

**Interagency Agreement**

**With**

**Vermont Agency of Human Services**

**And**

**Vermont Department of Education**

**Pursuant to Part C of the**

**Individuals with Disabilities Education Act 2004**

**June 27, 2006**

**Revised April 16, 2007**

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**TABLE OF CONTENTS**

Purpose.....1

Guiding Principles.....2

Co-Lead Agency’s Responsibilities.....3

Public Awareness and Child Find.....5

Coordination of Services.....6

Transition.....7

Financial Responsibilities.....11

Dispute Resolution Relative to the Implementation of the IAA.....16

Quarterly Review.....17

Non-Discrimination.....17

Amendments or Modifications.....17

Term.....18

## **PURPOSE**

This agreement promotes and supports collaboration between the Agency of Human Services (AHS) and the Department of Education (DOE), so that the statewide early intervention program is coordinated and provided in the manner required by Part C of the Individuals with Disabilities Education Improvement Act of 2004 (IDEA)<sup>(1)</sup>, other applicable federal and state laws such as the McKinney-Vento Homeless Assistance Act, Child Abuse Prevention and Treatment Act, Maternal and Child Health Title V Children with Special Health Needs, 33 V.S.A. chapters 43 and 47, and by the Vermont State Board of Education (VSBE) and AHS special education regulations for children birth to three years of age who are at risk for and/or who experience measurable developmental delays and/or disabilities, and their families<sup>(2)</sup>. As required by IDEA, this agreement articulates the roles and responsibilities of the DOE and AHS, primarily through the activities of its member departments and offices including the Department for Children and Families (DCF), Department of Health (VDH), Department of Disabilities, Aging and Independent Living (DAIL) and the Department of Vermont Health Access (DVHA) relative to the provision of early intervention services and the funding of these services. In Vermont, the Early Intervention Program under Part C is known as Children's Integrated Services, Early Intervention (CIS/EI). It is intended that the agreement will guide staff from regional early intervention programs (EIP) and their partners and local education agencies (LEAs) in the coordination and provision of the statewide early intervention program. It is intended that the agreement will support existing and emerging collaborative models between regional EIPs, LEAs and other partners.

(1) All statutory and regulatory citations in this agreement are to those in effect at the date of execution of the agreement and as amended thereafter from time to time. The statutory and regulatory citations in this agreement will be updated to reflect the IDEA of 2004 and its implementing regulations.

(2) An eligible child is a child from birth to three years of age who is at risk for and/or who experiences measurable developmental delays and/or has a diagnosed physical or mental condition that is highly likely to result in a developmental delay.

## **GUIDING PRINCIPLES**

Improving outcomes for infants and toddlers with developmental delays has been the shared responsibility of the DOE, AHS, EIPs, LEAs and other local service providers since 1991. The following principles guide the provision of early intervention services to infants, toddlers and their families.

- 1.. The best way to meet the needs of individual children is by addressing the needs of the family.
- 2.. Family-centered services are both a goal and a process by which families are supported in being active partners in planning outcomes and services that they and/or their children need and want.
- 3.. Family-centered intervention is most beneficial when provided as early as possible and at the appropriate level of intensity based on need.
4. A process and services that are family-centered improve outcomes for children.
5. Individualized, well-thought out intervention services address the child's needs and strengths in the context of the family's concerns and priorities.
6. Smooth and seamless transitions from CIS/EI to Essential Early Education (EEE) and other early childhood and family support services are essential for improving developmental outcomes.
7. Collaboration between agencies to ensure that families are informed of their rights, including the consent provisions of 34 CFR §303.420, the confidentiality and consent provisions of 34 CFR §303.401-417, and the opportunity to inspect and review records under 34 CFR §303. 405-409 and that families and children receive available services for which they are eligible in a timely and coordinated manner improves program effectiveness.
8. Collaboration between agencies strengthens statewide implementation of CIS/EI.

