

By: Moody

To: Public Health and  
Welfare

HOUSE BILL NO. 771  
(As Passed the House)

1 AN ACT TO AMEND SECTIONS 41-87-5, 41-87-7, 41-87-9, 41-87-11,  
2 41-87-13, 41-87-15, 41-90-3, 41-90-5 AND 41-90-9, MISSISSIPPI CODE  
3 OF 1972, TO CORRECT CERTAIN REFERENCES TO THE FEDERAL INDIVIDUALS  
4 WITH DISABILITIES EDUCATION ACT (IDEA) IN MISSISSIPPI'S EARLY  
5 INTERVENTION PROGRAM FOR INFANTS AND TODDLERS, AND TO CLARIFY  
6 CERTAIN PROVISIONS ADMINISTERED BY THE STATE DEPARTMENT OF HEALTH  
7 RELATING TO HEARING IMPAIRED CHILDREN; AND FOR RELATED PURPOSES.

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

9 SECTION 1. Section 41-87-5, Mississippi Code of 1972, is  
10 amended as follows:[JU1]

11 41-87-5. Unless the context requires otherwise, the  
12 following definitions in this section apply throughout this  
13 chapter:

14 (a) "Eligible infants and toddlers" or "eligible  
15 children" means children from birth through thirty-six (36) months  
16 of age who need early intervention services because they:

17 (i) Are experiencing developmental delays as  
18 measured by appropriate diagnostic instruments and procedures in  
19 one or more of the following areas:

20 (A) Cognitive development;

21 (B) Physical development, including vision or  
22 hearing;

23 (C) Communication development;

24 (D) Social or emotional development;

25 (E) Adaptive development.

26 (ii) Have a diagnosed physical or mental  
27 condition, as defined in state policy, that has a high probability  
28 of resulting in developmental delay.

29 (iii) Are at risk of having substantial  
30 developmental delays if early intervention services are not  
31 provided due to conditions as defined in state policy. (This  
32 category may be served at the discretion of the lead agency  
33 contingent upon available resources.)

34 (b) "Early intervention services" are developmental  
35 services that:

36 (i) Are provided under public supervision;

37 (ii) Are provided at no cost except where federal  
38 or state law provides for a system of payments by families,  
39 including a schedule of sliding fees;

40 (iii) Are designed to meet the developmental needs  
41 of an infant or toddler with a disability in any one or more of  
42 the following areas:

43 (A) Physical development;

44 (B) Cognitive development;

45 (C) Communication development;

46 (D) Social or emotional development; or

47 (E) Adaptive development;

48 (iv) Meet the requirements of Part C of the  
49 Individuals with Disabilities Education Act (IDEA) and the early  
50 intervention standards of the State of Mississippi;

51 (v) Include, but are not limited to, the following  
52 services:

53 (A) Assistive technology devices and  
54 assistive technology services;

55 (B) Audiology;

56 (C) Family training, counseling and home  
57 visits;

58 (D) Health services necessary to enable a  
59 child to benefit from other early intervention services;

60 (E) Medical services only for diagnostic or  
61 evaluation purposes;

62 (F) Nutrition services;  
63 (G) Occupational therapy;  
64 (H) Physical therapy;  
65 (I) Psychological services;  
66 (J) Service coordination (case management);  
67 (K) Social work services;  
68 (L) Special instruction;  
69 (M) Speech-language pathology;  
70 (N) Transportation and related costs that are  
71 necessary to enable an infant or toddler and her/his family to  
72 receive early intervention services; and  
73 (O) Vision services;  
74 (vi) Are provided by qualified personnel as  
75 determined by the state's personnel standards, including:  
76 (A) Audiologists;  
77 (B) Family therapists;  
78 (C) Nurses;  
79 (D) Nutritionists;  
80 (E) Occupational therapists and licensed  
81 assistants;  
82 (F) Orientation and mobility specialists;  
83 (G) Pediatricians and other physicians;  
84 (H) Physical therapists and licensed  
85 assistants;  
86 (I) Psychologists;  
87 (J) Social workers;  
88 (K) Special educators;  
89 (L) Speech and language pathologists;  
90 (vii) Are provided, to the maximum extent  
91 appropriate, in natural environments, including the home, and  
92 community settings in which children without disabilities would  
93 participate;  
94 (viii) Are provided in conformity with an

95 individualized family service plan.

