EXHIBIT G

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

DEPARTMENT/AGENCY	ENCY Department of Human Services					
DIVISION	Division of Medical Services					
DIVISION DIRECTOR	Dawn Stehle					·
CONTACT PERSON ADDRESS	Cathy Coffmar PO Box 1437, Rock, AR 722	Slot S295, Little 03				
PHONE NO. 501-537-16 NAME OF PRESENTER ATMEETING	Г COMMITTE	EE Tam	E- MAIL ni Harlan	Cathy.coff	man@dhs.ark	ansas.gov
PRESENTER E-MAIL tan	ni.harlan@dhs.a	rkansas.gov				
 B. Please answer each quest necessary. C. If you have a method of it this Rule" below. D. Submit two (2) copies of two (2) copies of the prop Donna K. Dav Administrativ Arkansas Legi Bureau of Leg 	 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, 5th Floor 					
1. What is the short title of the	is				and the standard of the standards of	· •
Include the Breighton Scale of Joint Mobility, the Test of Expressive Language, the Test for Auditory Comprehension of Language and the Woodcock-Johnson Test Cognitive Ability 4 th Edition to approved therapy testing tools. 3. Is this rule required to comply with a federal statute, rule, or regulation? Yes No						
If yes, please provide the fectation.	egulation? Yes ☐ No ☒ If yes, please provide the federal rule, regulation, and/or statute					

4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? If yes, what is the effective date of the emergency rule?	Yes 🗌	No 🖾
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	n.	
Does this repeal an existing rule? Yes No No If yes, a copy of the repealed rule is to be included with your c replaced with a new rule, please provide a summary of the rule does.		
Is this an amendment to an existing rule? Yes No I No I If yes, please attach a mark-up showing the changes in the exist changes. Note:	iting rule and a sum	nmary of the substantive
6. Cite the state law that grants the authority for this proposed rul Code citation. <u>Arkansas Statute 20-76-201</u>	e? If codified, pleas	se give the Arkansas
7. What is the purpose of this proposed rule? The purpose of of accepted tests used by Occupational, Physical and Speech Thera		
8. Please provide the address where this rule is publicly accessible required by Arkansas Code § 25-19-108(b). https://www.medicaid.state.ar.us/general/comment/comment.aspx	e in electronic form	n via the Internet as
9. Will a public hearing be held on this proposed rule? Yes N	ſo ⊠	
If yes, please complete the following:		
Date:		
Time:		
Place:		
10. When does the public comment period expire for permanent pronouncer 13, 2015	,	ŕ
11. What is the proposed effective date of this proposed rule? (Mus January 1, 2016	st provide a date.)	·
		•

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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.

Medical associations, interested providers and advocacy organizations. Their positions for or against are not known at this time.

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Department of Human Services								
DIVISION Division of Medical Services								
PE	RSO	N COMPLE	TING THIS	STATEMENT Lynn Burt	on			
TE	LEPI	HONE NO.	501-682-185	7 FAX NO. 501-404-4619	EMAIL: Lyn	ın.burton@dh	s.arkansas.gov	
To Sta	comp ateme	oly with Ark nt and file tv	. Code Ann. § vo copies with	25-15-204(e), please comp the questionnaire and prop	plete the follow cosed rules.	ring Financial	Impact	
	IORT JLE	TITLE OI	THIS	Therapy 3-15				
1.	Does	s this propos	ed, amended,	or repealed rule have a fina	incial impact?	Yes 🗌	No 🔀	
2.	economic, or other evidence and information available concerning the				No 🗌			
3.	In co	onsideration e agency to	of the alternat be the least co	ives to this rule, was this ru ostly rule considered?	ıle determined	Yes 🔀	No 🗌	
	If an	agency is pr	oposing a mo	re 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;			welfare, and				
	(d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.			f so, please				
4.	If the	purpose of t	his rule is to in	nplement a federal rule or re	gulation, please	state the follo	wing:	
	(a)	What is the	cost to imple	ment the federal rule or reg	ulation?			
	<u>Cur</u>	rent Fiscal	<u>Year</u>	Nex	t Fiscal Year			
	Gen		\$0	Gen	eral Revenue	\$0		
	Revo	enue eral Funds		Fade	eral Funds		<u> </u>	
		rai Funds			Cash Funds			
Special Revenue		Spec	Special Revenue					
Other (Identify)		Othe	Other (Identify)					