## **CO-LEAD AGENCY RESPONSIBILITIES**

The Governor designated the AHS and the DOE as co-lead agencies responsible for the general oversight of Vermont's Part C CIS/EI. To meet the needs of eligible children and their families in an effective and coordinated manner, this agreement delineates the shared and separate functions of the co-lead agencies.

### **As co-lead agencies, the AHS and the DOE will work together, as practicable, to:**

1. Develop and /or revise, adopt and execute rules regarding the statewide early intervention program;
2. Collaborate on, implement and deliver to the LEAs and regional Early Intervention Programs (EIP)s technical assistance regarding the implementation of the rules and best practices required to carry out Part C requirements;
3. Collaborate on policy and funding decisions;
4. Otherwise comply with all statutory requirements of IDEA and inform the LEAs and EIPs of any subsequent changes to statutes or rules;
5. Ensure timely and accurate data collection and reporting as required by federal and state rule, including reporting on the expenditure of federal, state, and local funds spent by the DOE and the LEAs;
6. Jointly identify and act on systemic issues;
7. Work together to identify resources in support of children who require intensive and extensive services related to low incidence disabilities;
8. Work together to follow children who are at risk for developmental delays;
9. Ensure timely communication of the results of delegated responsibilities of monitoring, corrective actions, complaints, and other activities;
10. Meet at least quarterly to review existing data, information and evaluate the implementation of this agreement and Vermont's obligations under Part C and relevant provisions of Part B of the IDEA.
11. The DOE and AHS will jointly explore and seek public comment regarding the Birth to 5 option for families in Vermont.

**A. AHS is specifically assigned lead responsibility for the general administrative, operational, and financial functions of Part C of the IDEA.**

**As such, the AHS shall:**

1. Carry out the day-to-day responsibilities for oversight, management, supervision and continuous improvement of Part C CIS/EI;
2. Monitor all Part C partners, including the LEAs and regional host agencies, to ensure compliance with Part C;
3. Report findings to the DOE for follow-up regarding corrective actions in the areas of child find and transition;
4. Write and submit reports, applications and plans as required by federal and or state governments;
5. Conduct financial planning and management of CIS/EI
6. Solicit input from DOE on the development, creation, and execution of policy decisions and technical assistance that impact LEAs and regional EIPs, such as deciding whether to exercise options or pilots allowed under IDEA and planning for and providing professional development;
7. Develop procedures to ensure compliance with Part C requirements;
8. Identify and coordinate the use of federal, state, and local resources;
9. Provide technical assistance to LEAs and regional EIPs for the development of regional Part C plans.

**B. As a co-lead agency for Part C of IDEA, the DOE shall:**

1. Provide staff resources for DOE's Part C duties described in this agreement;
2. As feasible, provide input to support AHS responsibilities;
3. Contribute data to reports, as requested by AHS;
4. Assist AHS in the development, provision, and dissemination of technical assistance to LEAs;
5. Direct LEAs to fulfill child find and transition responsibilities, as identified in this Agreement, consistent with federal and state rule;

6. Assure that corrective actions resulting from the monitoring of LEA dispute resolution activities are completed;
7. Administer mediation, administrative complaint and due process systems for families to pursue their complaints.

### **PUBLIC AWARENESS AND CHILD FIND**

Pursuant to 34 CFR 303.115 and 34 CFR 303.302, Vermont has a comprehensive child find system including policies and procedures that ensure all infants and toddlers who may be eligible for services under Part C are identified and evaluated. Pursuant to VSBE Rule 2360.5, child find responsibility for children birth to age three lies with LEAs. While DOE has ultimate responsibility for ensuring that a comprehensive child find system exists in Vermont, AHS has an important supporting role as described below.

