

# FORM EI-12: DOCUMENTATION OF DIAGNOSED CONDITION

## GUIDANCE RESOURCE

### Form Guidance

This form is used to establish eligibility for early intervention (EI) when a child has a diagnosis likely to cause a developmental delay and the diagnosis is **not** listed in Appendix C of OAC 5123-10-02.

When the early intervention service coordinator (EISC) becomes aware of a child's diagnosis that does not result in automatic eligibility, but is likely to cause a developmental delay, the EISC explains this eligibility process to the parent(s) and that written consent is needed to exchange information about the child's diagnosis with a medical professional. If the parent agrees to send the form to the medical professional, they sign and date the consent boxes. The EISC ensures that the top portion of the form and the EISC contact information are complete and sends the form to the licensed professional with parental consent. The licensed professional confirms the diagnosed condition and likelihood of delay, and sends the completed form back to the EISC, establishing EI eligibility for the child. Form EI-12 must be sent to the licensed professional early within the 45-day timeline to allow time for the form to be returned to the EISC to establish eligibility. If a fully completed form is not returned, or the parent does not consent to send the form to the medical professional, the EISC must coordinate a developmental evaluation (with consent) to determine EI eligibility within the required timeline.

For eligibility to be determined using this form, all fields must be completed, and the completed form must be received by the EISC within the 45-day timeline. The child's specific diagnosis must be documented within the appropriate box. The date that the form is returned, fully completed, to the EISC is the EI eligibility date. Eligibility established on Form EI-12 is valid until the child's third birthday.

Consent to release/share information is built into the form, so it is not necessary to send a separate EI-06 (Consent for Release or Exchange of Information) to have this form completed by the licensed professional.

EISCs should ensure that their contact information is accurate at the bottom of the form so that the licensed professional is able to return the completed form within a timely manner. All conversations with the parent about this form and the associated EI activity must be documented in the early intervention case notes.

Relationships with local physicians and office staff help establish reliable contacts to follow up on referrals, with parent consent. The established contacts can also assist with the timely completion and return of Form EI-12. It is recommended that the EI service coordination

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agency provide continued education on the importance of completing this form in its entirety and the effects of a prompt return to the EI Service Coordinator/Coordination Agency.

### EISC Explanation of Form to Parents

*“There are two ways to determine eligibility for early intervention. One is by conducting a developmental evaluation, and the other is by documenting that a child's diagnosis has a likelihood of resulting in a developmental delay. There are some diagnoses that have been determined to have such a strong likelihood of delay that eligibility is automatic when a document confirms the diagnosis. For other diagnoses, a licensed professional can complete a form confirming the diagnosis and likelihood of a delay, and this form will establish eligibility until your child turns three.*

*Does your child have any medical or physical conditions that you think could potentially impact development? It could be any medical condition that might impact things like your child's ability to see, hear, move, communicate, interact with others, or do things independently. Would you like to have the form sent to the physician? You always have the right to a full developmental evaluation to determine eligibility, if documentation of your child's diagnosis can't be obtained.”*

### Rule References

OAC 5123-10-01(C)(1)(e)

OAC 5123-10-01(F)(2)

OAC 5123-10-02(D)(1)(b)

OAC 5123-10-02 (O)(1)(c)

OAC 5123-10-02 Appendix C