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HOUSE JOINT RESOLUTION NO. 581

Offered January 20, 1997

Continuing the Joint Subcommittee Studying Early Intervention Services for Infants and Toddlers with Disabilities.

Patrons—Christian, Albo, Behm, Bennett, Bloxom, Brickley, Cox, Crittenden, Cunningham, Darner, Davies, Deeds, Drake, Grayson, Hall, Jones, D.C., Jones, J.C., Katzen, Keating, Landes, Lovelace, Marshall, May, McClure, McDonnell, Mims, Moore, Morgan, Nelms, Phillips, Plum, Puller, Putney, Robinson, Rust, Shuler, Spruill, Van Landingham and Wardrup; Senators: Howell, Lambert, Marsh, Miller, Y.B., Trumbo, Wampler and Williams

Referred to Committee on Rules

WHEREAS, the Joint Subcommittee Studying Early Intervention Services for Handicapped Infants and Toddlers was established in 1990 by House Joint Resolution No. 164 to study the programmatic and fiscal impact of the Commonwealth's implementing Part H of the Education of the Handicapped Act; and

WHEREAS, the joint subcommittee was continued in 1991 by HJR 380, in 1992 by HJR 187, in 1993 by HJR 627, in 1994 by HJR 196, and in 1995 by HJR 511; and

WHEREAS, Part H of the Education of the Handicapped Act was subsequently reauthorized by Congress as Part H of the Individuals with Disabilities Education Act; and

WHEREAS, the change in the name of the Act reflected the preference for the use of "disabled" over "handicapped" and the joint subcommittee voted to change its name to the Joint Subcommittee Studying Early Intervention Services for Infants and Toddlers with Disabilities; and

WHEREAS, Part H is a discretionary five-year federal grant program of early intervention services to infants and toddlers with disabilities and to their families; and

WHEREAS, the Department of Mental Health, Mental Retardation and Substance Abuse Services was designated by the Governor as the lead agency for the development and implementation of Part H, which is required to be a statewide, comprehensive, coordinated, and interagency system; and

WHEREAS, there must be substantial cooperation in complex budget and service delivery areas among the state agencies involved in services for infants and toddlers with disabilities, particularly agencies under the Secretary of Health and Human Resources and the Secretary of Education; and

WHEREAS, the joint subcommittee recognizes that early intervention services are of vital importance to Virginia's families with infants and toddlers with disabilities and that, because early intervention services can prevent or mitigate numerous problems, the expansion of early intervention services will ultimately benefit all citizens of the Commonwealth; and

WHEREAS, Virginia entered into full implementation in September 1993, when it commenced its fifth year of the five-year grant program; and

WHEREAS, the joint subcommittee has made a number of recommendations to further the implementation of early intervention services in Virginia, particularly those regarding the funding of services, and to encourage state and local interagency collaboration; and

WHEREAS, although the joint subcommittee's recommendations are in the process of being implemented, the process is time-consuming and complex, and the subcommittee feels it is advisable to continue to monitor the progress of those recommendations; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee Studying Early Intervention Services for Infants and Toddlers with Disabilities be continued to monitor the implementation of recommendations that it has made regarding (i) ways of funding early intervention services, including expanding the use of Medicaid, particularly for service coordination and case management; (ii) ways of increasing interagency participation in establishing, providing and funding early intervention services; (iii) ways of reaching populations that are underserved because of cultural diversity; (iv) the impact of serving at-risk children; (v) how responsibility should be delineated for two-year-olds who may be eligible for special education and/or early intervention services; (vi) the extent of and remedies for shortages of personnel who provide early intervention services; and (vii) private insurance issues, including mandated insurance benefits for early intervention services. The members duly appointed pursuant to HJR 511 (1995) shall continue to serve. Vacancies shall be filled in accordance with the enabling legislation.

The Departments of Health, Education, Medical Assistance Services, Mental Health, Mental Retardation and Substance Abuse Services, Planning and Budget, and Social Services; the Departments for the Visually Handicapped, for the Deaf and Hard-of-Hearing, and for Rights of Virginians with

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60 Disabilities; and the Bureau of Insurance within the State Corporation Commission shall assist the joint
61 subcommittee.

62 The joint subcommittee shall complete its work in time to submit its findings and recommendations
63 to the Governor and the 1999 Session of the General Assembly as provided in the procedures for the
64 Division of Legislative Automated Systems for the processing of legislative documents.

65 The indirect and direct costs for this study shall be assumed by federal grant funds to the
66 Commonwealth under Part H of the Individuals with Disabilities Education Act.

67 Implementation of this resolution is subject to subsequent approval and certification by the Joint
68 Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the
69 study.