

Revocation of Parent Consent	
If a parent refused services from the district and only wanted services from the CHMS program, will they need to be referred under child find after July 1?	The ADE would encourage the center to inform the LEA of families who have signed Revocation of Parent Consent as those students will eventually enter the school system.
If a parent opts out of special education, will the child be able to remain at the EIDT center and receive dayhab services and any therapies they are currently receiving?	If a child meets the requirements to attend an EIDT center, then a child can continue to attend an EIDT center. Please refer to the EIDT manual, section II regarding programming: https://medicaid.mmis.arkansas.gov/provider/docs/eidt.aspx
Will previously CHMS centers continue to use the non-participation form in lieu of referring to the LEA?	Previous CHMS centers have always been obligated to refer a student to the LEA if a student is suspected to have a disability (Child Find obligation).
If a parent previously signed a non-participation form stating they did not want services from the LEA, does that form continue to stand, or should the EIDT refer these students now?	The ADE would suggest informing the LEA of families who have signed Revocation of Parent Consent as those students will eventually enter the school system.
Under preschool eligibility all most all students at CHMS would meet the IDEA requirement? Speech? OT? PT? Should these cases be identified for these types of Child Find?	A student attending a CHMS center would need to be referred to the LEA if it was suspected that the child had a disability and was in need of special education services.
MOU and Agreements	
Can the LEA's choose to enter an agreement for the EIDT centers to provide all special education services?	Yes.
If an EIDT center has an ADE licensed sped teacher who oversees teacher aides, who actually provide the direct instruction, can this arrangement fulfill the provision of special education instructional services listed on an IEP?	Special education services would need to be provided in a manner that conforms to Section 30 of the ADE Special Education and Related Services Procedural Requirements and Program Standards.
If a district contracts with the coop should the lea participate in the initial meetings?	The decision on who would participate in the IEP meeting would be up to the District and co-op. A representative from either the District or the co-op would need to be at the IEP conference.
What services will EIDT centers provide?	That is dependent upon if the LEA and the Center enter into a MOU. The LEA must determine how to best provide services for the child as outlined by the IEP team. Both agencies will need to work together to meet the needs of the child.
Can EIDT centers provide educational services if their teachers are employed by the EIDT Center	That is dependent upon if the LEA and the Center enter into a MOU. The LEA must determine how to best provide services for the child as outlined by the IEP team.
What role will our special education teachers have with this change?	That is dependent upon if the LEA and the Center enter into a MOU. The LEA must determine how to best provide services for the child as outlined by the IEP team.
CHMS vs DDTCS (VI-B funding)	
If the Center does not receive 6B funds how does this affect their Special Education services and Care Plans etc?	A Center that does not currently receives VI B funds is not obligated to provide special education services. Referrals for children suspected of having a disability under IDEA should be made to the LEA.
Why do CHMS centers have a different plan than DDTCS? We've ALL been EIDT for almost a year. Shouldn't we all be the same?	CHMS centers do not receive VI-B funds and are not responsible for special education services.
It is my understanding that CHMS/DDTCS centers merged into EIDT, so former CHMS should be following the same procedures and EIDTs, correct?	EIDT is the umbrella title for former CHMS and DDTCS centers. However, CHMS centers were never responsible for providing special education services and did not receive VI-B funding.
Is anything changing with the formerly CHMS centers after July 1, 2019?	No. CHMS centers were never responsible for providing special education services and have not received VI-B funding.
This new responsibility for LEAs only applies to students in EIDT centers that were formerly DDTCS? Not CHMS?	Correct. Former CHMS centers have always been obligated to refer children suspected as having a disability and in need of special education services to the LEA.
Can you re-read the first question and explain in more detail...regarding the difference in responsibilities for former DDTCS and CHMS	The webinar is posted on the ADE Early Childhood website.

Medicaid	
So if the student enters into the EIDT program will the EIDT program be able to bill for those students under Medicaid	Please refer to the EIDT Medicaid billing guidelines: https://medicaid.mmis.arkansas.gov/provider/docs/eidt.aspx
Timelines/Conferences	
Will the LEA assume the responsibility of the student at the time of the transfer conference or does it begin July 1st?	July 1, 2019
We have transition conferences set on many of the students on my EIDT list because they are transitioning to K, so what in addition to the transition conference do we need to address - many of the students will attend the EIDT Center until school starts	Extended School Year (ESY) should be discussed during the conference.
When will we need to start transitioning from Birth-2?	This change affects children aged 3-5. Children suspected of having a disability under IDEA will need to be referred to the LEA at least 60 working days prior to the child's third birthday.
Is there a deadline to enter into an agreement with LEA's?	No, but any agreements should be in place prior to IEP conferences to allow for parent notification.
Miscellaneous	
If the EIDT center is recommending services based on the medicaid model, and we are recommending a different level of service due to the educational model, do we write the educational level of services on the IEP?	Services on an IEP are determined by the IEP team based upon a child's needs.
Progress notes, do you want daily progress notes including daily therapy notes printed and copied off?	The LEA would need to clarify what specific documents they need and in what format.
Will the IEP recommend therapy times or will we continue to go off the medical treatment plan for therapy times?	Services on an IEP are determined by the IEP team based upon a child's needs. EIDT centers may provide medically relevant therapy outside the IEP if appropriate.
What all services are considered sp. ed. services?	Is question in relation to schedule of services on the IEP?
Will the IEP and ITP be two separate documents?	Yes.
Will there be some sort of standard letter we can send to parents explaining the changes and notifying them who their LEA contact will be?	The ADE has prepared a sample letter that is available on the ADE Early Childhood webpage. LEAs and EIDT centers should work together to determine process for notifying families of these changes.
How will preschool funding be adjusted to serve these additional students?	At this time ADE is determining needed supports for upcoming conferences. The ADE will be closely monitoring changes in LEA child counts through a link on the EC page.
Is there any DHS or PASS reason that would prohibit the centers from employing teachers for education?	Please refer to the EIDT manual and PASSE information: https://medicaid.mmis.arkansas.gov/provider/docs/eidt.aspx . https://humanservices.arkansas.gov/about-dhs/dms/passe <i>This question will be shared with DHS.</i>
Which children do we start the referral for? only new children enrolling and children turning three? or all our children in our center who are currently 3-5?	Is this question in regard to children in former CHMS centers?
Is the use of "indirect services" appropriate in Early Childhood? Could it be used for co-ops to monitor progress if that was part of the mou?	Special education services would need to be provided in a manner that conforms to Section 30 of the ADE Special Education and Related Services Procedural Requirements and Program Standards. Specific inquiries regarding service models will be handled on an individual basis.