1. AHS will take the lead in developing and implementing public awareness activities to include outreach to primary referral sources in order to connect families to child find activities. DOE will provide technical assistance to LEAs about their responsibilities for implementing public awareness activities that supplement those provided by AHS.
2. DOE will ensure that LEAs implement their child find responsibilities in accordance with their regional plans as developed consistent with Part C state rules.
3. DOE will seek AHS resources and expertise to ensure that DOE sponsored child find trainings are consistent with Part C's comprehensive system of professional development.
4. DOE will ensure that LEAs respond to referrals resulting from public awareness or any other child find activities in a manner consistent with Part C federal and state rules.
5. DOE will ensure that LEAs, in conjunction with core teams (as defined below), complete initial evaluations of Part C referred children within relevant timelines and following all evaluation requirements in accordance with Part C federal and state rules.
6. DOE will ensure that LEAs, in conjunction with a child's team, determine eligibility pursuant to federal and state Part C rules.

7. DOE will ensure that LEAs comply with data collection and reporting requirements of Part C.

8. DOE will provide AHS with information on child find activities and will meet periodically with AHS to discuss child find activities and outcomes.

9. AHS will ensure that regional EIPs will offer information and referral services for children who are found ineligible for Part C.

### **COORDINATION OF SERVICES**

AHS and DOE have joint and separate responsibilities related to oversight of the Part C early intervention program. In accordance with state regulations and this Interagency Agreement, LEAs have responsibility for child find activities while regional EIPs have responsibility for the coordination and provision of direct services to infants, toddlers, and families found eligible for Part C services. However, LEAs or EIPs may elect to take on increased responsibilities beyond those that are required if these are clearly articulated and incorporated into the regional plans.

AHS and DOE will review, through monitoring efforts, the compliance and performance of regional EIP's and LEAs in maintaining and implementing regional plans. The regional plan defines the roles of the regional EIP's, the LEAs, and other key partners. The regional plan is developed by regional EIP's. The regional EIP has the responsibility to develop and periodically review the regional plan with the regional Children's Integrated Services Administrative team.

The EIP will accept and attempt to resolve complaints and will access the CIS administrative team when needed. The state CIS Early Intervention Administrator will be notified of any local issues or complaints. Families and providers who are unable to resolve concerns or issues with the EIP or the CIS administrative team will be provided contact information for the state office.

Each Part C EIP shall develop, maintain and implement a regional plan that is consistent with state rules and this interagency agreement.

The regional plan must include the following:

1. Delineation of responsibilities, including responsibilities for payment and provision of activities for public awareness, child find, initial evaluation for eligibility and program planning, early intervention services and transition to EEE or other early childhood services, as appropriate;
2. Procedures for responding to and sharing referrals with the CIS regional referral and intake team: All early intervention referrals are passed directly to the EIP. The EIP has 2 calendar days to contact the family and begin the intake and multidisciplinary evaluation (using approved tools) process with the LEA.
3. Upon completion of the multidisciplinary all-domain assessment the child's IFSP/One Plan team, including the family, will conduct a meeting to determine eligibility, and begin development and implementation of early intervention strategies including: duration and intensity, approach and location of services.
  - IFSP/One Plan team must include the involvement of the parent and two or more individuals from separate disciplines or professions and one of these must be the service coordinator (consistent with §303.343(a)(1))
  - Each IFSP/One Plan may include services beyond the early intervention services described in 34 CFR§303.13 Services included in an IFSP/One Plan that are not described in 34 CFR §303.13 are services for which fees may be charged.
4. The CIS referral and Intake team is notified of the status of the EIP referral at the next scheduled meeting.
5. The effective and sunset dates of the regional plan. at a minimum, each regional plan must be agreed upon and signed by the EIP and LEAs within the region.

## **TRANSITION**

Pursuant to 34 CFR §303.344(h) of the final IDEA Part C Regulations, the DOE and AHS ensure that regional CIS/EI and LEA representatives participate in transition planning conferences for those children who may require Part B preschool special education

services. The family's service coordinator is responsible for initiating the transition planning conference. A transition plan will be developed that includes both the steps and the services needed to assure a smooth and effective transition for the child and his/her family.