Total	\$0	Total	
(b) What	is the additional cost of the	state rule?	
Current]	Fiscal Year	Next Fiscal Year	
General R	evenue	General Revenue	
Federal Fi	ınds	$\mathcal{D}_{\alpha}J_{-\alpha \alpha}I_{-\alpha}J_{\alpha}$	
Cash Fund	is	Cash Funds	
Special Re	evenue	Special Revenue	
Other (Ide	entify)	Other (Identify)	
Total		Total	
they are aff Current Fisca \$	ected.	Identify the entity (ies) subject to the proposed rule ar Next Fiscal Year \$	id oxplain now
this rule? Is the Current Fiscal \$ 0 These addition	al Year al diagnostic tools have be	y fiscal year to state, county, and municipal government or grant? Please explain how the government is affect Next Fiscal Year \$ 0 en added to the provider manual to assess cognitive mechanism related to these tools to the State.	
or obligation or	on of at least one hundred t	to Questions #5 and #6 above, is there a new or increathousand dollars (\$100,000) per year to a private indivigovernment, county government, municipal government bined?	idual,
		Yes No 🖂	
time of fili	ng the financial impact stat	t. Code Ann. § 25-15-204(e)(4) to file written findings tement. The written findings shall be filed simultaneously shall include, without limitation, the following:	
(1) a staten	nent of the rule's basis and	purpose;	
	blem the agency seeks to ac s required by statute;	ddress with the proposed rule, including a statement of	f whether

- (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 for Therapy 3-15

Effective January 1, 2016 the Occupational, Physical and Speech Therapy Services Manual will be updated to include the Breighton Scale of Joint Mobility test, Test of Expressive Language, Test for Auditory Comprehension of Language and the Woodcock-Johnson Test Cognitive Ability, 4th Edition. This rule is necessary to ensure that the list of accepted tests used by Occupational, Physical and Speech Therapists are current and up to date to provide accurate diagnosis of the Medicaid beneficiary.

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Division of Medical Services

Program Development & Quality Assurance

P.O. Box 1437, Slot S295 · Little Rock, AR 72203-1437 501-320-6428 · Fax: 501-404-4619 TDD/TTY: 501-682-6789



TO:

Arkansas Medicaid Health Care Providers - Occupational, Physical.

Speech Therapy Services

EFFECTIVE DATE:

January 1, 2016

SUBJECT:

Provider Manual Update Transmittal THERAPY-3-15

REMOVE	•	INSERT	
Section	Effective Date	Section	Effective Date
214.310	11-1-14	214.310	1-1-16
214.320	11-1-14	214.320	1-1-16
214.410	3-1-14	214.410	1-1-16
214.420	11-1-14	214.420	1-1-16

Explanation of Updates

Section 214.310 is updated to add the Breighton Scale of Joint Mobility to the list of supplemental accepted tests for occupational therapy.

Section 214.320 is updated to add the Breighton Scale of Joint Mobility to the list of supplemental accepted tests for physical therapy.

Section 214.410 is updated to add the Test for Auditory Comprehension of Language, Fourth Edition and the Test of Expressive Language to the list of standardized accepted language tests for speech-language therapy.

Section 214.420 is updated to add the Woodcock-Johnson Test Cognitive Ability, 4th Edition to the list of traditional Intelligence Quotient (IQ) 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 Health Care Providers – Occupational, Physical, Speech Therapy Services Provider Manual Update THERAPY-3-15 Page 2

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.

Thank you for your participation in the Arkansas Medicaid Program.

Dawn Stehle

Director

TOC not required

214.310 Accepted Tests for Occupational Therapy



1-1-16

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
Milwaukee Evaluation of Daily Living Skills	MEDLS

Test	Abbreviation
Motor Free Visual Perception Test	MVPT
Motor Free Visual Perception Test — Revised	MVPT-R
Mullen Scales of Early Learning	MSEL
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.	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales — 2	PDMS-2
Pediatric Evaluation of Disability Inventory	PEDI
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.	PROPOSE
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
Occupational Therapy Tests — Supplemental	
Test	Abbreviation
Analysis of Sensory Behavior Inventory	
Battelle Developmental Inventory	BDI

Test	Abbreviation
Bay Area Functional Performance Evaluation	BaFPE
Breighton Scale of Joint Mobility	
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

1-1-16

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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- 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. Physical Therapy Tests — Standardized

