

# Exhibit G

## QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE

DEPARTMENT/AGENCY Department of Human Services  
DIVISION Division of Medical Services  
DIVISION DIRECTOR Dawn Zekis, Interim Director  
CONTACT PERSON Glenda Higgs  
ADDRESS P.O. Box 1437, Slot S295, Little Rock, AR 72203-1437  
PHONE NO. 320-6425 FAX NO. 682-2480 E-MAIL glenda.higgs@dhs.arkansas.gov  
NAME OF PRESENTER AT COMMITTEE MEETING Marilyn Strickland  
PRESENTER E-MAIL marilyn.strickland@dhs.arkansas.gov

### INSTRUCTIONS

- A. Please make copies of this form for future use.
- B. Please answer each question completely using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

**Donna K. Davis**  
**Administrative Rules Review Section**  
**Arkansas Legislative Council**  
**Bureau of Legislative Research**  
**One Capitol Mall, 5<sup>th</sup> Floor**  
**Little Rock, AR 72201**

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1. What is the short title of this rule? THERAPY-2-14

2. What is the subject of the proposed rule? Inclusion of new standardized testing for the therapy manual

3. Is this rule required to comply with a federal statute, rule, or regulation? Yes  No   
If yes, please provide the federal rule, regulation, and/or statute citation. \_\_\_\_\_

4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes  No   
If yes, what is the effective date of the emergency rule? \_\_\_\_\_

When does the emergency rule expire? \_\_\_\_\_

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act?

Yes  No

5. Is this a new rule? Yes  No   
If yes, please provide a brief summary explaining the regulation. \_\_\_\_\_

Does this repeal an existing rule? Yes  No

If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. \_\_\_\_\_

Is this an amendment to an existing rule? Yes  No

If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. Arkansas Statute 20-76-201

7. What is the purpose of this proposed rule? Why is it necessary? The purpose of the proposed rule is to make available current standard testing tools for provider use.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b).  
<https://www.medicaid.state.ar.us/InternetSolution/general/comment/comment.aspx>

9. Will a public hearing be held on this proposed rule? Yes  No   
If yes, please complete the following:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)  
August 5, 2014

11. What is the proposed effective date of this proposed rule? (Must provide a date.)  
November 1, 2014

12. Do you expect this rule to be controversial? Yes  No   
If yes, please explain. \_\_\_\_\_

13. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known.

**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY**

**DEPARTMENT**     Department of Human Services  
**DIVISION**        Division of Medical Services  
**PERSON COMPLETING THIS STATEMENT** Brian Jones  
**TELEPHONE NO.** 682-1857     **FAX NO.** 682-2480     **EMAIL:** brian.jones@dhs.arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

**SHORT TITLE OF THIS RULE**     THERAPY-2-14

- 1. Does this proposed, amended, or repealed rule have a financial impact?     Yes      No
  
- 2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?     Yes      No
  
- 3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered?     Yes      No

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;  
\_\_\_\_\_
  
- (b) The reason for adoption of the more costly rule;  
\_\_\_\_\_
  
- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;  
\_\_\_\_\_
  
- (d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.  
\_\_\_\_\_

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

- (a) What is the cost to implement the federal rule or regulation?

**Current Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total 0 \_\_\_\_\_

Total 0 \_\_\_\_\_

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue \_\_\_\_\_

General Revenue \_\_\_\_\_

Federal Funds \_\_\_\_\_

Federal Funds \_\_\_\_\_

Cash Funds \_\_\_\_\_

Cash Funds \_\_\_\_\_

Special Revenue \_\_\_\_\_

Special Revenue \_\_\_\_\_

Other (Identify) \_\_\_\_\_

Other (Identify) \_\_\_\_\_

Total \_\_\_\_\_

Total \_\_\_\_\_

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0 \_\_\_\_\_

\$ 0 \_\_\_\_\_

These are additional diagnostic tools that have been added to the provider manual to assess cognitive development. There is no cost or billing mechanism related to these tools for the State.