## **(1) IDEA Part C Early Childhood Transition Requirements**

### **I. Part C/LEA/SEA Transition Notification**

At least 6 months and not fewer than 90 days before the child's third birthday, the regional CIS/EI will provide written notification (child's name, date of birth, and parent name, address, and telephone number) to the LEA (where the child receiving Part C services resides) only for children who are receiving Part C services and may be potentially eligible for services under Part B section 619 preschool program and will shortly turn three years old and exit Part C program.

- a. At least 6 months and not fewer than 90 days before the child's third birthday, the regional CIS/EI will provide written notification (child's name, date of birth, and parent name, address, and telephone number ) to the Part C state office only for a child who is receiving Part C services and who may be potentially eligible for services under Part B section 619 preschool program.
- b. On a monthly basis, but not fewer than 90 days before the child's birthday, the Part C state office will provide written notification (child's name, date of birth, and parent name, address, and telephone number) to the SEA only for children who are receiving Part C services and whom may be potentially eligible for services under Part B section 619 preschool programs. A hard copy will be mailed to the 619 coordinator and will confirm receipt with the Part C administrator through email

### **II. Late Referral Notification**

- a. If the regional CIS/EI determines that a child is eligible for early intervention services more than 45 days but less than 90 days before that child's third birthday the regional CIS/EI must provide transition notification as soon as possible after determining eligibility to the LEA where the child resides.
- b. If the regional CIS/EI determines that a child is eligible for early intervention services more than 45 days but less than 90 days before that child's third birthday the regional CIS/EI must provide transition notification as soon as possible to the Part C state office after determining eligibility.
- c. The Part C state office will provide written notification as soon as possible to the SEA for all children determined eligible for early intervention services more than 45 days but less than 90 days before their third birthday.

- d. If a child is referred to the regional CIS/EI fewer than 45 days before their third birthday, the host agency is not required to conduct an evaluation, assessment or initial IFSP meeting. If that child may be potentially eligible for Part B services, the regional CIS/EI, with parental consent, must refer the toddler to the LEA where the child resides.
- e. If a child is referred to the regional CIS/EI fewer than 45 days before their third birthday, the regional CIS/EI is not required to conduct an evaluation, assessment or initial IFSP meeting. If a child may be potentially eligible for Part B services, the regional CIS/EI, with parental consent, must refer the child to the LEA where the child resides.
- f. If a child is referred to **the regional CIS/EI** fewer than 45 days before their third birthday and may be potentially eligible for Part B services, **the regional CIS/EI** must notify, with parental consent, the Part C state office, LEA, and SEA as soon as possible.
- g. With parental consent, the Part C state office will provide written notification as soon as possible to the SEA for all children referred fewer than 45 days before their third birthday and may be potentially eligible for Part B services.

### **III. Transition Conference**

- a. With families approval, the regional CIS/EI must conduct a transition conference for a child with disabilities who is receiving Part C services and who will be exiting the Part C program not fewer than 90 days, and at the discretion of all parties not more than 9 months, before the child's third birthday to discuss any services the child may receive under Part B of the Act.
- b. If a toddler with a disability is not potentially eligible for Part b preschool services, with the family's approval, the lead agency makes reasonable efforts to convene a conference with the appropriate parties to discuss other appropriate services that the toddler may receive.
- c. The transition conference required parties include the regional CIS/EI, the family of the child and the LEA.
- d. The transition conference or meeting to develop the transition plan must meet the IFSP meeting requirements and that the transition conference and the IFSP meeting may be combined, and if combined must meet the IFSP meeting requirements in 34CFR§§303.342(d) and CFR §303.343.34 CFR §303.209(e)

### **IV. Procedures for Transition Plan**

The DOE and AHS agencies will ensure that regional CIS/EI and LEA representatives participate in transition planning conferences for children who may be potentially eligible for Part B preschool special education services. The

family service coordinator is responsible for initiating the transition planning conference.