96 (c) "Council" means the State Interagency Coordinating  
97 Council established under Section 41-87-7.

98 (d) "Lead agency" means the State Department of Health.

99 (e) "Participating agencies" includes, but is not  
100 limited to, the State Department of Education, the Department of  
101 Human Services, the State Department of Health, the Division of  
102 Medicaid, the State Department of Mental Health, the University  
103 Medical Center, the Board of Trustees of State Institutions of  
104 Higher Learning and the State Board for Community and Junior  
105 Colleges.

106 (f) "Local community" means a county either jointly,  
107 severally, or a portion thereof, participating in the provision of  
108 early intervention services.

109 (g) "Primary service agency" means the agency, whether  
110 a state agency, local agency, local interagency council or service  
111 provider which is designated by the lead agency to serve as the  
112 fiscal and contracting agent for a local community.

113 (h) "Multidisciplinary team" means a group comprised of  
114 the parent(s) or legal guardian and the service providers, as  
115 appropriate, described in paragraph (b) of this section, who are  
116 assembled for the purposes of:

117 (i) Assessing the developmental needs of an infant  
118 or toddler;

119 (ii) Developing the individualized family service  
120 plan; and

121 (iii) Providing the infant or toddler and his or  
122 her family with the appropriate early intervention services as  
123 detailed in the individualized family service plan.

124 (i) "Individualized family service plan" means a  
125 written plan designed to address the needs of the infant or  
126 toddler and his or her family as specified under Section 41-87-13.

127 (j) "Early intervention standards" means those

128 standards established by any agency or agencies statutorily  
129 designated the responsibility to establish standards for infants  
130 and toddlers with disabilities, in coordination with the council  
131 and in accordance with Part C of IDEA.

132 (k) "Early intervention system" means the total  
133 collaborative effort in the state that is directed at meeting the  
134 needs of eligible children and their families.

135 (l) "Parent" means a parent, a guardian, a person  
136 acting as a parent of a child, or an appointed surrogate parent.  
137 The term does not include the state if the child is a ward of the  
138 state. When a child is the ward of the state, a Department of  
139 Human Services representative will act as parent for purposes of  
140 service authorization.

141 (m) "Policies" means the state statutes, regulations,  
142 Governor's orders, directives by the lead agency, or other written  
143 documents that represent the state's position concerning any  
144 matter covered under this chapter.

145 (n) "Regulations" means the United States Department of  
146 Education's regulations concerning the governance and  
147 implementation of Part C of IDEA, the Early Intervention Program  
148 for Infants and Toddlers with Disabilities.

149 SECTION 2. Section 41-87-7, Mississippi Code of 1972, is  
150 amended as follows:[JU2]

151 41-87-7. (1) For the purposes of implementing this chapter,  
152 the Governor shall appoint a State Interagency Coordinating  
153 Council \* \* \*.

154 (2) The council shall be appointed by the Governor. In  
155 making the appointments to the council, the Governor shall ensure  
156 that the membership of the council reasonably represents the  
157 population of the state.

158 (a) The Governor shall designate a member of the  
159 council to serve as the chairperson of the council or shall  
160 require the council to so designate such a member. Any member of

161 the council who is a representative of the lead agency may not  
162 serve as the chairperson of the council.

163 (b) The council shall be composed as follows:

164 (i) At least twenty percent (20%) of the members  
165 shall be parents, including minority parents, of infants or  
166 toddlers with disabilities or children with disabilities aged  
167 twelve (12) or younger, with knowledge of, or experience with,  
168 programs for infants and toddlers with disabilities. At least one  
169 (1) such member shall be a parent of an infant or toddler with a  
170 disability or a child with a disability aged six (6) or younger;

171 (ii) At least twenty percent (20%) of the members  
172 shall be public or private providers of early intervention  
173 services;

174 (iii) At least one (1) member shall be from the  
175 State Legislature;

176 (iv) At least one (1) member shall be involved in  
177 personnel preparation;

178 (v) At least one (1) member shall be from each of  
179 the state agencies involved in the provision of or payment for  
180 early intervention services to infants and toddlers with  
181 disabilities and their families and shall have sufficient  
182 authority to engage in policy planning and implementation on  
183 behalf of such agencies;

184 (vi) At least one (1) member shall be from the  
185 state educational agency responsible for preschool services to  
186 children with disabilities and shall have sufficient authority to  
187 engage in policy planning and implementation on behalf of such  
188 agency;

189 (vii) At least one (1) member shall be from the  
190 agency responsible for the state governance of insurance,  
191 especially in the area of health insurance;

192 (viii) At least one (1) member must be from a  
193 Head Start agency or program in the state;

194                    (ix) At least one (1) member must be from a state  
195 agency responsible for child care;

196                    (x) The council may include other members selected  
197 by the Governor, including a representative from the Bureau of  
198 Indian Affairs (BIA), or where there is no BIA operated or funded  
199 school, from the Indian Health Service or the tribe/tribal  
200 council.