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes  No

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

(1) a statement of the rule's basis and purpose;

(2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;

(3) a description of the factual evidence that:

- (a) justifies the agency's need for the proposed rule; and
  - (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
- (a) the rule is achieving the statutory objectives;
  - (b) the benefits of the rule continue to justify its costs; and
  - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.

Summary  
Occupational, Physical and Speech Therapy Manual update 2-14

Effective November 1, 2014 the Occupational, Physical, Speech Therapy Services Manual is updated to include the following: Kaufman Assessment Battery for Children 2<sup>nd</sup> edition, The Miller Function and Participation Scales and the Goal-Oriented Assessment of Life Skills. The Medicaid Therapy Advisory group has reviewed and is supporting adding the new tests to ensure that evaluation of children is norm-referenced, standardized, age appropriate and specific to the disorder being assessed. This change does not have a fiscal impact.



**Division of Medical Services**  
Program Development & Quality Assurance

P.O. Box 1437, Slot S295 · Little Rock, AR 72203-1437  
501-320-6428 · Fax: 501-682-2480  
TDD/TTY: 501-682-6789



**TO:** Arkansas Medicaid Health Care Providers – Occupational, Physical, Speech Therapy Services

**DATE:** November 1, 2014

**SUBJECT:** Provider Manual Update Transmittal THERAPY-2-14

REMOVE

INSERT

Section	Date	Section	Date
214.310	9-1-13	214.310	11-1-14
214.320	9-1-13	214.320	11-1-14
214.420	11-1-10	214.420	11-1-14

**PROPOSED**

Explanation of Updates

Section 214.310 is updated to add the Miller Function and Participation Scales (M-Fun) to the list of standardized accepted tests for occupational therapy. It is also updated to add the Goal-Oriented Assessment of Life Skills (GOAL) to the list of supplemental accepted tests for occupational therapy.

Section 214.320 is updated to add the Goal-Oriented Assessment of Life Skills (GOAL) and the Miller Function and Participation Scales (M-Fun) to the list of supplemental accepted tests for physical therapy.

Section 214.420 is updated to add the Kaufman Assessment Battery Test for Children—Second Edition (KABC-II) to the list of traditional intelligence quotient tests.

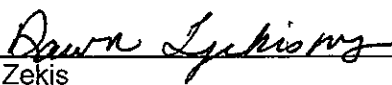
The paper version of this update transmittal includes revised pages that may be filed in your provider manual. See Section I for instructions on updating the paper version of the manual. For electronic versions, these changes have already been incorporated.

If you have questions regarding this transmittal, please contact the HP Enterprise Services Provider Assistance Center at 1-800-457-4454 (Toll-Free) within Arkansas or locally and Out-of-State at (501) 376-2211.

If you need this material in an alternative format, such as large print, please contact the Program Development and Quality Assurance Unit at (501) 320-6429.

Arkansas Medicaid provider manuals (including update transmittals), official notices, notices of rule making and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: [www.medicaid.state.ar.us](http://www.medicaid.state.ar.us).

Thank you for your participation in the Arkansas Medicaid Program.

  
Dawn Zekis  
Interim Director





TOC not required

PROPOSED

## 214.310 Accepted Tests for Occupational Therapy

11-1-14

Tests used must be norm-referenced, standardized, age appropriate and specific to the suspected area(s) of deficit. The following list of tests is not all-inclusive. When using a test that is not listed below, the provider must include an explanation and justification in the evaluation report to support the use of the chosen test. The *Mental Measurement Yearbook (MMY)* is the standard reference for determining the reliability and validity of the test(s) administered in an evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the lists of accepted tests:

- **STANDARDIZED:** Tests that are used to determine the presence or absence of deficits; any diagnostic tool or procedure that has a standardized administration and scoring process and compares results to an appropriate normative sample.
- **SUPPLEMENTAL:** Tests and tools that are used to further document deficits and support standardized results; any non-diagnostic tool that is a screening or is criterion-referenced, descriptive in design, a structured probe or an accepted clinical assessment procedure. Supplemental tests may not replace standardized tests.
- **CLINICAL OBSERVATIONS:** Clinical observations have a supplemental role in the evaluation process and should always be included. They are especially important when standard scores do not accurately reflect a child's deficits in order to qualify the child for therapy. A detailed narrative or description of a child's limitations and how they affect functional performance may constitute the primary justification of medical necessity when a standardized evaluation is inappropriate (see Section 214.400, part D, paragraph 8).