- a. The lead agency must include the family in the development of the transition plan §§303.209(d)(1)(ii) and 303.344(h)
- b. The Regional CIS/EI must develop a transition plan for all children who are approaching their third birthday and exiting Part C as part of a child's IFSP/One Plan not fewer than 90 days, but at the discretion of all parties up to 9 months, before the child's third birthday. The transition plan must include steps and services to be taken to support the smooth transition of the child in accordance with §§303.209 and 303.211(b)(6):
  - 1. The plan must review program options for the toddler for the period from the child's third birthday through the remainder of the school year. §303.209(d)
  - 2. (i) Discussion with, and training of parents, as appropriate, regarding future placements and other matters related to the child's transition;
  - 3. (ii) Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in a new setting
  - 4. (iv) Identification of transition services and other activities that the IFSP Team determines are necessary to support the transition of the child. §303.344(h)

**V. Part B Early Childhood Transition**

- a. In order to ensure a smooth and effective transition for children with disabilities who receive Part C services and are eligible for Part B services, the DOE will assure that the LEA provides each child entering Part B from Part C will have an individualized education plan (IEP) developed and implemented by the child's third birthday.
- b. If a child's birthday occurs during the summer, the child's IEP team shall develop the IEP prior to the end of the current school year in order to have the IEP in effect at the beginning of the new school year. If it is necessary for the child to receive uninterrupted services over the summer months, the IEP team shall determine the date when services begin.
- c. Each LEA must participate in transition conference, arranged by the regional CIS/EI for children with disabilities who may be potentially eligible for Part B

- services, not fewer than 90 days before a child's third birthday, but at the discretion of all parties up to 9 months, before the child's third birthday
- d. At the request of the parent, an invitation to the initial IEP meeting will be sent to the CIS/EI Part C service coordinator, or other Part C service representative, if the child previously received Part C services. (IDEA section 614(d) (1) (D) and 34 CFR §300.321(f).
  - e. For all children who transition from CIS/EI Part C services to Part B services, the IEP team must consider the IFSP/One Plan content when developing the initial IEP(including the natural environments statement).
- VI.** AHS and DOE will review the current state regulations, policies and procedures to ensure a smooth and effective transition in alignment with IDEA that promotes best practice.
- VII.** AHS and DOE will provide training and technical assistance to LEAs and regional CIS/EI programs to assist them in implementing provisions of this agreement
- VIII.** and the federal and state regulations related to transition.

#### **FINANCIAL RESPONSIBILITIES**

Pursuant to 20 U.S.C. §1435, 34 C.F.R. 303.521(b), and other pertinent federal and state regulations and rules, children and their families eligible under Part C are entitled to child find; a timely, comprehensive, multidisciplinary evaluation; and an individualized family service plan/One Plan including service coordination. Pursuant to 20 U.S.C. §1436, eligible children and their families shall receive required early intervention services described in their IFSPs/One Plan, developed consistent with this agreement and federal and state regulations and rules. Vermont does not have a state law requiring the provision of a free appropriate public education for children with disabilities from birth to age three.

#### **Financial Responsibilities**

AHS is responsible for the administration of funds, as described below. To the extent that other federal and state funds do not cover the costs associated with the administration of the Part C and the implementation of the AHS responsibilities under

this agreement, the AHS will use Part C funds under the payor of last resort provision set out below.

**A. General Administration of Federal Part C Funds and Assurances**

1. Non-supplantation: Acceptance of Part C funds requires that federal funds are used to supplement state and local funds expended to eligible children and their families; federal funds are not to be used to supplant state and local funds. See 34 CFR §303.225(a) (2)

2. Maintenance of Effort: Annually, the AHS and DOE will provide assurance that Part C funds will be used to supplement the level of state and local funds expended for infants and toddlers with disabilities and their families and in no case to supplant those state and local funds. See 20 USC §1437(b)(5)(B) As the agency specifically assigned lead responsibility for the general administrative, operational, and financial functions of Part C of the IDEA, AHS has responsibility for ensuring that maintenance of effort requirements are met.