Test	Abbreviation
Test Alberta Infant Motor Scale	AIMS
Alberta Infant Motor Scale Adaptive Behavior Inventory	ABI
Adaptive Behavior Scale — School, Second Edition	ABS-S:2
Adaptive Berlavior Scale — Scribor, Second Edition	
Assessment of Adaptive Areas	AAA
Bruininks-Oseretsky test of Motor Proficiency	вомР
Bruininks-Oseretsky Test of Motor Proficiency, Second Edition	BOT-2
	CTMT
Comprehensive Trail-Making Test	WeeFIM
Functional Independence Measure for Children	FIM
Functional Independence Measure — 7 years of age to adult	GMFM
Gross Motor Function Measure	Movement ABC
Movement Assessment Battery for Children Mullen Scales of Early Learning	MSEL
NOTE: Although the MSEL is an accepted standardized test, it	
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.	PDMS
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. Peabody Developmental Motor Scales	PDMS
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition	PDMS-2
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale	PDMS-2 PBS
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition	PDMS-2
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale Pediatric Evaluation of Disability Inventory 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	PDMS-2 PBS
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale Pediatric Evaluation of Disability Inventory 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.	PDMS-2 PBS PEDI
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale Pediatric Evaluation of Disability Inventory 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. Range of Motion — Functional Performance Impairments	PDMS-2 PBS PEDI
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale Pediatric Evaluation of Disability Inventory 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. Range of Motion — Functional Performance Impairments Sensory Processing Measure	PDMS-2 PBS PEDI ROM SPM
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. Peabody Developmental Motor Scales Peabody Developmental Motor Scales, Second Edition Pediatric Balance Scale Pediatric Evaluation of Disability Inventory 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. Range of Motion — Functional Performance Impairments Sensory Processing Measure Sensory Processing Measure-Preschool	PDMS-2 PBS PEDI ROM SPM SPM-P

B. Physical Therapy Tests — Supplemental

90 Y	的复数 医眼球结合性 医克克氏 网络克拉斯克拉斯 医动物 医甲基酚 化二氯甲基酚 化二氯甲基酚 化二氯甲基酚 医二氯甲基酚 化二氯甲基酚	and the property of the property of the contract of the contra
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• • •	하는 보통 가는 것들다. 그 하는 그 살아들은 그래는 그 말중심합하다는 근상하는 사이 본 그들이 걸어 먹는 것이 되고 되었다.	리 교육원들이 범인 사람들은 이번 경기를 중하는 중요한 근 승규는 등을 때 되는 것 같습니다.
	Pattalla Davalanmental Inventory	하는 전문하는 그 가장하는 그 몸() 하는 사람은 사람이 되었다.
	Battelle Developmental Inventory	그렇게 살아왔다. 그는 그 그 그 그 사람들은 부탁이 없는 그 생님은 이 없었다.
	그 사람 선생님은 그리는 작가 되었다면서 그 그 것이 그 그는 그는 사람들이 그 것이 나를 보는 것이다.	
		The state of the s



Test	Abbreviation
Bayley Scales of Infant Development, Second Edition	BSID-2
Breighton Scale of Joint Mobility	
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

214.410 Accepted Tests for Speech-Language Therapy

1-1-16

Tests used must be norm-referenced, standardized, age appropriate and specific to the disorder being assessed. 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 to determine the reliability and validity of the test(s) administered in the evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the following 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, a criterion-referenced measure, descriptive in design, a structured probe or an accepted clinical analysis procedure (see next paragraph). Supplemental tests may not replace standardized tests. Exception: A tool(s) from a supplemental list may be used to guide data collection for the purpose of generating an in-depth, functional profile. See Section 214.400, part D, paragraph 8.
- CLINICAL ANALYSIS PROCEDURES: Specific analysis methods used for in-depth examination of clinical data obtained during assessment and used to further document deficits and support standardized results. Clinical analysis procedures may not replace standardized tests. Exception: Procedures from this list may be used to analyze data

collected and assist in generating an in-depth, functional profile. (See Section 214.400, part. D, paragraph 8.)

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 the child's communication behaviors (in-depth,
functional profile) may constitute the primary justification of medical necessity.