## A. Occupational Therapy Tests — Standardized

Test	Abbreviation
Adaptive Behavior Scale — School Edition	ABS-S
Ashworth Scale	
Box & Block Test of Manual Dexterity	BBT
Bruininks-Oseretsky Test of Motor Proficiency	BOMP
Bruininks-Oseretsky Test of Motor Proficiency — Second Edition	BOT-2
Children's Handwriting Evaluation Scale	CHES
Cognitive Performance Test	CPT
DeGangi-Berk Test of Sensory Integration	TSI
Developmental Test of Visual Motor Integration	VMi
Developmental Test of Visual Perception, Second Edition	DTVP
Evaluation Tool of Children's Handwriting	ETCH
Functional Independence Measure — young version	WeeFIM
Functional Independence Measure — 7 years of age to adult	FIM
Jacobs Prevocational Skills Assessment	
Kohlman Evaluation of Living Skills	KELS
Miller Function and Participation Scales	M-Fun

Test	Abbreviation
Milwaukee Evaluation of Daily Living Skills	MEDLS
Motor Free Visual Perception Test	MVPT
Motor Free Visual Perception Test — Revised	MVPT-R
Mullen Scales of Early Learning	MSEL
<b>NOTE: Although the MSEL is an accepted standardized test, it is felt by the Therapy Advisory Council (TAC) that an additional test should be administered.</b>	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales — 2	PDMS-2
Pediatric Evaluation of Disability Inventory	PEDI
<b>NOTE: The PEDI can also be used for older children whose functional abilities fall below that expected of a 7 ½ year old with no disabilities. In this case, the scaled score is the most appropriate score to consider.</b>	
Purdue Pegboard Test	
Range of Motion	ROM
Sensory Integration and Praxis Test	SIPT
Sensory Integration Inventory Revised	SII-R
Sensory Processing Measure	SPM
Sensory Processing Measure—Preschool	SPM-P
Sensory Profile, Adolescent/Adult	
Sensory Profile, Infant/Toddler	
Sensory Profile	
Sensory Profile School Companion	
Test of Handwriting Skills	THS
Test of Infant Motor Performance	TIMP
Test of Visual Motor Integration	TVMI
Test of Visual Motor Skills	TVMS
Test of Visual Motor Skills — R	TVMS-R
Test of Visual Perceptual Skills	TVPS
Test of Visual Perceptual Skills — Upper Level	TVPS
Toddler and Infant Motor Evaluation	TIME
Wide Range Assessment of Visual Motor Abilities	WRAVMA

## B. Occupational Therapy Tests — Supplemental

Test	Abbreviation
Analysis of Sensory Behavior Inventory	

Test	Abbreviation
Battelle Developmental Inventory	BDI
Bay Area Functional Performance Evaluation	BaFPE
Brigance Developmental Inventory	BDI
Developmental Assessment of Young Children	DAYC
Early Learning Accomplishment Profile	E-LAP
Erhardt Developmental Prehension Assessment	EDPA
Functional Profile	
Goal-Oriented Assessment of Life Skills	GOAL
Goodenough Harris Draw a Person Scale Test	
Grip and Pinch Strength	
Hawaii Early Learning Profile	HELP
Jordan Left-Right Reversal Test	JLRRT
Knox Preschool Play Scale	
Learning Accomplishment Profile	LAP
Manual Muscle Test	MMT
Miller Assessment for Preschoolers	MAP
School Function Assessment	SFA
Sensorimotor Performance Analysis	SPA
Sensory Integration Inventory	SII
Social Skills Rating System	SSRS