**A. AHS has responsibility as follows:**

1) AHS will monitor actual and budgeted levels of state, local, and other federal funds. Allowance may be made for decreases in the number of eligible children and unusually large amounts of funds expended for such long-term purposes as the acquisition of equipment and the construction of facilities.

2) AHS will conduct an analysis of the total state actual expenditures and budget information for Part C.

3) AHS will consult with DOE on any potential shortfalls in state, local and other federal funds budgeted for child find and other Part C activities.

4) AHS will ensure that budgeted levels of state, local, and other federal funds for Vermont's Part C activities for the current year are not less than the actual expenditures from these funds for the prior year.

**B. DOE has responsibility as follows:**

1) DOE will collect actual expenditures and budget information related to Part C child find and any other Part C activities executed by LEAs and report this information to AHS.

2) Absent allowable decreases, DOE will instruct LEAs that have budgeted a lesser amount for Part C child find activities to resume required Part C child find activities.

3) DOE will ensure its Part B maintenance of effort which shall encompass Part C child find.

### **C. Payer of Last Resort**

Part C funds are expended consistent with the requirements of 34 CFR §§303.500 and 303.510. These provisions require that Part C funds are spent only for Part C activities when no other federal, state, local or private source is available.

- When determining ability to pay for public and private insurance premiums, deductibles or co-pays, the Part C state office assesses each families financial hardships based on each families unique circumstances.
- The system of payments policies must include an assurance that families will not be charged any more than the actual cost of the Part C services. (Factoring in any amount received from other sources for payment of that service. §303.521(a)(4)(iii))
- The system of payments must include an assurance that families with public insurance or benefits or private insurance will not be charged disproportionately more than families who do not have public insurance or benefits or private insurance
- Therefore Part C or other funds may be used to pay for costs such as the premiums, deductibles, or co-payments. §303.521(a)(6).

### **D. General Administration transfer of funds**

Annually, as necessary and in accordance with the IAA or other agreement between AHS and DOE, AHS and DOE may transfer funds to each other to pay for Part C duties described in this agreement.

## **E. Funding for Coordination and Early Intervention Services**

Consistent with 34 CFR§303.501, AHS shall use federal Part C funds to maintain, implement and enhance capacity for a statewide system of early intervention for eligible children and their families, including, but not limited to, provision of early intervention services as described in 34 CFR §303.13 and service coordination as described in 34 CFR §303.34.

The following are funding sources for services that may appear in an IFSP/One Plan are consistent with §303.520 policies related to use of public benefits or insurance or private insurance to pay for Part C services

a. Medicaid and Private Insurance: Families who have Medicaid or Private Insurance and will be asked to provide written consent to use their benefits.

1. Families not currently enrolled in Medicaid will be encouraged to apply; ultimately, the families decide whether or not to apply and whether to consent to use Medicaid or private insurance to pay for services. If eligible for Medicaid, including Early Periodic Screening and Diagnostic Treatment or EPSDT, and with the family's consent, Medicaid will be used to pay for early intervention services, as described in 42 U.S.C. § 1396d (a) and § 1396d(r) (5). Medicaid is specifically available as a source of funding for services that appear in an IFSP/One Plan. See 42 U.S.C. § 1396d(r) (1) (B) and 42 U.S.C. § 1396d (a) (6) and (7).

b. Other federal and state related resources AHS will utilize, as appropriate, other resources consistent with the payer of last resort provision as set out above. Resources may include:

- 1) Children's Integrated Services
- 2) Maternal and Child Health/Title V
- 3) Children with Special Health Needs/Title V
- 4) Early Periodic Screening and Diagnostic Treatment
- 5) Early Head Start

### **C. DOE Financial Responsibilities**

DOE is responsible to ensure that LEAs are fulfilling and funding Part C child find activities required by 34 CFR §§303.115, 303.302, and 303.303. To the extent that LEAs voluntarily agree to provide early intervention services pursuant to their regional plans, DOE shall inform LEAs of possible funding sources for such elected activities. DOE is responsible to provide to the AHS financial information required for OSEP and state reporting purposes regarding Part C activities fulfilled by the DOE and LEAs.

