

By: Huggins (By Request)

To: Public Health and
Welfare

SENATE BILL NO. 2433

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 are 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 U.S. 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 results of all diagnostic tests. The information compiled and
539 maintained in the registry shall be kept confidential in
540 accordance with the applicable requirements and provisions of the
541 Early Intervention Act for Infants and Toddlers (Section 41-87-1
542 through Section 41-87-19) and Part C of IDEA. Families of all
543 registrants will be provided information on the availability of
544 services in the state for children with hearing impairments,
545 including those provided in accordance with Part C of IDEA through
546 the statewide infant and toddler early intervention system.

547 (3) The director of the registration program or his or her
548 designee shall facilitate the reporting of infants and toddlers
549 who fail to pass hearing screening by hospitals or any other
550 person or provider of services, as provided in subsection (2) of
551 this section. Reports may be submitted to the registry through
552 the use of prepaid envelopes, sending of facsimiles, or telephone
553 via statewide toll free number, or by any electronic data
554 transmission process. It is the purpose of this subsection to
555 facilitate the reporting of infants and toddlers who may have
556 impaired hearing. The reporting requirements shall be designed to
557 be as simple as possible and easily completed by nonprofessional
558 persons when necessary.

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

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

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

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

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

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

582 (f) Receive and use gifts made for the purpose of this
583 section.

584 (5) Data obtained by the establishment of the registry that
585 is taken directly from the medical records of a patient is for the
586 confidential use of the Department of Health and the persons or

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

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

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

605 41-90-9. (1) The Legislature, knowing that hearing is
606 essential to appropriate language development which is, in turn,
607 directly related to communication skills and the ultimate ability
608 of a child to attain his or her best level of education, and
609 finding limited resources available in the state and few providers
610 qualified to provide developmentally appropriate diagnostic and
611 therapeutic services to infants and toddlers identified through
612 the registration program, finds it necessary to supplement the
613 efforts of the Department of Health as lead agency for the
614 implementation of Part C of IDEA in its efforts to identify and

615 provide developmentally appropriate services to hearing impaired
616 infants and toddlers and their families.

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

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

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

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

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

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

635 (f) Contract directly with individuals identified as
636 qualified providers of services; and

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

642 SECTION 10. This act shall take effect and be in force from

643 and after July 1, 2000.