201            (3) The council shall meet at least quarterly in such places  
202 as it deems necessary. The meetings shall be publicly announced,  
203 and to the extent appropriate, open and accessible to the general  
204 public.

205            (4) The council may prepare and approve a budget using Part  
206 C funds to conduct hearings and forums, to reimburse members of  
207 the council for reasonable and necessary expenses for attending  
208 council meetings and performing council duties (including child  
209 care for parent representatives), to pay compensation to a member  
210 of the council if such member is not employed or must forfeit  
211 wages from other employment when performing official council  
212 business, to hire staff, and to obtain the services of such  
213 professional, technical and clerical personnel as may be necessary  
214 to carry out its functions under this chapter.

215            (5) The council shall:

216                    (a) Advise and assist the lead agency in the  
217 performance of its responsibilities, particularly the  
218 identification of the sources of fiscal and other support for  
219 services for early intervention programs, assignment of financial  
220 responsibility by the appropriate agency, and the promotion of the  
221 interagency agreements;

222                    (b) Advise and assist the lead agency in the  
223 preparation of applications for funding under Part C of Public Law  
224 105-17;

225                    (c) Prepare and submit an annual report to the Governor  
226 and to the United States Secretary of Education on the status of

227 early intervention programs for eligible infants and toddlers and  
228 their families operated within the state;

229 (d) Advise and assist the lead agency in the  
230 development and implementation of the policies that constitute the  
231 statewide system;

232 (e) Assist the lead agency in achieving the full  
233 participation, coordination and cooperation of all appropriate  
234 public agencies in the state;

235 (f) Assist the lead agency in the effective  
236 implementation of the statewide system, by establishing a process  
237 that includes:

238 (i) Seeking information from service providers,  
239 service coordinators, parents and others about any federal, state  
240 or local policies that impede timely service delivery; and

241 (ii) Taking steps to ensure that any policy  
242 problems are identified and resolved;

243 (g) To the extent appropriate, assist the lead agency  
244 in the resolution of disputes;

245 (h) Advise and assist the state educational agency  
246 regarding the transition of toddlers with disabilities to services  
247 provided under Section 619 of Part B of Public Law 105-17, to the  
248 extent such services are appropriate; and

249 (i) Perform other functions as defined in the  
250 regulations.

251 (6) The council may advise and assist the lead agency and  
252 the state educational agency regarding the provision of  
253 appropriate services for children aged birth to five (5),  
254 inclusive. The council may advise the appropriate agencies in the  
255 state with respect to the integration of services for infants and  
256 toddlers with disabilities and at-risk infants and toddlers and  
257 their families, regardless of whether at-risk infants and toddlers  
258 are eligible for early intervention services in the state. The  
259 council shall advise and assist the state educational agency



260 regarding the transition of toddlers with disabilities to services  
261 provided under Part B of IDEA to preschool and other appropriate  
262 services.

263 (7) No member of the council shall cast a vote on any matter  
264 which would provide direct financial benefit to that member or  
265 otherwise give the appearance of a conflict of interest under  
266 state law.

267 SECTION 3. Section 41-87-9, Mississippi Code of 1972, is  
268 amended as follows:[JU3]

269 41-87-9. (1) A statewide system of coordinated,  
270 comprehensive, multidisciplinary, interagency programs providing  
271 appropriate early intervention services to all eligible infants  
272 and toddlers and their families, including eligible Indian infants  
273 and toddlers and their families on reservations, shall include the  
274 following minimum components:

275 (a) Eligibility criteria and procedures including a  
276 definition of the term "developmentally delayed" that will be used  
277 by the state in carrying out programs under this chapter;

278 (b) Timetables for ensuring that appropriate early  
279 intervention services will be available to all eligible children  
280 in the state, including Indian infants and toddlers on  
281 reservations;