STANDARDIZED SCORING KEY:

Mild: Scores between 84-78; -1.0 standard deviation

Moderate: Scores between 77-71; -1.5 standard deviations

Severe: Scores between 70-64; -2.0 standard deviations

Profound: Scores of 63 or lower; -2.0+ standard deviations

 A. Language Tests — Standardized (Newer editions of currently listed tests are also acceptable.)

Assessment of Language-Related Functional Activities	
	ALFA
Assessment of Literacy and Language	ALL
Behavior Rating Inventory of Executive Function	BRIEF
Behavioural Assessment of the Dysexecutive Syndrome for Children	BADS-C
Brief Test of Head Injury	втні
Children's Communication Checklist [Diagnostic for pragmatics]	CCC
Clinical Evaluation of Language Fundamentals — Preschool	CELF-P
Clinical Evaluation of Language Fundamentals, Fourth Edition	CELF-4
Clinical Evaluation of Language Fundamentals, Third Edition	CELF-3
Communication Abilities Diagnostic Test	CADeT
Communication Activities of Daily Living, Second Edition	CADL-2
Comprehensive Assessment of Spoken Language	CASL
Comprehensive Receptive and Expressive Vocabulary Test, Second Edition	CREVT-2
Comprehensive Test of Phonological Processing	CTOPP
Diagnostic Evaluation of Language Variation — Norm-Referenced	DELV-NR
Emerging Literacy and Language Assessment	ELLA
Expressive Language Test	ELT
Expressive One-Word Picture Vocabulary Test, 2000 Edition	EOWPVT
Fullerton Language Test for Adolescents, Second Edition	FLTA
Goldman-Fristoe-Woodcock Test of Auditory Discrimination	GFWTAD
HELP Test-Elementary	HELP
Illinois Test of Psycholinguistic Abilities, Third Edition	ITPA-3



Test	Abbreviation
Language Processing Test — Revised	LPT-R
Language Processing Test, Third Edition	LPT-3
Listening Comprehension Test Adolescent	LCT-A
Listening Comprehension Test, Second Edition	LCT-2
Montgomery Assessment of Vocabulary Acquisition	MAVA
Mullen Scales of Early Learning	MSEL
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.	FROPOSE
Oral and Written Language Scales	OWLS
Peabody Picture Vocabulary Test, Fourth Edition	PPVT-4
Peabody Picture Vocabulary Test, Third Edition	PPVT-3
Phonological Awareness Test	PAT
Preschool Language Scale, Fourth Edition	PLS-4
Preschool Language Scale, Third Edition	PLS-3
Receptive One-Word Picture Vocabulary Test, Second Edition	ROWPVT-2
Receptive-Expressive Emergent Language Test, Second Edition	REEL-2
Receptive-Expressive Emergent Language Test, Third Edition	REEL-3
Ross Information Processing Assessment — Primary	RIPA-P
Ross Information Processing Assessment, Second Edition	RIPA-2
Scales of Cognitive Ability for Traumatic Brain Injury	SCATBI
Social Competence and Behavior Evaluation, Preschool Edition	SCBE
Social Language Development Test—Adolescent	SLDT-A
Social Language Development Test—Elementary	SLDT-E
Social Responsiveness Scale	SRS
Social Skills Rating System — Preschool & Elementary Level	SSRS-PE
Social Skills Rating System — Secondary Level	SSRS-S
Strong Narrative Assessment Procedure	SNAP
Structured Photographic Expressive Language Test	SPELT-3
Test of Adolescent and Adult Language, Third Edition	TOAL-3
Test of Adolescent /Adult Word Finding	TAWF
Test for Auditory Comprehension of Language, Third Edition	TACL-3
Test for Auditory Comprehension of Language, Fourth Edition	TACL-4
Test of Auditory Perceptual Skills — Revised	TAPS-R
Test of Auditory Perceptual Skills, Third Edition	TAPS-3
Test of Auditory Reasoning and Processing Skills	TARPS
Test of Early Communication and Emerging Language	TECEL

Abbreviation
TELD-3
TEXL
TLC-E
TOLD-I:3
TOLD-P:3
TNL,
TOPA
TOPL
TOPL-2
TOPS-A
TOPS-R
TORC-2
TOSS-I
TOSS-P
TWF-2
TOWK
TWL-3
ADT
WT2A
WT2E

B. Language Tests — Supplemental

Test	Abbreviation
Assessment for Persons Profoundly or Severely Impaired	APPSI
Behavior Analysis Language Instrument	BALL
Birth to Three Checklist	
Clinical Evaluation of Language Fundamentals-4 Screening Test	CELF-4
Children's Communication Checklist [Language Screener]	CCC-2
CID Early Speech Perception	CID-ESP
CID Speech Perception Evaluation	CID-SPICE
CID Teacher Assessment of Grammatical Structures	CID-TAGS
Communication Matrix	
Developmental Sentence Scoring [Lee]	DSS
Differential Screening Test for Processing	DSTP
Evaluating Acquired Skills in Communication — Revised	EASIC-R

