of parent contributions.