282 (c) A timely, comprehensive, multidisciplinary  
283 evaluation of the functioning of each infant and toddler with a  
284 disability in the state, and a family-directed assessment of the  
285 resources, priorities and concerns of the family and the  
286 identification of the supports and services necessary to enhance  
287 the family's capacity to meet the developmental needs of their  
288 infant or toddler with a disability;

289 (d) For each eligible child, an individualized family  
290 service plan including service coordination (case management)  
291 services in accordance with such service plan. The individualized  
292 family services plan shall be in writing, done in accordance with

293 Part C regulations, and contain a statement of the natural  
294 environments in which early intervention services shall  
295 appropriately be provided, as well as all components listed in the  
296 Part C regulations;

297 (e) A comprehensive interagency child find system that  
298 includes a system for making referrals to service providers that  
299 includes timelines and provides for participation by primary  
300 referral sources;

301 (f) A public awareness program focusing on early  
302 identification of infants and toddlers with disabilities,  
303 including preparation and dissemination by the lead agency to all  
304 primary referral sources of information materials for parents on  
305 the availability of early intervention services, and procedures  
306 for determining the extent to which primary referral sources,  
307 especially hospitals and physicians, disseminate information on  
308 the availability of early intervention services to parents of  
309 infants with disabilities;

310 (g) A central directory which includes early  
311 intervention services, resources and experts available in the  
312 state and research and demonstration projects being conducted in  
313 the state;

314 (h) A comprehensive system of personnel development,  
315 including the training of paraprofessionals and the training of  
316 primary referral sources respecting the basic components of early  
317 intervention services available in the state, that is consistent  
318 with the comprehensive system of personnel development described  
319 in Part B of IDEA and that may include:

320 (i) Implementing innovative strategies and  
321 activities for the recruitment and retention of early intervention  
322 service providers;

323 (ii) Promoting the preparation of early  
324 intervention providers who are fully and appropriately qualified  
325 to provide early intervention services under this chapter;

326 (iii) Training personnel to work in rural areas;

327 and

328 (iv) Training personnel to coordinate transition  
329 services for infants and toddlers with disabilities from an early  
330 intervention program in the early intervention system to a  
331 preschool program under Part B, Section 619 of IDEA;

332 (i) A single line of responsibility in the lead agency  
333 for carrying out:

334 (i) The general administration and supervision of  
335 programs and activities receiving assistance under Part C of IDEA,  
336 and the monitoring of programs and activities used by the state to  
337 carry out this chapter, whether or not such programs or activities  
338 are receiving assistance made available under Part C, to ensure  
339 that the state complies with Part C;

340 (ii) The identification and coordination of all  
341 available resources within the state from federal, state, local  
342 and private sources;

343 (iii) The assignment of financial responsibility  
344 in accordance with state and federal law to the appropriate  
345 agencies;

346 (iv) The development of procedures to ensure that  
347 services are provided to infants and toddlers with disabilities  
348 and their families in a timely manner pending the resolution of  
349 any disputes among public agencies or service providers;

350 (v) The resolution of intra- and interagency  
351 disputes; and

352 (vi) The entry into formal interagency agreements  
353 that define the financial responsibility of each agency for paying  
354 for early intervention services (consistent with state law) and  
355 procedures for resolving disputes and that include all additional  
356 components necessary to ensure meaningful cooperation and  
357 coordination;

358 (j) A policy pertaining to contracting or making

359 arrangements with service providers to provide early intervention  
360 services in the state as a part of the early intervention system  
361 in accordance with state law, state regulation and Part C of IDEA;

362 (k) A procedure for timely reimbursement of funds used  
363 in accordance with Section 41-87-15;

364 (l) Procedural safeguards with respect for programs  
365 participating in the early intervention system;

366 (m) Policies and procedures relating to the  
367 establishment and maintenance of standards to ensure that  
368 personnel necessary to implement the early intervention system are  
369 adequately and appropriately prepared and trained including:

370 (i) The establishment and maintenance of standards  
371 which are consistent with any state-approved or recognized  
372 certification, licensing, registration or other comparable  
373 requirements which apply to the area in which such personnel are  
374 providing early intervention services; and

375 (ii) To the extent such standards are not based on  
376 the highest requirements of the state applicable to a specific  
377 profession or discipline, the steps the state is taking to require  
378 the retraining or hiring of personnel that meet appropriate  
379 professional requirements in the state;

380 (n) A system for compiling data on the number of  
381 infants and toddlers with disabilities and their families in the  
382 state in need of appropriate early intervention services, the  
383 numbers of such infants and toddlers and their families served,  
384 the types of services provided, and other information required by  
385 the United States Secretary of Education, or state regulation.