214.320

## Accepted Tests for Physical Therapy

11-1-14

Tests used must be norm-referenced, standardized, age appropriate and specific to the suspected area(s) of deficit. The following list of tests is not all-inclusive. When using a test that is not listed below, the provider must include an explanation and justification in the evaluation report to support the use of the chosen test. The *Mental Measurement Yearbook (MMY)* is the standard reference for determining the reliability and validity of the tests administered in an evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the following lists of accepted tests:

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functional performance may constitute the primary justification of medical necessity when a standardized evaluation is inappropriate (see Section 214.400, part D, paragraph 8).

A. Physical Therapy Tests — Standardized

Test	Abbreviation
Alberta Infant Motor Scale	AIMS
Adaptive Behavior Inventory	ABI
Adaptive Behavior Scale — School, Second Edition	ABS-S:2
Ashworth Scale	
Assessment of Adaptive Areas	AAA
Bruininks-Oseretsky test of Motor Proficiency	BOMP
Bruininks-Oseretsky Test of Motor Proficiency, Second Edition	BOT-2
Comprehensive Trail-Making Test	CTMT
Functional Independence Measure for Children	WeeFIM
Functional Independence Measure — 7 years of age to adult	FIM
Gross Motor Function Measure	GMFM
Movement Assessment Battery for Children	Movement ABC
Mullen Scales of Early Learning	MSEL
<b>NOTE: Although the MSEL is an accepted standardized test, it is felt by the Therapy Advisory Council (TAC) that an additional test should be administered.</b>	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales, Second Edition	PDMS-2
Pediatric Balance Scale	PBS
Pediatric Evaluation of Disability Inventory	PEDI
<b>NOTE: The PEDI can also be used for older children whose functional abilities fall below that expected of a 7 ½ year old with no disabilities. In this case, the scaled score is the most appropriate score to consider.</b>	
Range of Motion — Functional Performance Impairments	ROM
Sensory Processing Measure	SPM
Sensory Processing Measure-Preschool	SPM-P
Test of Infant Motor Performance	TIMP
Test of Gross Motor Development, Second Edition	TGMD-2
Toddler and Infant Motor Evaluation	

B. Physical Therapy Tests — Supplemental

Test	Abbreviation
Battelle Developmental Inventory	BDI

Test	Abbreviation
Bayley Scales of Infant Development, Second Edition	BSID-2
Brigance Developmental Inventory	BDI
Developmental Assessment for Students with Severe Disabilities, Second Edition	DASH-2
Developmental Assessment of Young Children	DAYC
Early Learning Accomplishment Profile	E-LAP
Goal-Oriented Assessment of Life Skills	GOAL
Hawaii Early Learning Profile	HELP
Learning Accomplishment Profile	LAP
Manual Muscle Test	MMT
Milani-Comparetti Developmental Examination	
Miller Assessment for Preschoolers	MAP
Miller Function and Participation Scales	M-Fun
Neonatal Behavioral Assessment Scale	NBAS

## C. Physical Therapy Tests — Piloted

Test	Abbreviation
Assessment for Persons Profoundly or Severely Impaired	APPSI

214.420

## Intelligence Quotient (IQ) Testing

11-1-14

Children receiving language intervention therapy must have cognitive testing once they reach ten (10) years of age. This also applies to home-schooled children. If the IQ score is higher than the qualifying language scores, the child qualifies for language therapy; if the IQ score is lower than the qualifying language test scores, the child would appear to be functioning at or above the expected level. In this case, the child may be denied for language therapy. If a provider determines that therapy is warranted, an in-depth functional profile must be documented. However, IQ scores are not required for children under ten (10) years of age.