Test	Abbreviation
Evaluating Acquired Skills in Communication, Third Edition	EASIC-3
Fluharty Preschool Speech and Language Screening Test, Second Edition	Fluharty-2
Functional Communication Profile — Revised	FCP-R
Joliet 3-Minute Preschool Speech and Language Screen	Joliet-P
Joliet 3-Minute Speech and Language Screen — Revised	Joliet-R
Kindergarten Language Screening Test	KLST-2
MacArthur Communicative Development Inventories	CDis
MacArthur-Bates Communicative Development Inventories	CDIs
Nonspeech Test for Receptive/Expressive Language	Nonspeech
Preschool Language Scale — 4 Screening Test	
Preverbal Assessment-Intervention Profile	PAIP
Reynell Developmental Language Scales	Reynell
Rossetti Infant-Toddler Language Scale	Rossetti
Screening Test of Adolescent Language	STAL
Social Communication Questionnaire	SCQ
Social-Emotional Évaluation	SEE
Test for Auditory Processing Disorders in Children — Revised	SCAN-C
Token Test for Children, Second Edition	TTFC-2



C. Language — Clinical Analysis Procedures — Language sampling and analysis, which may include the following:

Test	Abbreviation
Mean Length of Utterance	MLU
Type Token Ratio	TTR
Developmental Sentence Score	DSS
Structural analysis (Brown's stages)	
Semantic analysis	
Discourse analysis	

D. Speech Production Tests — Standardized (Newer editions of currently listed tests are also acceptable.)

Test	Abbreviation
Apraxia Battery for Adults, Second Edition	ABA-2
Arizona Articulation Proficiency Scale, Third Edition	Arizona-3
Assessment of Intelligibility of Dysarthric Speech	AIDS

Test	Abbreviation
Assessment of Phonological Processes — Revised	APPS-R
Bernthal-Bankson Test of Phonology	ввтор
Clinical Assessment of Articulation and Phonology	CAAP
Diagnostic Evaluation of Articulation and Phonology, U.S. Edition	DEAP
Goldman-Fristoe Test of Articulation, Second Edition	GFTA-2
Hodson Assessment of Phonological Patterns — Third Edition	HAPP-3
Kaufman Speech Praxis Test	KSPT
Khan-Lewis Phonological Analysis	KLPA-2
Photo Articulation Test, Third Edition	PAT-3
Slosson Articulation Language Test with Phonology	SALT-P
Smit-Hand Articulation and Phonology Evaluation	SHAPE
Structured Photographic Articulation Test II Featuring Dudsberry	SPAT-D II
Stuttering Severity Instrument for Children and Adults	SSI-3
Weiss Comprehensive Articulation Test	WCAT

E. Speech Production Tests — Supplemental

	SED
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Test	Abbreviation
A-19 Scale for Children Who Stutter	A-19
Apraxia Profile	
Assessment of the Child's Experience of Stuttering	ACES
CALMS Rating Scale for School-Age Children Who Stutter	CALMS
Children's Speech Intelligibility Measure	CSIM
CID Phonetic Inventory	CID-PI
CID SPeech INtelligibility Evaluation	CID-SPINE
Communication Attitude Test for Preschool and Kindergarten Children Who Stutter	KiddyCAT
Communication Attitude Test — Revised	CAT-R
Computerized Articulation and Phonology Evaluation System	CAPES
Marshalla Oral Sensorimotor Test	MOST
Modified Erickson Scale of Communication Attitudes	
Procedures for the Phonological Analysis of Children's Language [Ingram]	
Screening Test for Developmental Apraxia of Speech, Second Edition	STDAS-2
Secord Contextual Articulation Tests	S-CAT
Verbal-Motor Production Assessment for Children	VMPAC
Voice Assessment Protocol for Children and Adults	VAP

- F. Speech Production Clinical Analysis Procedures Speech sampling and analysis, which may include the following:
 - 1. Debra Beckman's oral-motor assessment procedures
 - 2. Food chaining questionnaire
 - 3. Instrumentation-based voice evaluation
 - 4. Item and replica analysis
 - 5. Percentage of consonants correct
 - 6. Percentage of intelligibility
 - 7. Percentage of phonemes correct
 - 8. Percentage of syllables stuttered
 - 9. Perceptual voice evaluation
 - Phonetic inventory
 - 11. Phonological process analysis

Intelligence Quotient (IQ) Testing

12. Suzanne Evans-Morris oral-motor assessment procedures

12. Suzanne Evans-Morris oral-motor

1-1-16

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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

214,420

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
Reynolds Intellectual Assessment Scales	RIAS
Woodcock-Johnson Test Cognitive Ability, 4 th Edition	WJ-IV Cog

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

Test	Abbreviation

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

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TOC not required

Accepted Tests for Occupational Therapy 214.310

<u>1-1-16</u>11-1-

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).