#### **DOE Ensuring Child Find Activities Conducted by LEAs:**

1. Part B funds: The DOE receives Federal Part B funds that may be used by LEAs to conduct Part C child find.
2. Part C funds: At its discretion, AHS may transfer funds either directly or through EIP's to LEAs for child find activities.
3. State education spending funds: LEAs may use their state education spending dollars to conduct Part C child find.
4. Other Funding

To the extent that the above funds do not cover the LEA costs associated with conducting child find activities described in this agreement, LEAs will pursue other federal funds and state funds necessary to meet their responsibilities.

1. Medicaid: Families who have Medicaid will be asked to provide written consent to use their Medicaid benefits consistent with 34 CFR §303.520. Policies related to use of public benefits or private insurance to pay for Part C services and who are willing to use it will be asked to do so. Families not currently enrolled in Medicaid will be encouraged to apply. Ultimately, the family decides whether or not to apply for Medicaid and whether or not to use this source of funding. Families already enrolled in Medicaid will be asked for permission to bill Medicaid for services that may be covered, but these families may refuse such permission.
2. Private Insurance: Families who have private insurance will be asked to provide written consent to use their private insurance benefits consistent with

34 CFR §303.520. Policies related to use of public benefits or insurance or private insurance to pay for Part C services and who are willing to use it will be asked to do so.

c. Early Head Start: DOE will continue to meet its financial responsibilities as described in the AHS and DOE “Early Head Start Agreement” of 2010 or any subsequent agreement replacing it.

d. EEE State Grant – If there are funds available, LEAs may utilize EEE State Grant funds for Part C child find activities.

**D. Funding Available for LEAs Electing to Provide Early Intervention Services:**

Part C funds: At its discretion, AHS may transfer funds either directly or through EIP’s to LEAs for early intervention services.

**E. Payer of Last Resort**

DOE will ensure that Part B and Part C funds expended by DOE and LEAs are expended consistent with the relevant IDEA Payer of Last Resort requirements:

Part B funds, allowable for child find expenses, shall be used pursuant to 34 CFR § 300.162 so that each non-educational public agency, including state Medicaid, must precede the financial responsibility of the LEA. Part C funds are expended consistent with the requirements of 34 CFR §§ 303.222 and 303.510. These provisions require that Part C funds are spent only for Part C activities when no other federal, state, local or private source is available.

**Conditions and Terms of Reimbursement**

Federal Part C funds may not be used to satisfy a financial commitment for services which would have been paid for from another public or private source, except that these Part C funds may be used to prevent a delay in the timely receipt of appropriate early intervention services; such an expenditure will be reimbursed by the agency which has the ultimate responsibility for the payment. If a child is not able to obtain early intervention services, the EIP responsible for developing the child’s IFSP/One Plan shall provide or pay for these services for the child in a timely manner. Reimbursement can then be claimed pursuant to 34 CFR §303.122 and 303.510(b).

## **DISPUTE RESOLUTION RELATIVE TO THE IMPLEMENTATION OF THE INTERAGENCY AGREEMENT**

The dispute resolution process for both intra- and interagency disputes about payments for services or other matters related to Vermont's Part C program will be fulfilled in compliance with 34 CFR §§ 303.430-303.434. This dispute resolution process does not replace the procedural safeguards—due process, mediation, and administrative complaint—available to families.