## A. IQ Tests — Traditional

Test	Abbreviation
Stanford-Binet	S-B
The Wechsler Preschool & Primary Scales of Intelligence, Revised	WPPSI-R
Slosson	
Wechsler Intelligence Scale for Children, Third Edition	WISC-III
Kauffman Adolescent & Adult Intelligence Test	KAIT
Kaufman Assessment Battery Test for Children—Second Edition	KABC-II
Wechsler Adult Intelligence Scale, Third Edition	WAIS-III
Differential Ability Scales	DAS

<b>Test</b>	<b>Abbreviation</b>
Reynolds Intellectual Assessment Scales	RIAS

## B. Severe and Profound IQ Test/Non-Traditional — Supplemental — Norm-Reference

<b>Test</b>	<b>Abbreviation</b>
Comprehensive Test of Nonverbal Intelligence	CTONI
Test of Nonverbal Intelligence — 1997	TONI-3
Functional Linguistic Communication Inventory	FLCI

PROPOSED

Mark up

TOC not required

214.310 Accepted Tests for Occupational Therapy

9-4-1311-1-14

Tests used must be norm-referenced, standardized, age appropriate and specific to the suspected area(s) of deficit. The following list of tests is not all-inclusive. When using a test that is not listed below, the provider must include an explanation and justification in the evaluation report to support the use of the chosen test. The *Mental Measurement Yearbook (MMY)* is the standard reference for determining the reliability and validity of the test(s) administered in an evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the lists of accepted tests:

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- **CLINICAL OBSERVATIONS:** Clinical observations have a supplemental role in the evaluation process and should always be included. They are especially important when standard scores do not accurately reflect a child's deficits in order to qualify the child for therapy. A detailed narrative or description of a child's limitations and how they affect functional performance may constitute the primary justification of medical necessity when a standardized evaluation is inappropriate (see Section 214.400, part D, paragraph 8).

A. Occupational Therapy Tests — Standardized

Test	Abbreviation
Adaptive Behavior Scale — School Edition	ABS-S
Ashworth Scale	
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Bruininks-Oseretsky Test of Motor Proficiency — Second Edition	BOT-2
Children's Handwriting Evaluation Scale	CHES
Cognitive Performance Test	CPT
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Developmental Test of Visual Motor Integration	VMI
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Evaluation Tool of Children's Handwriting	ETCH
Functional Independence Measure — young version	WeeFIM
Functional Independence Measure — 7 years of age to adult	FIM
Jacobs Prevocational Skills Assessment	
Kohlman Evaluation of Living Skills	KELS

Test	Abbreviation
Miller Function and Participation Scales	M-Fun
Milwaukee Evaluation of Daily Living Skills	MEDLS
Motor Free Visual Perception Test	MVPT
Motor Free Visual Perception Test — Revised	MVPT-R
Mullen Scales of Early Learning	MSEL
<b>NOTE: Although the MSEL is an accepted standardized test, it is felt by the Therapy Advisory Council (TAC) that an additional test should be administered.</b>	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales — 2	PDMS-2
Pediatric Evaluation of Disability Inventory	PEDI
<b>NOTE: The PEDI can also be used for older children whose functional abilities fall below that expected of a 7 ½ year old with no disabilities. In this case, the scaled score is the most appropriate score to consider.</b>	
Purdue Pegboard Test	
Range of Motion	ROM
Sensory Integration and Praxis Test	SIPT
Sensory Integration Inventory Revised	SII-R
Sensory Processing Measure	SPM
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Sensory Profile, Adolescent/Adult	
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Test of Visual Perceptual Skills	TVPS
Test of Visual Perceptual Skills — Upper Level	TVPS
Toddler and Infant Motor Evaluation	TIME
Wide Range Assessment of Visual Motor Abilities	WRAVMA