Occupational Therapy Tests — Standardized Α.

Test	Abbreviation
Adaptive Behavior Scale — School Edition	ABS-S
Ashworth Scale	
Box & Block Test of Manual Dexterity	BBT
Bruininks-Oseretsky Test of Motor Proficiency	ВОМР
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
Milwaukee Evaluation of Daily Living Skills	MEDLS

Test	Abbreviation
Motor Free Visual Perception Test	MVPT
Motor Free Visual Perception Test — Revised	MVPT-R
Mullen Scales of Early Learning	MSEL
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.	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales — 2	PDMS-2
Pediatric Evaluation of Disability Inventory	PEDI
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.	
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
	T) (DO
Test of Visual Perceptual Skills	TVPS
Test of Visual Perceptual Skills Test of Visual Perceptual Skills — Upper Level	TVPS
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B. Occupational Therapy Tests — Supplemental

Test Abbreviation
Analysis of Sensory Behavior Inventory
 Battelle Developmental Inventory BDI

Test	Abbreviation
Bay Area Functional Performance Evaluation	BaFPE
Breighton Scale of Joint Mobility	
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	11 SURFER L. P
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

<u>1-1-16</u>11-1-

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:

- 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 the 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. 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	ВОМР
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
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.	
Peabody Developmental Motor Scales	PDMS
Peabody Developmental Motor Scales, Second Edition	PDMS-2
Pediatric Balance Scale	PBS
Pediatric Evaluation of Disability Inventory	PEDI
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.	
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
Breighton Scale of Joint Mobility	
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	ммт
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

214.410 Accepted Tests for Speech-Language Therapy

<u>1-1-16</u>3-1-

Tests used must be norm-referenced, standardized, age appropriate and specific to the disorder being assessed. 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 to determine the reliability and validity of the test(s) administered in the evaluation. Providers should refer to the *MMY* for additional information regarding specific tests. These definitions are applied to the following 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, a criterion-referenced measure, descriptive in design, a structured probe or an accepted clinical analysis procedure (see next paragraph). Supplemental tests may not replace standardized tests. Exception: A tool(s) from a supplemental list may be used to guide data collection for the purpose of generating an in-depth, functional profile. See Section 214.400, part D, paragraph 8.
- CLINICAL ANALYSIS PROCEDURES: Specific analysis methods used for in-depth examination of clinical data obtained during assessment and used to further document deficits and support standardized results. Clinical analysis procedures may not replace standardized tests. Exception: Procedures from this list may be used to analyze data

collected and assist in generating an in-depth, functional profile. (See Section 214.400, part D, paragraph 8.)

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 the child's communication behaviors (in-depth,
functional profile) may constitute the primary justification of medical necessity.

• STANDARDIZED SCORING KEY:

Mild: Scores between 84-78; -1.0 standard deviation

Moderate: Scores between 77-71; -1.5 standard deviations

Severe: Scores between 70-64; -2.0 standard deviations

Profound: Scores of 63 or lower; -2.0+ standard deviations

 A. Language Tests — Standardized (Newer editions of currently listed tests are also acceptable.)

Test	Abbreviation
Assessment of Language-Related Functional Activities	ALFA
Assessment of Literacy and Language	ALL
Behavior Rating Inventory of Executive Function	BRIEF
Behavioural Assessment of the Dysexecutive Syndrome for Children	BADS-C
Brief Test of Head Injury	BTHI
Children's Communication Checklist [Diagnostic for pragmatics]	CCC
Clinical Evaluation of Language Fundamentals — Preschool	CELF-P
Clinical Evaluation of Language Fundamentals, Fourth Edition	CELF-4
Clinical Evaluation of Language Fundamentals, Third Edition	CELF-3
Communication Abilities Diagnostic Test	CADeT
Communication Activities of Daily Living, Second Edition	CADL-2
Comprehensive Assessment of Spoken Language	CASL
Comprehensive Receptive and Expressive Vocabulary Test, Second Edition	CREVT-2
Comprehensive Test of Phonological Processing	CTOPP
Diagnostic Evaluation of Language Variation — Norm-Referenced	DELV-NR
Emerging Literacy and Language Assessment	ELLA
Expressive Language Test	ELT
Expressive One-Word Picture Vocabulary Test, 2000 Edition	EOWPVT
Fullerton Language Test for Adolescents, Second Edition	FLTA
Goldman-Fristoe-Woodcock Test of Auditory Discrimination	GFWTAD
HELP Test-Elementary	HELP
Illinois Test of Psycholinguistic Abilities, Third Edition	ITPA-3