386 SECTION 4. Section 41-87-11, Mississippi Code of 1972, is  
387 amended as follows:[JU4]

388 41-87-11. (1) The lead agency shall have the following  
389 responsibilities in the implementation of this chapter:

390 (a) General administering and supervising programs and  
391 activities receiving Part C funds and the monitoring of programs

392 and activities used by the state to carry out this chapter,  
393 whether or not such programs or activities are receiving Part C  
394 funds, to ensure that the state complies with this chapter;

395 (b) Identifying and coordinating all available  
396 financial resources within the state from federal, state, local  
397 and private sources;

398 (c) Developing procedures to ensure that services are  
399 provided to eligible children and their families in a timely  
400 manner pending the resolution of any disputes among public  
401 agencies or service providers;

402 (d) Ensuring effective implementation of procedural  
403 safeguards by each public agency in the state that is involved in  
404 the provision of early intervention services;

405 (e) Entering into formal interagency agreements that  
406 define the financial responsibility of each agency for paying for  
407 early intervention services (consistent with other state laws) and  
408 procedures for resolving intra- and interagency disputes and that  
409 include all additional components necessary to ensure meaningful  
410 cooperation;

411 (f) Entering into contracts with agencies within a  
412 local community which have been designated by the lead agency as  
413 being a primary service agency within the community;

414 (g) Developing procedures to ensure that available  
415 services are provided to eligible children and their families in a  
416 timely manner, pending the resolution of disputes among public  
417 agencies or service providers;

418 (h) Resolving individual disputes in accordance with  
419 the regulations;

420 (i) Adopting and using proper methods of administering  
421 each program including:

422 (i) Monitoring of agencies, institutions and  
423 organizations receiving assistance under Part C of Public Law  
424 105-17;

425                   (ii) Enforcing of any obligations imposed on those  
426 agencies providing early intervention services according to Public  
427 Law 105-17 and the standards of the state;

428                   (iii) Providing technical assistance to agencies  
429 in the program;

430                   (iv) Correction of deficiencies that are  
431 identified through monitoring;

432                   (j) Establishing state policies related to how services  
433 to children eligible under this chapter and their families will be  
434 paid for under the state's early intervention system in accordance  
435 with federal regulations;

436                   (k) Development of policies, standards and regulations  
437 necessary for implementation of the state early intervention plan  
438 that are in compliance with the federal regulations; and

439                   (l) Provision of technical assistance to localities in  
440 the establishment and operation of local interagency coordinating  
441 councils which may also be designated as primary service agencies  
442 for an area.

443                   (2) All participating agencies shall cooperate with the lead  
444 agency and the council in the implementation of this chapter.

445                   SECTION 5. Section 41-87-13, Mississippi Code of 1972, is  
446 amended as follows:[JU5]

447                   41-87-13. (1) Upon full implementation of the early  
448 intervention system, eligible infants and toddlers and their  
449 families shall receive the following, at no cost to the parents:

450                   (a) A comprehensive multidisciplinary evaluation and  
451 assessment of the needs of the infant and toddler and the  
452 concerns, priorities and resources of the family, and the  
453 identification of services to meet such needs;

454                   (b) An explanation of the assessment and all service  
455 options in the family's native language or through an interpreter  
456 for the deaf, if necessary, accommodating cultural differences;

457                   (c) A written individualized family service plan

458 developed according to the federal Part C regulations and the  
459 state guidelines and the recommendations by a multidisciplinary  
460 team with the parents as fully participating members of the team;  
461 (d) Case management/service coordination services; and  
462 (e) Procedural safeguards as outlined in state policy  
463 and according to the regulations.

464 (2) The individualized family service plan shall serve as  
465 the singular comprehensive service plan for all agencies involved  
466 in providing early intervention services to the infant or toddler  
467 and the family. Service plans from other agencies should be  
468 incorporated into the individualized family service plan on an  
469 individual basis.

470 (3) The contents of the individualized family service plan  
471 shall be fully explained to the parents or guardian, and informed  
472 written consent from such parents or guardian shall be obtained  
473 before the provision of early intervention services described in  
474 such plan. If such parents or guardian do not provide consent  
475 with respect to a particular early intervention service, then the  
476 early intervention services to which such consent is obtained  
477 shall be provided.