## B. Occupational Therapy Tests — Supplemental

Test	Abbreviation
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Test	Abbreviation
Analysis of Sensory Behavior Inventory	
Battelle Developmental Inventory	BDI
Bay Area Functional Performance Evaluation	BaFPE
Brigance Developmental Inventory	BDI
Developmental Assessment of Young Children	DAYC
Early Learning Accomplishment Profile	E-LAP
Erhardt Developmental Prehension Assessment	EDPA
Functional Profile	
<u>Goal-Oriented Assessment of Life Skills</u>	<u>GOAL</u>
Goodenough Harris Draw a Person Scale Test	
Grip and Pinch Strength	
Hawaii Early Learning Profile	HELP
Jordan Left-Right Reversal Test	JLRRT
Knox Preschool Play Scale	
Learning Accomplishment Profile	LAP
Manual Muscle Test	MMT
Miller Assessment for Preschoolers	MAP
School Function Assessment	SFA
Sensorimotor Performance Analysis	SPA
Sensory Integration Inventory	SII
Social Skills Rating System	SSRS

214.320

**Accepted Tests for Physical Therapy**9-1-1311-1-  
14

Tests used must be norm-referenced, standardized, age appropriate and specific to the suspected area(s) of deficit. The following list of tests is not all-inclusive. When using a test that is not listed below, the provider must include an explanation and justification in the evaluation report to support the use of the chosen test. The *Mental Measurement Yearbook (MMY)* is the standard reference for determining the reliability and validity of the tests administered in an evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the following lists of accepted tests:

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A. Physical Therapy Tests — Standardized

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Ashworth Scale	
Assessment of Adaptive Areas	AAA
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Test of Gross Motor Development, Second Edition	TGMD-2
Toddler and Infant Motor Evaluation	

B. Physical Therapy Tests — Supplemental

Test	Abbreviation
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Test	Abbreviation
Battelle Developmental Inventory	BDI
Bayley Scales of Infant Development, Second Edition	BSID-2
Brigance Developmental Inventory	BDI
Developmental Assessment for Students with Severe Disabilities, Second Edition	DASH-2
Developmental Assessment of Young Children	DAYC
Early Learning Accomplishment Profile	E-LAP
<u>Goal-Oriented Assessment of Life Skills</u>	<u>GOAL</u>
Hawaii Early Learning Profile	HELP
Learning Accomplishment Profile	LAP
Manual Muscle Test	MMT
Milani-Comparetti Developmental Examination	
Miller Assessment for Preschoolers	MAP
<u>Miller Function and Participation Scales</u>	<u>M-Fun</u>
Neonatal Behavioral Assessment Scale	NBAS

## C. Physical Therapy Tests — Piloted

Test	Abbreviation
Assessment for Persons Profoundly or Severely Impaired	APPSI

214.420

## Intelligence Quotient (IQ) Testing

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1-14

Children receiving language intervention therapy must have cognitive testing once they reach ten (10) years of age. This also applies to home-schooled children. If the IQ score is higher than the qualifying language scores, the child qualifies for language therapy; if the IQ score is lower than the qualifying language test scores, the child would appear to be functioning at or above the expected level. In this case, the child may be denied for language therapy. If a provider determines that therapy is warranted, an in-depth functional profile must be documented. However, IQ scores are not required for children under ten (10) years of age.

## A. IQ Tests — Traditional

Test	Abbreviation
Stanford-Binet	S-B
The Wechsler Preschool & Primary Scales of Intelligence, Revised	WPPSI-R
Slosson	
Wechsler Intelligence Scale for Children, Third Edition	WISC-III
Kauffman Adolescent & Adult Intelligence Test	KAIT
<u>Kaufman Assessment Battery Test for Children—Second Edition</u>	<u>KABC-II</u>
Wechsler Adult Intelligence Scale, Third Edition	WAIS-III

<b>Test</b>	<b>Abbreviation</b>
Differential Ability Scales	DAS
Reynolds Intellectual Assessment Scales	RIAS

## B. Severe and Profound IQ Test/Non-Traditional — Supplemental — Norm-Reference

<b>Test</b>	<b>Abbreviation</b>
Comprehensive Test of Nonverbal Intelligence	CTONI
Test of Nonverbal Intelligence — 1997	TONI-3
Functional Linguistic Communication Inventory	FLCI