Test	Abbreviation
Language Processing Test — Revised	LPT-R
Language Processing Test, Third Edition	LPT-3
Listening Comprehension Test Adolescent	LCT-A
Listening Comprehension Test, Second Edition	LCT-2
Montgomery Assessment of Vocabulary Acquisition	MAVA
Mullen Scales of Early Learning	MSEL
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.	MOZE
Oral and Written Language Scales	OWLS
Peabody Picture Vocabulary Test, Fourth Edition	PPVT-4
Peabody Picture Vocabulary Test, Third Edition	PPVT-3
Phonological Awareness Test	PAT
Preschool Language Scale, Fourth Edition	PLS-4
Preschool Language Scale, Third Edition	PLS-3
Receptive One-Word Picture Vocabulary Test, Second Edition	ROWPVT-2
Receptive-Expressive Emergent Language Test, Second Edition	REEL-2
Receptive-Expressive Emergent Language Test, Third Edition	REEL-3
Ross Information Processing Assessment — Primary	RIPA-P
Ross Information Processing Assessment, Second Edition	RIPA-2
Scales of Cognitive Ability for Traumatic Brain Injury	SCATBI
Social Competence and Behavior Evaluation, Preschool Edition	SCBE ·
Social Language Development Test—Adolescent	SLDT-A
Social Language Development Test—Elementary	SLDT-E
Social Responsiveness Scale	SRS
Social Skills Rating System — Preschool & Elementary Level	SSRS-PE
Social Skills Rating System — Secondary Level	SSRS-S
Strong Narrative Assessment Procedure	SNAP
Structured Photographic Expressive Language Test	SPELT-3
Test of Adolescent and Adult Language, Third Edition	TOAL-3
Test of Adolescent /Adult Word Finding	TAWF
Test for Auditory Comprehension of Language, Third Edition	TACL-3
Test for Auditory Comprehension of Language, Fourth Edition	TACL-4
Test of Auditory Perceptual Skills — Revised	TAPS-R
Test of Auditory Perceptual Skills, Third Edition	TAPS-3
Test of Auditory Reasoning and Processing Skills	TARPS
Test of Early Communication and Emerging Language	TECEL

Test	Abbreviation
Test of Early Language Development, Third Edition	TELD-3
Test of Expressive Language	<u>TEXL</u>
Test of Language Competence — Expanded Edition	TLC-E
Test of Language Development — Intermediate, Third Edition	TOLD-I:3
Test of Language Development — Primary, Third Edition	TOLD-P:3
Test of Narrative Language	TNL
Test of Phonological Awareness	TOPA
Test of Pragmatic Language	TOPL
Test of Pragmatic Language, Second Edition	TOPL-2
Test of Problem Solving — Adolescent	TOPS-A
Test of Problem Solving — Revised Elementary	TOPS-R
Test of Reading Comprehension, Third Edition	TORC-2
Test of Semantic Skills: Intermediate	TOSS-I
Test of Semantic Skills: Primary	TOSS-P
Test of Word Finding, Second Edition	TWF-2
Test of Word Knowledge	TOWK
Test of Written Language, Third Edition	TWL-3
The Listening Test	
Wepman's Auditory Discrimination Test, Second Edition	ADT
Word Test — 2 Adolescent	WT2A
Word Test — 2 Elementary	WT2E

B. Language Tests — Supplemental

Test per succession and the second se	Abbreviation
Assessment for Persons Profoundly or Severely Impaired	APPSI
Behavior Analysis Language Instrument	BALI
Birth to Three Checklist	
Clinical Evaluation of Language Fundamentals-4 Screening Test	CELF-4
Children's Communication Checklist [Language Screener]	CCC-2
CID Early Speech Perception	CID-ESP
CID Speech Perception Evaluation	CID-SPICE
CID Teacher Assessment of Grammatical Structures	CID-TAGS
Communication Matrix	
Developmental Sentence Scoring [Lee]	DSS
Differential Screening Test for Processing	DSTP
Evaluating Acquired Skills in Communication — Revised	EASIC-R
<u> </u>	