AHS and DOE are responsible for resolving intra- and interagency disputes regarding financial responsibility for services or other matters related to Vermont's Part C program according to the following procedures:

1. Staff of the involved agenc(ies) attempt to resolve the dispute within 30 days.
2. If it appears by the 30th day that the involved agenc(ies) will not be able to resolve the dispute, the following will occur:
3. The EIP, LEA representative or agency representative will submit a written explanation of the dispute to the deputy commissioner of Department for Children and Families, Child Development Division and the Department of Education's division directors of Integrated Support for Learning and General Supervision and Monitoring
4. Within 15 days, the deputy commissioner and directors shall meet in person or by phone to resolve the dispute consistent with this interagency agreement and related federal and state statute and regulations.
5. Within 5 days of reaching the resolution, written notification of the resolution will be provided to the parties, as well as the chairperson of the ICC and the chairperson of the special education advisory council,
6. If the deputy commissioner and directors are unable to agree on a resolution or if either party to the complaint disagrees with the resolution, the dispute may be appealed to the Secretary of AHS and Commissioner of DOE. Appeals must be brought to the Secretary and the Commissioner no later than 45 days from the date of the decision rendered in subsection (B).

7. The Secretary and Commissioner may resolve the issues on appeal and render a written decision or may arrange for a hearing pursuant to Chapter 25 of Title 3. If a hearing is held, it shall be conducted by a hearing officer appointed by the Secretary and Commissioner. The Secretary and the Commissioner may affirm, reverse, or modify the proposals of the hearing officer.

8. During the pendency of an interagency dispute, the host agency is responsible to provide the services required by the approved IFSP/One Plan for eligible children and their families.

9. Nothing in this agreement shall be construed to limit any existing substantive or procedural protections of state or federal law or regulations.

#### **QUARTERLY and ANNUAL Reviews**

The Part C state administrator and the state 619 Coordinator will meet quarterly to review existing data and evaluate the implementation of this agreement and submit a brief report to the commissioners of DCF and DOE. The commissioner of DOE and the secretary of AHS, or their designees, will meet annually to review existing data and evaluate the implementation of this agreement in order to improve results for eligible children with disabilities and their families.

#### **NON DISCRIMINATION**

The parties shall comply with all applicable state and federal non-discrimination laws and regulations including the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973 and Vermont's Public Accommodations Act.

#### **AMENDMENTS OR MODIFICATIONS**

Any provision in this agreement may be rendered null and void by changes in federal or state law that prevent either or both parties from fulfilling the terms of the agreement. If this circumstance should arise, each party agrees to notify the other as soon as reasonably possible.

During the term of the agreement, either party that is a signatory to this agreement may submit a written request to amend or modify this agreement. When such a request is made, the parties shall meet without unnecessary delay to consider the proposed amendment.

**TERM**

This agreement in its present form or as modified shall be effective as of the date of signing and shall remain in effect for five years. The agreement shall be reviewed annually by the parties and may be extended by the mutual written agreement of the parties. Prior to the expiration of the agreement the parties shall meet to negotiate and execute a successor agreement. In the event a successor agreement is not in place when this agreement is due to expire, this agreement will remain in effect until a successor agreement is concluded.

\_\_\_\_\_  
Commissioner  
Department for Children and Families

\_\_\_\_\_  
Commissioner  
Department of Education

Date\_\_\_\_\_

Date\_\_\_\_\_

Agency of Human Services – AHS  
Department of Education – DOE  
Vermont State board of Education – VSBE  
Department for Children and Families – DCF  
Vermont Department of Health – VDH  
Department for Disabilities, Aging and Independent Living – DAAIL  
Department of Vermont Health Access – DVHA  
Children’s Integrated Services – CIS  
Children’s Integrated Services/Early Intervention - *CIS/EI Part C in Vermont*  
Early Essential Education, Part B - EEE  
Local Education Agency – LEA  
Early Intervention Program – EIP  
IFSP/One Plan – In Vermont the IFSP is called a One Plan