478 SECTION 6. Section 41-87-15, Mississippi Code of 1972, is  
479 amended as follows:[JU6]

480 41-87-15. Any federal funds made available to the state  
481 through Part C and any additional state funds appropriated for  
482 early intervention services after July 1, 1990, shall be used to  
483 supplement and increase the level of state, local and other  
484 federal funds that were expended for eligible children and their  
485 families before July 1, 1990. Funds provided under Part C may not  
486 be used to satisfy a financial commitment for services that would  
487 have been paid for from another public or private source if Part C  
488 money did not exist, except that whenever necessary to prevent a  
489 delay in the receipt of appropriate early intervention services by  
490 the infant or toddler or family in a timely fashion, Part C funds

491 may be used to pay the provider of the services pending  
492 reimbursement to the lead agency from the agency that has ultimate  
493 responsibility for the payment.

494 SECTION 7. Section 41-90-3, Mississippi Code of 1972, is  
495 amended as follows:[JU7]

496 41-90-3. Based on information from the American Academy of  
497 Pediatrics, the National Institutes of Health, American Academy of  
498 Audiology, and others who have completed extensive research on  
499 early identification of children with hearing loss, the  
500 Legislature finds an urgent need to establish an early  
501 identification system and a comprehensive service delivery system  
502 of developmentally appropriate services for infants and toddlers  
503 with hearing impairments and their families.

504 SECTION 8. Section 41-90-5, Mississippi Code of 1972, is  
505 amended as follows:[JU8]

506 41-90-5. (1) There is established a program of registration  
507 of newborns, infants and toddlers in the State of Mississippi who  
508 have impaired hearing. It is the purpose of this program to:

509 (a) Identify such children near birth in order that  
510 they and their parents or caregivers may be assisted in obtaining  
511 education, training, medical, diagnostic and therapeutic services,  
512 and other assistance necessary to enable them to become productive  
513 citizens of the state;

514 (b) Provide the state with the information necessary to  
515 effectively plan and establish a comprehensive system of  
516 developmentally appropriate services for deaf and hearing impaired  
517 infants and toddlers; and

518 (c) Reduce the likelihood of secondary disabling  
519 conditions for such children.

520 (2) The State Department of Health, as "lead agency" for the  
521 implementation of Part C of the Individuals with Disabilities  
522 Education Act (IDEA) and in accordance with the provisions of the  
523 Early Intervention Act for Infants and Toddlers (Section 41-87-1



524 through Section 41-87-19), shall maintain the Infant and Toddler  
525 Hearing Impaired Registry. The State Part C Coordinator is  
526 designated as the Director of the Registration Program and is  
527 charged with its administration. The State Part C Coordinator may  
528 designate a staff person (or persons) to carry out the provisions  
529 of this section. All hospitals in the state and other providers  
530 of services that have established hearing screening procedures for  
531 infants and toddlers ages birth through two (2) shall report to  
532 the State Part C Coordinator the appropriate personal and  
533 identifying information of infants and toddlers who fail to pass  
534 hearing screening procedures or have a progressive hearing loss  
535 indicator. All persons and providers in the state performing  
536 diagnostic hearing evaluation on infants and toddlers birth  
537 through age two (2) shall report to the State Part C Coordinator  
538 the appropriate personal and identifying information of infants  
539 and toddlers who fail to pass any diagnostic hearing evaluation  
540 tests. The information compiled and maintained in the registry  
541 shall be kept confidential in accordance with the applicable  
542 requirements and provisions of the Early Intervention Act for  
543 Infants and Toddlers (Section 41-87-1 through Section 41-87-19)  
544 and Part C of IDEA. Families of all registrants will be provided  
545 information on the availability of services in the state for  
546 children with hearing impairments, including those provided in  
547 accordance with Part C of IDEA through the statewide infant and  
548 toddler early intervention system.

549 (3) The Director of the Registration Program or his or her  
550 designee shall facilitate the reporting of infants and toddlers  
551 who fail to pass hearing screening by hospitals or any other  
552 person or provider of services, as provided in subsection (2) of  
553 this section. Reports may be submitted to the registry through  
554 the use of prepaid envelopes, sending of facsimiles, or telephone  
555 via statewide toll free number, or by any electronic data  
556 transmission process. It is the purpose of this subsection to

557 facilitate the reporting of infants and toddlers who may have  
558 impaired hearing. The reporting requirements shall be designed to  
559 be as simple as possible and easily completed by nonprofessional  
560 persons when necessary.