Test	Abbreviation
Evaluating Acquired Skills in Communication, Third Edition	EASIC-3
Fluharty Preschool Speech and Language Screening Test, Second Edition	Fluharty-2
Functional Communication Profile — Revised	FCP-R
Joliet 3-Minute Preschool Speech and Language Screen	Joliet-P
Joliet 3-Minute Speech and Language Screen — Revised	Joliet-R
Kindergarten Language Screening Test	KLST-2
MacArthur Communicative Development Inventories	CDIs .
MacArthur-Bates Communicative Development Inventories	CDIs
Nonspeech Test for Receptive/Expressive Language	Nonspeech
Preschool Language Scale — 4 Screening Test	
Preverbal Assessment-Intervention Profile	PAIP
Reynell Developmental Language Scales	Reynell
Rossetti Infant-Toddler Language Scale	Rossetti
Screening Test of Adolescent Language	STAL
Social Communication Questionnaire	SCQ
Social-Emotional Evaluation	SEE
Test for Auditory Processing Disorders in Children — Revised	SCAN-C
Token Test for Children, Second Edition	TTFC-2

C. Language — Clinical Analysis Procedures — Language sampling and analysis, which may include the following:

Test	Abbreviation
Mean Length of Utterance	MLU
Type Token Ratio	TTR
Developmental Sentence Score	DSS
Structural analysis (Brown's stages)	
Semantic analysis	
Discourse analysis	

D. Speech Production Tests — Standardized (Newer editions of currently listed tests are also acceptable.)

Test	Abbreviation
Apraxia Battery for Adults, Second Edition	ABA-2
Arizona Articulation Proficiency Scale, Third Edition	Arizona-3
Assessment of Intelligibility of Dysarthric Speech	AIDS

Test	Abbreviation
Assessment of Phonological Processes — Revised	APPS-R
Bernthal-Bankson Test of Phonology	ввтор
Clinical Assessment of Articulation and Phonology	CAAP
Diagnostic Evaluation of Articulation and Phonology, U.S. Edition	DEAP
Goldman-Fristoe Test of Articulation, Second Edition	GFTA-2
Hodson Assessment of Phonological Patterns — Third Edition	HAPP-3
Kaufman Speech Praxis Test	KSPT
Khan-Lewis Phonological Analysis	KLPA-2
Photo Articulation Test, Third Edition	PAT-3
Slosson Articulation Language Test with Phonology	SALT-P
Smit-Hand Articulation and Phonology Evaluation	SHAPE
Structured Photographic Articulation Test II Featuring Dudsberry	SPAT-D II
Stuttering Severity Instrument for Children and Adults	SSI-3
Weiss Comprehensive Articulation Test	WCAT

E. Speech Production Tests — Supplemental

Test	Abbreviation
A-19 Scale for Children Who Stutter	A-19
Apraxia Profile	
Assessment of the Child's Experience of Stuttering	ACES
CALMS Rating Scale for School-Age Children Who Stutter	CALMS
Children's Speech Intelligibility Measure	CSIM
CID Phonetic Inventory	CID-PI
CID SPeech INtelligibility Evaluation	CID-SPINE
Communication Attitude Test for Preschool and Kindergarten Children Who Stutter	KiddyCAT
Communication Attitude Test — Revised	CAT-R
Computerized Articulation and Phonology Evaluation System	CAPES
Marshalla Oral Sensorimotor Test	MOST
Modified Erickson Scale of Communication Attitudes	
Procedures for the Phonological Analysis of Children's Language [Ingram]	
Screening Test for Developmental Apraxia of Speech, Second Edition	STDAS-2
Secord Contextual Articulation Tests	S-CAT
Verbai-Motor Production Assessment for Children	VMPAC
Voice Assessment Protocol for Children and Adults	VAP

- F. Speech Production — Clinical Analysis Procedures — Speech sampling and analysis. which may include the following:
 - 1. Debra Beckman's oral-motor assessment procedures
 - 2. Food chaining questionnaire
 - 3. Instrumentation-based voice evaluation
 - 4. Item and replica analysis
 - 5. Percentage of consonants correct
 - Percentage of intelligibility 6.
 - 7. Percentage of phonemes correct
 - 8. Percentage of syllables stuttered
 - 9. Perceptual voice evaluation
 - 10. Phonetic inventory
 - 11. Phonological process analysis
 - 12. Suzanne Evans-Morris oral-motor assessment procedures

214,420 Intelligence Quotient (IQ) Testing

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
Reynolds Intellectual Assessment Scales	RIAS
Woodcock-Johnson Test Cognitive Ability, 4th Edition	WJ-IV Cog

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

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Test			Abbreviation

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