



## Developmental Therapy Eligibility Checklist

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_

Meets Eligibility: Yes \_\_\_\_\_ No \_\_\_\_\_ Diagnosis: \_\_\_\_\_ Code: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Eligible applicants must meet criteria for each of the three (3) categories listed below and have acquired the disability during the developmental growth stage before the age of twenty-two (22). See the Developmental Disability Determination Guidelines/Checklists for complete interpretive guidelines.

Idaho Code, 66-402(4): Developmental Disability means a chronic disability of a person which appears before the age of twenty-two (22) years of age and:

- a. \_\_\_\_\_ Is attributable to an impairment, such as
- \_\_\_\_\_ mental retardation
  - \_\_\_\_\_ cerebral palsy
  - \_\_\_\_\_ epilepsy
  - \_\_\_\_\_ autism
  - \_\_\_\_\_ or other condition found to be closely related to or similar to one of these impairments that requires similar treatment or services, or is attributable to dyslexia resulting from such impairments; and

Source and Date of Information

- b. \_\_\_\_\_ Results in \*substantial functional limitations in **three (3) or more** of the following areas of major life activity;
- \_\_\_\_\_ self-care
  - \_\_\_\_\_ receptive and expressive language
  - \_\_\_\_\_ learning
  - \_\_\_\_\_ mobility
  - \_\_\_\_\_ self-direction
  - \_\_\_\_\_ capacity for independent living
  - \_\_\_\_\_ or economic self-sufficiency; and

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- c. \_\_\_\_\_ Reflects the needs for a combination and sequence of special, interdisciplinary or generic care, treatment or other services which are of life-long or extended duration and individually planned and coordinated.

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\*Substantial functional limitations are considered to be present when scores of functional assessment in the applicable are **two or more standard deviations below the norm**. See the DD Determination Guidelines/Checklist for a full interpretive guideline.