561 (4) The State Board of Health may adopt rules and  
562 regulations that the board considers necessary to implement this  
563 section. The board in its rules and regulations may specify the  
564 types of information to be provided to the State Part C  
565 Coordinator for the registry. The State Department of Health may:

566 (a) Execute contracts that the department deems  
567 necessary to carry out the provisions of this section;

568 (b) Acquire data from medical records for children  
569 suspected of having hearing impairments that are in the custody or  
570 under the control of laboratories, hospitals, audiologists,  
571 physicians, or other health care providers to record and analyze  
572 the data related to the child's hearing impairment or suspected  
573 hearing impairment;

574 (c) Specify protocols and equipment to be utilized  
575 during diagnostic evaluations of infants and toddlers;

576 (d) Compile and publish statistical and other studies  
577 derived from the patient data obtained under this section to  
578 provide in an accessible form information that is useful to  
579 physicians, other medical personnel, the State Department of  
580 Education, the Legislature and the general public;

581 (e) Comply with requirements as necessary to obtain  
582 federal funds in the maximum amounts and in the most advantageous  
583 portions possible; and

584 (f) Receive and use gifts made for the purpose of this  
585 section.

586 (5) Data obtained by the establishment of the registry that  
587 is taken directly from the medical records of a patient is for the  
588 confidential use of the Department of Health and the persons or  
589 public or private entities that the department determines are

590 necessary to carry out the intent of the registry. The data is  
591 privileged and may not be divulged or made public in a manner that  
592 discloses the identity of an individual whose medical records have  
593 been used for obtaining data for the registry. Information that  
594 may identify an individual whose medical records have been used  
595 for obtaining data for this section is not available for public  
596 inspection under the Mississippi Public Records Act of 1983.  
597 Statistical information collected under this section is public  
598 information.

599 (6) The following persons who act in compliance with this  
600 section are not civilly or criminally liable for furnishing  
601 information required by this section: a hospital, clinical  
602 laboratory or other health care facility, an audiologist, an  
603 administrator, officer or employee of a hospital or other health  
604 care facility, and a physician or employee of a physician.

605 SECTION 9. Section 41-90-9, Mississippi Code of 1972, is  
606 amended as follows:[JU9]

607 41-90-9. (1) The Legislature, knowing that hearing is  
608 essential to appropriate language development which is, in turn,  
609 directly related to communication skills and the ultimate ability  
610 of a child to attain his or her best level of education, and  
611 finding limited resources available in the state and few providers  
612 qualified to provide developmentally appropriate diagnostic and  
613 therapeutic services to infants and toddlers identified through  
614 the registration program, finds it necessary to supplement the  
615 efforts of the Department of Health as lead agency for the  
616 implementation of Part C of IDEA in its efforts to identify and  
617 provide developmentally appropriate services to hearing impaired  
618 infants and toddlers and their families.

619 (2) To assure the best possible developmental outcomes for  
620 infants and toddlers identified through the registration program,  
621 the Legislature shall provide fiscal support to the infant and  
622 toddler early intervention program of the Department of Health to:

623           (a) Establish positions reasonable and appropriate to  
624 insure that the provisions of Section 41-90-5 are carried out;

625           (b) Procure additional equipment to achieve universal  
626 hearing screening of one hundred percent (100%) of live births;

627           (c) Procure diagnostic equipment necessary to identify  
628 the cause of the child's hearing impairment and plan an  
629 appropriate course of therapeutic services;

630           (d) Assist with the establishment of preservice  
631 training programs on the education of hearing impaired children in  
632 the colleges and universities of the state;

633           (e) Assist with in-service training of existing  
634 providers of services to the hearing impaired population of the  
635 state to increase their skill in providing developmentally  
636 appropriate services to infants and toddlers and their families;

637           (f) Contract directly with individuals identified as  
638 qualified providers of services; and

639           (g) Provide training for appropriate staff of schools  
640 and school districts to insure the successful transition of  
641 children upon reaching age three (3) from Part C to services under  
642 Part B of IDEA through schools across the state or other  
643 appropriate services.

644           SECTION 10. This act shall take effect and be in force from  
645 and after July 1, 2000.